

FEC FORM 3X

REPORT OF RECEIPTS AND DISBURSEMENTS

For Other Than An Authorized Committee

Office Use Only

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

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

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

4. TYPE OF REPORT (Choose One)
(a) Quarterly Reports:
 April 15 Quarterly Report (Q1)
 July 15 Quarterly Report (Q2)
 October 15 Quarterly Report (Q3)
 January 31 Year-End Report (YE)
 July 31 Mid-Year Report (Non-election Year Only) (MY)
 Termination Report (TER)
(b) Monthly Report Due On:
 Feb 20 (M2) May 20 (M5) Aug 20 (M8) Nov 20 (M11) (Non-Election Year Only)
 Mar 20 (M3) Jun 20 (M6) Sep 20 (M9) Dec 20 (M12) (Non-Election Year Only)
 Apr 20 (M4) Jul 20 (M7) Oct 20 (M10) Jan 31 (YE)
(c) 12-Day PRE-Election Report for the:
 Primary (12P) General (12G) Runoff (12R)
 Convention (12C) Special (12S)
Election on [MM] / [DD] / [YYYY] in the State of []
(d) 30-Day POST-Election Report for the:
 General (30G) Runoff (30R) Special (30S)
Election on 11 / 08 / 2016 in the State of WI

5. Covering Period [MM] / [DD] / [YYYY] 10 / 20 / 2016 through [MM] / [DD] / [YYYY] 11 / 28 / 2016

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

Signature of Treasurer *Kilgore, Paul, , ,* [Electronically Filed] Date 12 / 08 / 2016

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

**SUMMARY PAGE
OF RECEIPTS AND DISBURSEMENTS**

FEC Form 3X (Rev. 05/2016)

Write or Type Committee Name

Team Ryan

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

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1, <input type="text" value="2016"/>		701099.98
(b) Cash on Hand at Beginning of Reporting Period.....	1297814.56	
(c) Total Receipts (from Line 19)	6468166.02	59171846.80
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B).....	7765980.58	59872946.78
7. Total Disbursements (from Line 31).....	6506831.81	58613798.01
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	1259148.77	1259148.77
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D)	0.00	
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D)	0.00	

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

For further information contact:

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

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

DETAILED SUMMARY PAGE of Receipts

Write or Type Committee Name

Team Ryan

Report Covering the Period: From: M M / D D / Y Y Y Y Y Y
10 / 20 / 2016 To: M M / D D / Y Y Y Y Y Y
11 / 28 / 2016

I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
11. Contributions (other than loans) From:		
(a) Individuals/Persons Other Than Political Committees		
(i) Itemized (use Schedule A).....	5116005.62	48667683.59
(ii) Unitemized	948270.49	4662719.57
(iii) TOTAL (add Lines 11(a)(i) and (ii)).....▶	6064276.11	53330403.16
(b) Political Party Committees	0.00	75000.00
(c) Other Political Committees (such as PACs).....	192645.00	4994535.00
(d) Total Contributions (add Lines 11(a)(iii), (b), and (c)) (Carry Totals to Line 33, page 5)	6256921.11	58399938.16
12. Transfers From Affiliated/Other Party Committees.....	211244.91	765505.81
13. All Loans Received	0.00	0.00
14. Loan Repayments Received.....	0.00	0.00
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5).....	0.00	6402.83
16. Refunds of Contributions Made to Federal Candidates and Other Political Committees.....	0.00	0.00
17. Other Federal Receipts (Dividends, Interest, etc.).....	0.00	0.00
18. Transfers from Non-Federal and Levin Funds		
(a) Non-Federal Account (from Schedule H3).....	0.00	0.00
(b) Levin Funds (from Schedule H5)	0.00	0.00
(c) Total Transfers (add 18(a) and 18(b))..	0.00	0.00
19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c)).....▶	6468166.02	59171846.80
20. Total Federal Receipts (subtract Line 18(c) from Line 19).....▶	6468166.02	59171846.80

DETAILED SUMMARY PAGE
of Disbursements

II. Disbursements	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:		
(a) Allocated Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share	0.00	0.00
(ii) Non-Federal Share.....	0.00	0.00
(b) Other Federal Operating Expenditures	2296182.68	14103176.82
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b))	2296182.68	14103176.82
22. Transfers to Affiliated/Other Party Committees.....	4209649.13	43989574.08
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	0.00	0.00
24. Independent Expenditures (use Schedule E)	0.00	0.00
25. Coordinated Party Expenditures (52 U.S.C. § 30116(d)) (use Schedule F).....	0.00	0.00
26. Loan Repayments Made.....	0.00	0.00
27. Loans Made.....	0.00	0.00
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees	1000.00	511547.11
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	8500.00
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c)).....	1000.00	520047.11
29. Other Disbursements (Including Non-Federal Donations).....	0.00	1000.00
30. Federal Election Activity (52 U.S.C. § 30101(20))		
(a) Allocated Federal Election Activity (from Schedule H6)		
(i) Federal Share	0.00	0.00
(ii) "Levin" Share.....	0.00	0.00
(b) Federal Election Activity Paid Entirely With Federal Funds	0.00	0.00
(c) Total Federal Election Activity (add Lines 30(a)(i), 30(a)(ii) and 30(b))	0.00	0.00
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c)) ..	6506831.81	58613798.01
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	6506831.81	58613798.01

DETAILED SUMMARY PAGE
of Disbursements

FEC Form 3X (Rev. 05/2016)

Page 5

III. Net Contributions/ Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
33. Total Contributions (other than loans) (from Line 11(d), page 3)	6256921.11	58399938.16
34. Total Contribution Refunds (from Line 28(d))	1000.00	520047.11
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	6255921.11	57879891.05
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b))	2296182.68	14103176.82
37. Offsets to Operating Expenditures (from Line 15, page 3).....	0.00	6402.83
38. Net Operating Expenditures (subtract Line 37 from Line 36)	2296182.68	14096773.99

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 6 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
Team Ryan

A. ABARA, CHINEDU, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 19 CHESTNUT HILL RD N
 City ALBANY State NY Zip Code 12211-1605
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) BASSETT MED CTR Occupation (for Individual) PHYSICIAN
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 550.00

Date of Receipt 11 / 04 / 2016
Transaction ID : SA11A.471411
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

B. ABARA, CHINEDU, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 19 CHESTNUT HILL RD N
 City ALBANY State NY Zip Code 12211-1605
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) BASSETT MED CTR Occupation (for Individual) PHYSICIAN
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 550.00

Date of Receipt 11 / 06 / 2016
Transaction ID : SA11A.476717
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

C. ABBETT, MICHAEL, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 9009 SNOWFORD COURT
 City MONTGOMERY VILLAGE State MD Zip Code 20886-4017
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 215.00

Date of Receipt 10 / 25 / 2016
Transaction ID : SA11A.452107
 Amount of Each Receipt this Period 30.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶ 180.00
TOTAL This Period (last page this line number only).....▶

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 7 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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

A. ABBETT, MICHAEL, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 9009 SNOWFORD COURT
 City MONTGOMERY VILLAGE State MD Zip Code 20886-4017
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 215.00

Date of Receipt 11 / 01 / 2016
Transaction ID : SA11A.467412
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

B. ABBETT, MICHAEL, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 9009 SNOWFORD COURT
 City MONTGOMERY VILLAGE State MD Zip Code 20886-4017
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 215.00

Date of Receipt 11 / 01 / 2016
Transaction ID : SA11A.467419
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

C. ABBETT, MICHAEL, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 9009 SNOWFORD COURT
 City MONTGOMERY VILLAGE State MD Zip Code 20886-4017
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 215.00

Date of Receipt 11 / 01 / 2016
Transaction ID : SA11A.467421
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	75.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 8 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. ABBETT, MICHAEL, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 9009 SNOWFORD COURT
 City MONTGOMERY VILLAGE State MD Zip Code 20886-4017
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 215.00

Date of Receipt 11 / 04 / 2016
Transaction ID : SA11A.474326
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

B. ABBOTT, C., THOMAS, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4206 FAIRFAX
 City DALLAS State TX Zip Code 75205-3025
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 10 / 24 / 2016
Transaction ID : SA11A.443509
 Amount of Each Receipt this Period 500.00
 Memo Item CONTRIBUTION

C. ABBOTT, HOWARD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3855 SKYLINE BLVD
 City RENO State NV Zip Code 89509-5661
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 1110.00

Date of Receipt 11 / 04 / 2016
Transaction ID : SA11A.472200
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	625.00
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 9 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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

A. ABRAHAM, JACK, S., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 87-02 PALERMO ST
 City HOLLIS State NY Zip Code 11423-1222
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) SALES
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 2000.00

Date of Receipt 10 / 31 / 2016
Transaction ID : SA11A.463573
 Amount of Each Receipt this Period 200.00
 Memo Item
CONTRIBUTION

B. ABRAHAM, JACK, S., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 87-02 PALERMO ST
 City HOLLIS State NY Zip Code 11423-1222
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) SALES
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 2000.00

Date of Receipt 11 / 04 / 2016
Transaction ID : SA11A.473788
 Amount of Each Receipt this Period 500.00
 Memo Item
CONTRIBUTION

C. ABRAHAM, JACK, S., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 87-02 PALERMO ST
 City HOLLIS State NY Zip Code 11423-1222
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) SALES
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 2000.00

Date of Receipt 11 / 06 / 2016
Transaction ID : SA11A.480899
 Amount of Each Receipt this Period 500.00
 Memo Item
CONTRIBUTION

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 10 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. ABRAHAM, MAGID, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO BOX 52047
 City ATLANTA State GA Zip Code 30355-0047
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) APX LABS Occupation (for Individual) CHAIRMAN
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 5000.00

Date of Receipt 10 / 23 / 2016
Transaction ID : SA11A.446597
 Amount of Each Receipt this Period 5000.00
 Memo Item
 CONTRIBUTION

B. ABRAHAM, STEPHEN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1031 SW CALIFORNIA BLVD
 City PORT SAINT LUCIE State FL Zip Code 34953-1842
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE ASSETS PERSONAL INCOME Occupation (for Individual) RETIRED ASSETS PERSONAL INCC
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 10 / 21 / 2016
Transaction ID : SA11A.444495
 Amount of Each Receipt this Period 25.00
 Memo Item
 CONTRIBUTION

C. ABRAMSON, GREG, T., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 608 LAKE COLONY POINTE
 City BIRMINGHAM State AL Zip Code 35242-7412
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) ABRAMSON LLC Occupation (for Individual) OWNER
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 609.00

Date of Receipt 11 / 02 / 2016
Transaction ID : SA11A.465959
 Amount of Each Receipt this Period 200.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	5225.00
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 11 OF 4311
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. ABUID, JULIA, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address P.O. BOX 921495

City SYLMAR	State CA	Zip Code 91392-1495
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
485.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		25		2016

Transaction ID : SA11A.451427

Amount of Each Receipt this Period
30.00

Memo Item
CONTRIBUTION

B. ABUID, JULIA, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address P.O. BOX 921495

City SYLMAR	State CA	Zip Code 91392-1495
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
485.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		25		2016

Transaction ID : SA11A.451478

Amount of Each Receipt this Period
30.00

Memo Item
CONTRIBUTION

C. ABUID, JULIA, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address P.O. BOX 921495

City SYLMAR	State CA	Zip Code 91392-1495
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
485.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		27		2016

Transaction ID : SA11A.453816

Amount of Each Receipt this Period
25.00

Memo Item
CONTRIBUTION

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

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 12 OF 4311
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Team Ryan

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name A. ABUID, JULIA, , ,			Date of Receipt MM / DD / YYYY 11 / 02 / 2016 Transaction ID : SA11A.469723
Mailing Address P.O. BOX 921495			Amount of Each Receipt this Period 25.00
City SYLMAR	State CA	Zip Code 91392-1495	<input type="checkbox"/> Memo Item CONTRIBUTION
FEC ID number of contributing federal political committee. C			
Name of Employer (for Individual) NONE		Occupation (for Individual) RETIRED	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 485.00		

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name B. ABUID, JULIA, , ,			Date of Receipt MM / DD / YYYY 11 / 02 / 2016 Transaction ID : SA11A.469862
Mailing Address P.O. BOX 921495			Amount of Each Receipt this Period 25.00
City SYLMAR	State CA	Zip Code 91392-1495	<input type="checkbox"/> Memo Item CONTRIBUTION
FEC ID number of contributing federal political committee. C			
Name of Employer (for Individual) NONE		Occupation (for Individual) RETIRED	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 485.00		

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name C. ABUID, JULIA, , ,			Date of Receipt MM / DD / YYYY 11 / 02 / 2016 Transaction ID : SA11A.469890
Mailing Address P.O. BOX 921495			Amount of Each Receipt this Period 25.00
City SYLMAR	State CA	Zip Code 91392-1495	<input type="checkbox"/> Memo Item CONTRIBUTION
FEC ID number of contributing federal political committee. C			
Name of Employer (for Individual) NONE		Occupation (for Individual) RETIRED	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Aggregate Year-to-Date ▼ 485.00		

SUBTOTAL of Receipts This Page (optional).....▶	75.00
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 13 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. ABUID, JULIA, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address P.O. BOX 921495

City SYLMAR	State CA	Zip Code 91392-1495
----------------	-------------	------------------------

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

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
485.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11		04		2016

Transaction ID : SA11A.471861

Amount of Each Receipt this Period
25.00

Memo Item
CONTRIBUTION

B. ABUID, JULIA, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address P.O. BOX 921495

City SYLMAR	State CA	Zip Code 91392-1495
----------------	-------------	------------------------

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

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
485.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11		04		2016

Transaction ID : SA11A.472545

Amount of Each Receipt this Period
30.00

Memo Item
CONTRIBUTION

C. ABUID, JULIA, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address P.O. BOX 921495

City SYLMAR	State CA	Zip Code 91392-1495
----------------	-------------	------------------------

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

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
485.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11		06		2016

Transaction ID : SA11A.477346

Amount of Each Receipt this Period
25.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	80.00
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 14 OF 4311
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. ACCORNERO, RON, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 2901 E KATELLA
D

City ORANGE State CA Zip Code 92867-5248

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

Name of Employer (for Individual) OC SIGNATURE PROPERTIES Occupation (for Individual) REAL ESTATE

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
230.00

Date of Receipt
10 / 27 / 2016
Transaction ID : SA11A.453205

Amount of Each Receipt this Period
30.00

Memo Item CONTRIBUTION

B. ACHESON, DEAN, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 20465 RD 22

City LEWIS State CO Zip Code 81327-9731

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

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

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt
10 / 26 / 2016
Transaction ID : SA11A.450576

Amount of Each Receipt this Period
25.00

Memo Item CONTRIBUTION

C. ACHESON, DEAN, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 20465 RD 22

City LEWIS State CO Zip Code 81327-9731

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

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

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
250.00

Date of Receipt
10 / 26 / 2016
Transaction ID : SA11A.450581

Amount of Each Receipt this Period
25.00

Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶ 80.00

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 15 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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

A. ACHESON, DEAN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 20465 RD 22
 City LEWIS State CO Zip Code 81327-9731
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 31 / 2016
Transaction ID : SA11A.457842
 Amount of Each Receipt this Period
 25.00
 Memo Item
 CONTRIBUTION

B. ACHESON, DEAN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 20465 RD 22
 City LEWIS State CO Zip Code 81327-9731
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 31 / 2016
Transaction ID : SA11A.457847
 Amount of Each Receipt this Period
 25.00
 Memo Item
 CONTRIBUTION

C. ACKMAN, RANDY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 102 SPRING DR
 City SIKESTON State MO Zip Code 63801-5139
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RANDY'S RX Occupation (for Individual) PHARMACIST
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 03 / 2016
Transaction ID : SA11A.469307
 Amount of Each Receipt this Period
 50.00
 Memo Item
 CONTRIBUTION

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 16 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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

A. ACUNA, SERGIO, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1656 BOB MURPHY DR.
 City EL PASO State TX Zip Code 79936-5206
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF-EMPLOYED Occupation (for Individual) INSURANCE BROKER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt 10 / 31 / 2016
Transaction ID : SA11A.464189
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

B. ADAIR, STEFAN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 8303 DEERBROOK CIRCLE
 City SARASOTA State FL Zip Code 34238-4385
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) PHYSICIAN
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 485.00

Date of Receipt 10 / 22 / 2016
Transaction ID : SA11A.446671
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

C. ADAIR, STEFAN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 8303 DEERBROOK CIRCLE
 City SARASOTA State FL Zip Code 34238-4385
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) PHYSICIAN
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 485.00

Date of Receipt 10 / 21 / 2016
Transaction ID : SA11A.447217
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 17 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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

A. ADAIR, STEFAN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 8303 DEERBROOK CIRCLE
 City SARASOTA State FL Zip Code 34238-4385
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) PHYSICIAN
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 485.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 26 / 2016
Transaction ID : SA11A.451222
 Amount of Each Receipt this Period
 30.00
 Memo Item
 CONTRIBUTION

B. ADAIR, STEFAN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 8303 DEERBROOK CIRCLE
 City SARASOTA State FL Zip Code 34238-4385
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) PHYSICIAN
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 485.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 03 / 2016
Transaction ID : SA11A.474512
 Amount of Each Receipt this Period
 30.00
 Memo Item
 CONTRIBUTION

C. ADAMS, BUENA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 503 GRANDVIEW DRIVE 503
 City VERONA State PA Zip Code 15147-4001
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 1130.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 07 / 2016
Transaction ID : SA11A.476569
 Amount of Each Receipt this Period
 30.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	90.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 18 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. ADAMS, ELLSWORTH, C., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 305 ROANOKE DRIVE
 City BLOOMFIELD State MI Zip Code 48301-3334
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 225.00

Date of Receipt 11 / 01 / 2016
Transaction ID : SA11A.461677
 Amount of Each Receipt this Period 75.00
 Memo Item CONTRIBUTION

B. ADAMS, JAMES, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 7226 S. HIGHLANDS DR.
 City LITTLETON State CO Zip Code 80120-3907
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 235.00

Date of Receipt 10 / 31 / 2016
Transaction ID : SA11A.457479
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

C. ADAMS, JAMES, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 7226 S. HIGHLANDS DR.
 City LITTLETON State CO Zip Code 80120-3907
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 235.00

Date of Receipt 10 / 31 / 2016
Transaction ID : SA11A.458314
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 19 OF 4311
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

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

Mailing Address 2290 TATES CREEK RD.

City RICHMOND	State KY	Zip Code 40475-9432
------------------	-------------	------------------------

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

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
230.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		31		2016

Transaction ID : SA11A.464683

Amount of Each Receipt this Period
25.00

Memo Item
CONTRIBUTION

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

Mailing Address 5678 WHITECLIFF DR

City RANCHO PALOS VERDE	State CA	Zip Code 90275-4941
----------------------------	-------------	------------------------

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

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
224.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		30		2016

Transaction ID : SA11A.460141

Amount of Each Receipt this Period
32.00

Memo Item
CONTRIBUTION

C. ADAMS, JERRY, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 5678 WHITECLIFF DR

City RANCHO PALOS VERDE	State CA	Zip Code 90275-4941
----------------------------	-------------	------------------------

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

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
224.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11		04		2016

Transaction ID : SA11A.473344

Amount of Each Receipt this Period
32.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	89.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 20 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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

A. ADAMS, JOHN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address P.O. BOX 13165
 City ALEXANDRIA State LA Zip Code 71315-3165
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt
 11 / 01 / 2016
Transaction ID : SA11A.462776
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

B. ADAMS, JOHN, C., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1616 S. PENINSULA DR.
 City DAYTONA BEACH State FL Zip Code 32118-4948
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1100.00

Date of Receipt
 10 / 26 / 2016
Transaction ID : SA11A.450683
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

C. ADAMS, JOHN, C., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1616 S. PENINSULA DR.
 City DAYTONA BEACH State FL Zip Code 32118-4948
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1100.00

Date of Receipt
 10 / 26 / 2016
Transaction ID : SA11A.450686
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 21 OF 4311
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. ADAMS, JOHN, C., MR.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1616 S. PENINSULA DR.

City DAYTONA BEACH	State FL	Zip Code 32118-4948
-----------------------	-------------	------------------------

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

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1100.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		26		2016

Transaction ID : SA11A.450775

Amount of Each Receipt this Period
100.00

Memo Item
CONTRIBUTION

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

Mailing Address 1616 S. PENINSULA DR.

City DAYTONA BEACH	State FL	Zip Code 32118-4948
-----------------------	-------------	------------------------

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

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1100.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		26		2016

Transaction ID : SA11A.450783

Amount of Each Receipt this Period
100.00

Memo Item
CONTRIBUTION

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

Mailing Address 1616 S. PENINSULA DR.

City DAYTONA BEACH	State FL	Zip Code 32118-4948
-----------------------	-------------	------------------------

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

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
1100.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11		03		2016

Transaction ID : SA11A.468900

Amount of Each Receipt this Period
50.00

Memo Item
CONTRIBUTION

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 22 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. ADAMS, JOHN, C., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1616 S. PENINSULA DR.
 City DAYTONA BEACH State FL Zip Code 32118-4948
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1100.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 04 / 2016
Transaction ID : SA11A.474138
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION

B. ADAMS, KARI, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 31472 PASEO CHRISTINA
 City SAN JUAN CAPO State CA Zip Code 92675-5521
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) PROPERTY MANAGER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 30 / 2016
Transaction ID : SA11A.459342
 Amount of Each Receipt this Period
 250.00
 Memo Item
 CONTRIBUTION

C. ADAMS, KENNETH, M., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1975 PARKFRONT DRIVE 303
 City MOUNT PLEASANT State SC Zip Code 29464-7104
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) GILDAN ACTIVEWEAR, INC Occupation (for Individual) DIRECTOR OF FORECASTING
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 1600.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 25 / 2016
Transaction ID : SA11A.451900
 Amount of Each Receipt this Period
 250.00
 Memo Item
 CONTRIBUTION

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 23 OF 4311
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Team Ryan

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

Mailing Address 2447 HERONWOOD DR

City BLOOMFIELD	State MI	Zip Code 48302-0838
--------------------	-------------	------------------------

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

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1925.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	24	/	2016

Transaction ID : SA11A.449427

Amount of Each Receipt this Period
400.00

Memo Item CONTRIBUTION

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

Mailing Address 2447 HERONWOOD DR

City BLOOMFIELD	State MI	Zip Code 48302-0838
--------------------	-------------	------------------------

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

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1925.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	02	/	2016

Transaction ID : SA11A.469993

Amount of Each Receipt this Period
400.00

Memo Item CONTRIBUTION

C. ADELMAN, ANNETTE, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 12068 WESTMEADOW DRIVE

City WHITNEY	State TX	Zip Code 76692-5619
-----------------	-------------	------------------------

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

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
625.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	20	/	2016

Transaction ID : SA11A.442453

Amount of Each Receipt this Period
25.00

Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	825.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 24 OF 4311		
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14	<input type="checkbox"/> 11c <input type="checkbox"/> 15	<input type="checkbox"/> 12 <input type="checkbox"/> 16

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NAME OF COMMITTEE (In Full)
Team Ryan

A. ADELMAN, ANNETTE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 12068 WESTMEADOW DRIVE
 City WHITNEY State TX Zip Code 76692-5619
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 625.00

Date of Receipt 10 / 25 / 2016
Transaction ID : SA11A.447848
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

B. ADELMAN, ANNETTE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 12068 WESTMEADOW DRIVE
 City WHITNEY State TX Zip Code 76692-5619
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 625.00

Date of Receipt 10 / 25 / 2016
Transaction ID : SA11A.447849
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

C. ADELMAN, ANNETTE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 12068 WESTMEADOW DRIVE
 City WHITNEY State TX Zip Code 76692-5619
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 625.00

Date of Receipt 10 / 25 / 2016
Transaction ID : SA11A.447852
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 25 OF 4311
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. ADELMAN, ANNETTE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 12068 WESTMEADOW DRIVE
 City WHITNEY State TX Zip Code 76692-5619
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 625.00

Date of Receipt **10 / 25 / 2016**
Transaction ID : SA11A.447854
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

B. ADELMAN, ANNETTE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 12068 WESTMEADOW DRIVE
 City WHITNEY State TX Zip Code 76692-5619
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 625.00

Date of Receipt **10 / 31 / 2016**
Transaction ID : SA11A.464286
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

C. ADELMAN, ANNETTE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 12068 WESTMEADOW DRIVE
 City WHITNEY State TX Zip Code 76692-5619
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 625.00

Date of Receipt **10 / 31 / 2016**
Transaction ID : SA11A.464289
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 26 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. ADELMAN, ANNETTE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 12068 WESTMEADOW DRIVE
 City WHITNEY State TX Zip Code 76692-5619
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 625.00

Date of Receipt 10 / 31 / 2016
Transaction ID : SA11A.464311
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

B. ADELMAN, ANNETTE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 12068 WESTMEADOW DRIVE
 City WHITNEY State TX Zip Code 76692-5619
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 625.00

Date of Receipt 10 / 31 / 2016
Transaction ID : SA11A.464314
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

C. ADELMAN, ANNETTE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 12068 WESTMEADOW DRIVE
 City WHITNEY State TX Zip Code 76692-5619
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 625.00

Date of Receipt 11 / 04 / 2016
Transaction ID : SA11A.473392
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	75.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 27 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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

A. ADELMAN, MARTIN, J., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 29820 WOODLAND DRIVE
 City SOUTHFIELD State MI Zip Code 48034-1339
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) INFORMATION REQUESTED PER BEST EFFORTS Occupation (for Individual) INFORMATION REQUESTED PER BE
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 400.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 20 / 2016
Transaction ID : SA11A.433500
 Amount of Each Receipt this Period
 300.00
 Memo Item
 CONTRIBUTION

B. ADOLPH, GREG, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 14086 PAUMA VISTA DRIVE
 City VALLEY CENTER State CA Zip Code 92082-3917
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RADISYS Occupation (for Individual) MANAGER
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 750.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 30 / 2016
Transaction ID : SA11A.460268
 Amount of Each Receipt this Period
 250.00
 Memo Item
 CONTRIBUTION

C. ADOLPH, GREG, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 14086 PAUMA VISTA DRIVE
 City VALLEY CENTER State CA Zip Code 92082-3917
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RADISYS Occupation (for Individual) MANAGER
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 750.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 04 / 2016
Transaction ID : SA11A.471175
 Amount of Each Receipt this Period
 250.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	800.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 28 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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

A. ADVOCATE, WILLIAM, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 732 CENTRE ROAD
 City STAATSBURG State NY Zip Code 12580-6225
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SUNYRF Occupation (for Individual) ENGINEER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 375.00

Date of Receipt 10 / 26 / 2016
Transaction ID : SA11A.451208
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

B. ADVOCATE, WILLIAM, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 732 CENTRE ROAD
 City STAATSBURG State NY Zip Code 12580-6225
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SUNYRF Occupation (for Individual) ENGINEER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 375.00

Date of Receipt 10 / 26 / 2016
Transaction ID : SA11A.451211
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

C. ADVOCATE, WILLIAM, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 732 CENTRE ROAD
 City STAATSBURG State NY Zip Code 12580-6225
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SUNYRF Occupation (for Individual) ENGINEER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 375.00

Date of Receipt 11 / 06 / 2016
Transaction ID : SA11A.477454
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 29 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. AFFEL, BOB, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 4604 WASHINGTON PIKE

City KNOXVILLE	State TN	Zip Code 37917-2013
-------------------	-------------	------------------------

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

Name of Employer (for Individual) SUN ELECTRIC	Occupation (for Individual) CONTRACTOR
---	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
600.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
11		06		2016

Transaction ID : SA11A.477425

Amount of Each Receipt this Period
250.00

Memo Item
CONTRIBUTION

B. AFFEL, BOB, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 4604 WASHINGTON PIKE

City KNOXVILLE	State TN	Zip Code 37917-2013
-------------------	-------------	------------------------

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

Name of Employer (for Individual) SUN ELECTRIC	Occupation (for Individual) CONTRACTOR
---	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
600.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
11		06		2016

Transaction ID : SA11A.477427

Amount of Each Receipt this Period
250.00

Memo Item
CONTRIBUTION

C. AFFOLTER, JIMMY, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 6819 FALCON POINT

City DICKINSON	State TX	Zip Code 77539-6270
-------------------	-------------	------------------------

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

Name of Employer (for Individual) AFFOLTER CONTRACTING CO. INC.	Occupation (for Individual) PRESIDENT
--	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
425.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
10		27		2016

Transaction ID : SA11A.452875

Amount of Each Receipt this Period
50.00

Memo Item
CONTRIBUTION

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 30 OF 4311
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. AFFOLTER, JIMMY, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address **6819 FALCON POINT**

City DICKINSON	State TX	Zip Code 77539-6270
--------------------------	--------------------	-------------------------------

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

Name of Employer (for Individual) AFFOLTER CONTRACTING CO. INC.	Occupation (for Individual) PRESIDENT
---	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
425.00

Date of Receipt
10 / 27 / 2016

Transaction ID : SA11A.452877

Amount of Each Receipt this Period
50.00

Memo Item CONTRIBUTION

B. AFFOLTER, JIMMY, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address **6819 FALCON POINT**

City DICKINSON	State TX	Zip Code 77539-6270
--------------------------	--------------------	-------------------------------

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

Name of Employer (for Individual) AFFOLTER CONTRACTING CO. INC.	Occupation (for Individual) PRESIDENT
---	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
425.00

Date of Receipt
10 / 31 / 2016

Transaction ID : SA11A.457867

Amount of Each Receipt this Period
50.00

Memo Item CONTRIBUTION

C. AFFOLTER, JIMMY, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address **6819 FALCON POINT**

City DICKINSON	State TX	Zip Code 77539-6270
--------------------------	--------------------	-------------------------------

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

Name of Employer (for Individual) AFFOLTER CONTRACTING CO. INC.	Occupation (for Individual) PRESIDENT
---	---

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
425.00

Date of Receipt
10 / 31 / 2016

Transaction ID : SA11A.457869

Amount of Each Receipt this Period
50.00

Memo Item CONTRIBUTION

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 31 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. AFFOLTER, JIMMY, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 6819 FALCON POINT

City DICKINSON	State TX	Zip Code 77539-6270
-------------------	-------------	------------------------

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

Name of Employer (for Individual) AFFOLTER CONTRACTING CO. INC.	Occupation (for Individual) PRESIDENT
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
425.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	07	/	2016

Transaction ID : SA11A.480204

Amount of Each Receipt this Period
100.00

Memo Item
CONTRIBUTION

B. AFFOLTER, JIMMY, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 6819 FALCON POINT

City DICKINSON	State TX	Zip Code 77539-6270
-------------------	-------------	------------------------

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

Name of Employer (for Individual) AFFOLTER CONTRACTING CO. INC.	Occupation (for Individual) PRESIDENT
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
425.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	07	/	2016

Transaction ID : SA11A.480208

Amount of Each Receipt this Period
100.00

Memo Item
CONTRIBUTION

C. AGNOR, DAVE, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 10708, NE 90TH COURT

City VANCOUVER	State WA	Zip Code 98662-1455
-------------------	-------------	------------------------

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

Name of Employer (for Individual) SENIOR CONNECTIONS	Occupation (for Individual) PSYCHOLOGIST
---	---

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	02	/	2016

Transaction ID : SA11A.466613

Amount of Each Receipt this Period
100.00

Memo Item
CONTRIBUTION

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 32 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. AHLBERG, TREVOR, L., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4725 WINDSOR RIDGE DR
 City IRVING State TX Zip Code 75038-6316
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) COTTONWOOD FINANCIAL Occupation (for Individual) PRESIDENT
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 36100.00

Date of Receipt 11 / 01 / 2016
Transaction ID : SA11A.461904
 Amount of Each Receipt this Period 2700.00
 Memo Item CONTRIBUTION

B. AHNGER, DONALD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2505 ANTHEM VILLAGE DR E383
 City HENDERSON State NV Zip Code 89052-5505
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) MIDWAY FIRD TRUCK CENTER Occupation (for Individual) BUSINESS OWNER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 650.00

Date of Receipt 11 / 04 / 2016
Transaction ID : SA11A.472048
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

C. AHOLA, ARI, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3066 BIRD LANE
 City WINDERMERE State FL Zip Code 34786-8349
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) BIOZONE SCIENTIFIC INTERNATIONAL, Occupation (for Individual) CEO
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 700.00

Date of Receipt 10 / 24 / 2016
Transaction ID : SA11A.445575
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	2900.00
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 33 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
Team Ryan

A. AHOLA, ARI, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3066 BIRD LANE
 City WINDERMERE State FL Zip Code 34786-8349
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) BIOZONE SCIENTIFIC INTERNATIONAL, Occupation (for Individual) CEO
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 700.00

Date of Receipt **10 / 31 / 2016**
Transaction ID : SA11A.457941
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

B. AHOLA, ARI, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3066 BIRD LANE
 City WINDERMERE State FL Zip Code 34786-8349
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) BIOZONE SCIENTIFIC INTERNATIONAL, Occupation (for Individual) CEO
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 700.00

Date of Receipt **11 / 04 / 2016**
Transaction ID : SA11A.473045
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

C. AHRNS, DANIEL, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 14668 MALLARD DR.
 City TRAVERSE CITY State MI Zip Code 49686-8583
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 389.00

Date of Receipt **11 / 04 / 2016**
Transaction ID : SA11A.472962
 Amount of Each Receipt this Period 27.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	152.00
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 34 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
Team Ryan

A. AHRNS, DANIEL, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 14668 MALLARD DR.
 City TRAVERSE CITY State MI Zip Code 49686-8583
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 389.00

Date of Receipt
 11 / 04 / 2016
Transaction ID : SA11A.473761
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

B. AIKEN, ROBERT, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 13232 W MICHELTORENA DR
 City SUN CITY WEST State AZ Zip Code 85375-1612
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 856.00

Date of Receipt
 11 / 04 / 2016
Transaction ID : SA11A.474355
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

C. AIKIN, PATRICIA, A., MRS.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 11545 N. PA BE SHAN TRAIL
 City CHARLEVOIX State MI Zip Code 49720-2113
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 600.00

Date of Receipt
 10 / 31 / 2016
Transaction ID : SA11A.464329
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

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

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 35 OF 4311
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. AIKMAN, PAUL, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 70 ARROW ROAD, STE 1

City HILTON HEAD ISLAND	State SC	Zip Code 29928-7336
----------------------------	-------------	------------------------

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

Name of Employer (for Individual) PAUL KING AIKMAN	Occupation (for Individual) CPA
---	------------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
800.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	04	/	2016

Transaction ID : SA11A.472576

Amount of Each Receipt this Period
100.00

Memo Item
CONTRIBUTION

B. AINLEY, PAT, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address P O BOX 3908

City CRESTLINE	State CA	Zip Code 92325-3908
-------------------	-------------	------------------------

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

Name of Employer (for Individual) AINLEY ENTERPRISES LLC	Occupation (for Individual) PROPERTY MANAGEMENT
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
3888.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	31	/	2016

Transaction ID : SA11A.458346

Amount of Each Receipt this Period
250.00

Memo Item
CONTRIBUTION

C. AINLEY, PAT, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address P O BOX 3908

City CRESTLINE	State CA	Zip Code 92325-3908
-------------------	-------------	------------------------

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

Name of Employer (for Individual) AINLEY ENTERPRISES LLC	Occupation (for Individual) PROPERTY MANAGEMENT
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
3888.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	04	/	2016

Transaction ID : SA11A.472399

Amount of Each Receipt this Period
250.00

Memo Item
CONTRIBUTION

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 36 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. AINLEY, PAT, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address P O BOX 3908

City CRESTLINE	State CA	Zip Code 92325-3908
FEC ID number of contributing federal political committee. C		
Name of Employer (for Individual) AINLEY ENTERPRISES LLC		Occupation (for Individual) PROPERTY MANAGEMENT
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 3888.00	

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 11 / 04 / 2016
Transaction ID : SA11A.472706

Amount of Each Receipt this Period
 25.00

Memo Item
 CONTRIBUTION

B. AINLEY, PAT, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address P O BOX 3908

City CRESTLINE	State CA	Zip Code 92325-3908
FEC ID number of contributing federal political committee. C		
Name of Employer (for Individual) AINLEY ENTERPRISES LLC		Occupation (for Individual) PROPERTY MANAGEMENT
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 3888.00	

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 11 / 07 / 2016
Transaction ID : SA11A.476644

Amount of Each Receipt this Period
 250.00

Memo Item
 CONTRIBUTION

C. AITKEN, DONALD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 13672 TYPEE WAY

City IRVINE	State CA	Zip Code 92620-3270
FEC ID number of contributing federal political committee. C		
Name of Employer (for Individual) NONE		Occupation (for Individual) RETIRED
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Aggregate Year-to-Date ▼ 550.00	

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 10 / 21 / 2016
Transaction ID : SA11A.444472

Amount of Each Receipt this Period
 110.00

Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	385.00
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 37 OF 4311
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. AITKEN, DONALD, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 13672 TYPEE WAY

City IRVINE	State CA	Zip Code 92620-3270
----------------	-------------	------------------------

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

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
550.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	04	/	2016

Transaction ID : SA11A.471574

Amount of Each Receipt this Period
110.00

Memo Item CONTRIBUTION

B. AKERMAN, RICHARD, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 919 WESTPOINT RD

City LAKE OSWEGO	State OR	Zip Code 97034-3748
---------------------	-------------	------------------------

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

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
325.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	21	/	2016

Transaction ID : SA11A.447209

Amount of Each Receipt this Period
100.00

Memo Item CONTRIBUTION

C. AKERS, MICHAEL, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 223 RAINSHADOW DRIVE

City PORT TOWNSEND	State WA	Zip Code 98368-8808
-----------------------	-------------	------------------------

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

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
1000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	01	/	2016

Transaction ID : SA11A.461889

Amount of Each Receipt this Period
1000.00

Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	1210.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 38 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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

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NAME OF COMMITTEE (In Full)
Team Ryan

A. ALAMPI, JAMES, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5250 BRONCO DRIVE
 City CLARKSTON State MI Zip Code 48346-2605
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 27 / 2016
Transaction ID : SA11A.457055
 Amount of Each Receipt this Period
 250.00
 Memo Item
 CONTRIBUTION

B. ALAMPI, JAMES, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5250 BRONCO DRIVE
 City CLARKSTON State MI Zip Code 48346-2605
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 27 / 2016
Transaction ID : SA11A.457057
 Amount of Each Receipt this Period
 250.00
 Memo Item
 CONTRIBUTION

C. ALBANI, FRANK, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 300 CAMELOT
 City LIBERTY State MO Zip Code 64068-1187
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) KCUC Occupation (for Individual) PHYSICIAN
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 210.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 31 / 2016
Transaction ID : SA11A.458072
 Amount of Each Receipt this Period
 25.00
 Memo Item
 CONTRIBUTION

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 39 OF 4311
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. ALBANI, FRANK, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 300 CAMELOT

City LIBERTY	State MO	Zip Code 64068-1187
-----------------	-------------	------------------------

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

Name of Employer (for Individual) KCUC	Occupation (for Individual) PHYSICIAN
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
210.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
11		04		2016

Transaction ID : SA11A.472544

Amount of Each Receipt this Period
30.00

Memo Item
CONTRIBUTION

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

Mailing Address 300 CAMELOT

City LIBERTY	State MO	Zip Code 64068-1187
-----------------	-------------	------------------------

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

Name of Employer (for Individual) KCUC	Occupation (for Individual) PHYSICIAN
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
210.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
11		04		2016

Transaction ID : SA11A.479675

Amount of Each Receipt this Period
25.00

Memo Item
CONTRIBUTION

C. ALBANESE, LOUIE, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 890 REDWOOD DR

City SANTA CRUZ	State CA	Zip Code 95060-1261
--------------------	-------------	------------------------

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

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
750.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
10		22		2016

Transaction ID : SA11A.446862

Amount of Each Receipt this Period
250.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	305.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 40 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. ALBANESE, LOUIE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 890 REDWOOD DR
 City SANTA CRUZ State CA Zip Code 95060-1261
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 750.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 04 / 2016
Transaction ID : SA11A.472210
 Amount of Each Receipt this Period
 250.00
 Memo Item
 CONTRIBUTION

B. ALBERT, JOEL, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1018 WATEREDGE PLACE
 City HEWLETT State NY Zip Code 11557-2612
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) PHYSICIAN
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 23 / 2016
Transaction ID : SA11A.446561
 Amount of Each Receipt this Period
 250.00
 Memo Item
 CONTRIBUTION

C. ALDEAN, SHELLY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2614 BOHR ROAD
 City CARSON CITY State NV Zip Code 89706-0437
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) REAL ESTATE BROKER
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 600.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 27 / 2016
Transaction ID : SA11A.453282
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 41 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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

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NAME OF COMMITTEE (In Full)
Team Ryan

A. ALDEAN, SHELLY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2614 BOHR ROAD
 City CARSON CITY State NV Zip Code 89706-0437
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) REAL ESTATE BROKER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 600.00

Date of Receipt 10 / 31 / 2016
Transaction ID : SA11A.458798
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

B. ALDERFER, DAVID, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 112 VIA LIDO NORD
 City NEWPORT BEACH State CA Zip Code 92663-4606
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 280.00

Date of Receipt 10 / 22 / 2016
Transaction ID : SA11A.447056
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

C. ALDERFER, DAVID, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 112 VIA LIDO NORD
 City NEWPORT BEACH State CA Zip Code 92663-4606
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 280.00

Date of Receipt 10 / 31 / 2016
Transaction ID : SA11A.457940
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	75.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 42 OF 4311
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. ALDRIDGE, DONALD, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 4003 QUAIL DRIVE

City BELLEVUE	State NE	Zip Code 68123-1126
------------------	-------------	------------------------

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

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
875.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		20		2016

Transaction ID : SA11A.442147

Amount of Each Receipt this Period
100.00

Memo Item CONTRIBUTION

B. ALDRIDGE, DONALD, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 4003 QUAIL DRIVE

City BELLEVUE	State NE	Zip Code 68123-1126
------------------	-------------	------------------------

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

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
875.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		27		2016

Transaction ID : SA11A.453768

Amount of Each Receipt this Period
100.00

Memo Item CONTRIBUTION

C. ALDRIDGE, DONALD, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 4003 QUAIL DRIVE

City BELLEVUE	State NE	Zip Code 68123-1126
------------------	-------------	------------------------

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

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
875.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		29		2016

Transaction ID : SA11A.460383

Amount of Each Receipt this Period
100.00

Memo Item CONTRIBUTION

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 43 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
Team Ryan

A. ALDRIDGE, JOHN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1551 WAGON TRAIL DRIVE
 City JACKSONVILLE State OR Zip Code 97530-9842
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 375.00

Date of Receipt 10 / 31 / 2016
Transaction ID : SA11A.458150
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

B. ALDRICH, WINTHROP, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 359 SLAWSON LANE
 City KILLEEN State TX Zip Code 76542-4253
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) CORSAIR TURBINES, LLC Occupation (for Individual) TURBO-PROP AIRCRAFT MAINTEN/
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 800.00

Date of Receipt 10 / 24 / 2016
Transaction ID : SA11A.445984
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

C. ALDRICH, WINTHROP, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 359 SLAWSON LANE
 City KILLEEN State TX Zip Code 76542-4253
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) CORSAIR TURBINES, LLC Occupation (for Individual) TURBO-PROP AIRCRAFT MAINTENA
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 800.00

Date of Receipt 10 / 24 / 2016
Transaction ID : SA11A.445995
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 175.00
TOTAL This Period (last page this line number only)..... ▶

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 44 OF 4311
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. ALDRICH, WINTHROP, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 359 SLAWSON LANE
 City KILLEEN State TX Zip Code 76542-4253
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) CORSAIR TURBINES, LLC Occupation (for Individual) TURBO-PROP AIRCRAFT MAINTENA
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 800.00

Date of Receipt 10 / 24 / 2016
Transaction ID : SA11A.445997
 Amount of Each Receipt this Period 50.00
 Memo Item
 CONTRIBUTION

B. ALDRICH, WINTHROP, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 359 SLAWSON LANE
 City KILLEEN State TX Zip Code 76542-4253
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) CORSAIR TURBINES, LLC Occupation (for Individual) TURBO-PROP AIRCRAFT MAINTENA
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 800.00

Date of Receipt 10 / 27 / 2016
Transaction ID : SA11A.452692
 Amount of Each Receipt this Period 50.00
 Memo Item
 CONTRIBUTION

C. ALEXANDER, LEIGH, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 53506 862 ROSD
 City PLAINVIEW State NE Zip Code 68769-2118
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) FARMER
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 335.00

Date of Receipt 10 / 20 / 2016
Transaction ID : SA11A.442605
 Amount of Each Receipt this Period 25.00
 Memo Item
 CONTRIBUTION

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 45 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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

A. ALEXANDER, LEIGH, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 53506 862 ROSD
 City PLAINVIEW State NE Zip Code 68769-2118
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) FARMER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 335.00

Date of Receipt 10 / 20 / 2016
Transaction ID : SA11A.442606
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

B. ALEXANDER, LEIGH, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 53506 862 ROSD
 City PLAINVIEW State NE Zip Code 68769-2118
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) FARMER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 335.00

Date of Receipt 10 / 25 / 2016
Transaction ID : SA11A.448234
 Amount of Each Receipt this Period 30.00
 Memo Item CONTRIBUTION

C. ALEXANDER, LEIGH, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 53506 862 ROSD
 City PLAINVIEW State NE Zip Code 68769-2118
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) FARMER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 335.00

Date of Receipt 10 / 25 / 2016
Transaction ID : SA11A.448236
 Amount of Each Receipt this Period 30.00
 Memo Item CONTRIBUTION

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 46 OF 4311
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. ALEXANDER, LEIGH, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 53506 862 ROSD
 City PLAINVIEW State NE Zip Code 68769-2118
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) FARMER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 335.00

Date of Receipt 10 / 25 / 2016
Transaction ID : SA11A.448264
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

B. ALEXANDER, LEIGH, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 53506 862 ROSD
 City PLAINVIEW State NE Zip Code 68769-2118
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) FARMER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 335.00

Date of Receipt 10 / 25 / 2016
Transaction ID : SA11A.448267
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

C. ALEXANDER, THOMAS, S., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO BOX 831
 City AURORA State IL Zip Code 60507-0831
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) ALEXANDER LUMBER Occupation (for Individual) EXEC
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 8000.00

Date of Receipt 11 / 03 / 2016
Transaction ID : SA11A.465195
 Amount of Each Receipt this Period 7000.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 7050.00
TOTAL This Period (last page this line number only)..... ▶

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 47 OF 4311
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Team Ryan

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name A. ALGEO, JOHN, , ,		Date of Receipt MM / DD / YYYY 10 / 26 / 2016 Transaction ID : SA11A.449818
Mailing Address 5249 N CANYON WAY		Amount of Each Receipt this Period 25.00
City TUCSON	State AZ	Zip Code 85750-6415
FEC ID number of contributing federal political committee. C		<input type="checkbox"/> Memo Item CONTRIBUTION
Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 215.00	

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name B. ALGEO, JOHN, , ,		Date of Receipt MM / DD / YYYY 11 / 03 / 2016 Transaction ID : SA11A.468745
Mailing Address 5249 N CANYON WAY		Amount of Each Receipt this Period 25.00
City TUCSON	State AZ	Zip Code 85750-6415
FEC ID number of contributing federal political committee. C		<input type="checkbox"/> Memo Item CONTRIBUTION
Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 215.00	

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name C. ALGEO, JOHN, , ,		Date of Receipt MM / DD / YYYY 11 / 03 / 2016 Transaction ID : SA11A.468746
Mailing Address 5249 N CANYON WAY		Amount of Each Receipt this Period 25.00
City TUCSON	State AZ	Zip Code 85750-6415
FEC ID number of contributing federal political committee. C		<input type="checkbox"/> Memo Item CONTRIBUTION
Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Aggregate Year-to-Date ▼ 215.00	

SUBTOTAL of Receipts This Page (optional).....▶	75.00
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 48 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. ALLEHOFF, MICHAEL, A., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address P.O. BOX 114

City COLUMBIA CITY	State OR	Zip Code 97018-0114
-----------------------	-------------	------------------------

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

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
285.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 20 / 2016

Transaction ID : SA11A.442223

Amount of Each Receipt this Period
50.00

Memo Item
CONTRIBUTION

B. ALLEHOFF, MICHAEL, A., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address P.O. BOX 114

City COLUMBIA CITY	State OR	Zip Code 97018-0114
-----------------------	-------------	------------------------

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

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
285.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 20 / 2016

Transaction ID : SA11A.442230

Amount of Each Receipt this Period
50.00

Memo Item
CONTRIBUTION

C. ALLEHOFF, MICHAEL, A., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address P.O. BOX 114

City COLUMBIA CITY	State OR	Zip Code 97018-0114
-----------------------	-------------	------------------------

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

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
285.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 03 / 2016

Transaction ID : SA11A.468840

Amount of Each Receipt this Period
25.00

Memo Item
CONTRIBUTION

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 49 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. ALLEN, EDWARD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2824 PUMP HOUSE ROAD
 City BIRMINGHAM State AL Zip Code 35243-1733
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 325.00

Date of Receipt 10 / 31 / 2016
Transaction ID : SA11A.458616
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

B. ALLEN, EDWARD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2824 PUMP HOUSE ROAD
 City BIRMINGHAM State AL Zip Code 35243-1733
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 325.00

Date of Receipt 11 / 04 / 2016
Transaction ID : SA11A.472579
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

C. ALLEN, GAYLA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 156 WOODSTOCK AVENUE
 City KENILWORTH State IL Zip Code 60043-1235
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SLOAN VALVE CO Occupation (for Individual) CHAIRMAN
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 1700.00

Date of Receipt 11 / 02 / 2016
Transaction ID : SA11A.464983
 Amount of Each Receipt this Period 1000.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	1125.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 50 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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

A. ALLEN, HAROLD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 713 WAKEFIELD CT
 City EL PASO State TX Zip Code 79922-2127
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 4247.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 27 / 2016
Transaction ID : SA11A.453821
 Amount of Each Receipt this Period
 250.00
 Memo Item
 CONTRIBUTION

B. ALLEN, HAROLD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 713 WAKEFIELD CT
 City EL PASO State TX Zip Code 79922-2127
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 4247.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 04 / 2016
Transaction ID : SA11A.472650
 Amount of Each Receipt this Period
 250.00
 Memo Item
 CONTRIBUTION

C. ALLEN, JEFFREY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 604 TORTOISE WAY
 City SATELLITE BEACH State FL Zip Code 32937-3830
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 350.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 06 / 2016
Transaction ID : SA11A.476895
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 51 OF 4311
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. ALLEN, JEFFREY, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 604 TORTOISE WAY

City SATELLITE BEACH	State FL	Zip Code 32937-3830
-------------------------	-------------	------------------------

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

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
350.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
11		04		2016

Transaction ID : SA11A.479435

Amount of Each Receipt this Period
100.00

Memo Item
CONTRIBUTION

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

Mailing Address 1006 BAGDAD ROAD

City SHELBYVILLE	State KY	Zip Code 40065-9509
---------------------	-------------	------------------------

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

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
500.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
10		20		2016

Transaction ID : SA11A.442339

Amount of Each Receipt this Period
250.00

Memo Item
CONTRIBUTION

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

Mailing Address 1006 BAGDAD ROAD

City SHELBYVILLE	State KY	Zip Code 40065-9509
---------------------	-------------	------------------------

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

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
500.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
11		04		2016

Transaction ID : SA11A.473055

Amount of Each Receipt this Period
250.00

Memo Item
CONTRIBUTION

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 52 OF 4311
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. ALLEN, NATHAN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 14 GOMEZ RD
 City HOBE SOUND State FL Zip Code 33455-2217
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 625.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 27 / 2016
Transaction ID : SA11A.453677
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION

B. ALLEN, NATHAN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 14 GOMEZ RD
 City HOBE SOUND State FL Zip Code 33455-2217
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 625.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 04 / 2016
Transaction ID : SA11A.470292
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION

C. ALLEN, PATRICK, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1400 ASHLAND AVENUE
 City RIVER FOREST State IL Zip Code 60305-1032
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 550.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 29 / 2016
Transaction ID : SA11A.460700
 Amount of Each Receipt this Period
 250.00
 Memo Item
 CONTRIBUTION

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 53 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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

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NAME OF COMMITTEE (In Full)
Team Ryan

A. ALLEN, ROGER, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 375 CEMAR CT
 City MARION State IA Zip Code 52302-2500
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) METCY Occupation (for Individual) PHYSICIAN
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 235.00

Date of Receipt **10 / 21 / 2016**
Transaction ID : SA11A.444584
 Amount of Each Receipt this Period 30.00
 Memo Item CONTRIBUTION

B. ALLEN, ROGER, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 375 CEMAR CT
 City MARION State IA Zip Code 52302-2500
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) METCY Occupation (for Individual) PHYSICIAN
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 235.00

Date of Receipt **11 / 04 / 2016**
Transaction ID : SA11A.472503
 Amount of Each Receipt this Period 30.00
 Memo Item CONTRIBUTION

C. ALLEN, SHARON, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 6701 MONNETT RD
 City CLIMAX State NC Zip Code 27233-8290
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 210.00

Date of Receipt **10 / 22 / 2016**
Transaction ID : SA11A.446705
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	110.00
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 54 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
Team Ryan

A. ALLEN, SHARON, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 6701 MONNETT RD
 City CLIMAX State NC Zip Code 27233-8290
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 210.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 31 / 2016
Transaction ID : SA11A.463599
 Amount of Each Receipt this Period
 15.00
 Memo Item
 CONTRIBUTION

B. ALLEN, SHARON, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 6701 MONNETT RD
 City CLIMAX State NC Zip Code 27233-8290
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 210.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 02 / 2016
Transaction ID : SA11A.469955
 Amount of Each Receipt this Period
 20.00
 Memo Item
 CONTRIBUTION

C. ALLEN, SHARON, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 6701 MONNETT RD
 City CLIMAX State NC Zip Code 27233-8290
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 210.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 02 / 2016
Transaction ID : SA11A.469978
 Amount of Each Receipt this Period
 25.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	60.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 55 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. ALLEN, SHELBY, L., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3600 MONTROSE BOULEVARD #801
 City HOUSTON State TX Zip Code 77006-4648
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt 10 / 24 / 2016
Transaction ID : SA11A.443781
 Amount of Each Receipt this Period 500.00
 Memo Item CONTRIBUTION

B. ALLEN, SUSAN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3079 PEARLIE DRIVE NW
 City BROOKHAVEN State MS Zip Code 39601-9077
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) ABB Occupation (for Individual) DRAFTER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 600.00

Date of Receipt 10 / 31 / 2016
Transaction ID : SA11A.464829
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

C. ALLEN, SUSAN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3079 PEARLIE DRIVE NW
 City BROOKHAVEN State MS Zip Code 39601-9077
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) ABB Occupation (for Individual) DRAFTER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 600.00

Date of Receipt 10 / 31 / 2016
Transaction ID : SA11A.464831
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 56 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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

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NAME OF COMMITTEE (In Full)
Team Ryan

A. ALLEN, SUSAN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3079 PEARLIE DRIVE NW
 City BROOKHAVEN State MS Zip Code 39601-9077
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) ABB Occupation (for Individual) DRAFTER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 600.00

Date of Receipt 10 / 31 / 2016
Transaction ID : SA11A.464834
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

B. ALLEN, YVONNE, E., MS.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 856 BRIDGE CREST DR
 City ADA State MI Zip Code 49301-7827
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 585.00

Date of Receipt 10 / 26 / 2016
Transaction ID : SA11A.450503
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

C. ALLEN, YVONNE, E., MS.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 856 BRIDGE CREST DR
 City ADA State MI Zip Code 49301-7827
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 585.00

Date of Receipt 10 / 31 / 2016
Transaction ID : SA11A.457917
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	175.00
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 57 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
Team Ryan

A. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
ALLEN, YVONNE, E., MS.,

Mailing Address **856 BRIDGE CREST DR**

City ADA	State MI	Zip Code 49301-7827
--------------------	--------------------	-------------------------------

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

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
--	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **585.00**

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		31		2016

Transaction ID : SA11A.457924

Amount of Each Receipt this Period

25.00

Memo Item
CONTRIBUTION

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

Mailing Address **856 BRIDGE CREST DR**

City ADA	State MI	Zip Code 49301-7827
--------------------	--------------------	-------------------------------

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

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
--	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **585.00**

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11		02		2016

Transaction ID : SA11A.466097

Amount of Each Receipt this Period

25.00

Memo Item
CONTRIBUTION

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

Mailing Address **856 BRIDGE CREST DR**

City ADA	State MI	Zip Code 49301-7827
--------------------	--------------------	-------------------------------

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

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
--	---

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼ **585.00**

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11		03		2016

Transaction ID : SA11A.468759

Amount of Each Receipt this Period

25.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	75.00
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 58 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. ALLEN, YVONNE, E., MS.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 856 BRIDGE CREST DR
 City ADA State MI Zip Code 49301-7827
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 585.00

Date of Receipt 11 / 04 / 2016
Transaction ID : SA11A.470552
 Amount of Each Receipt this Period 30.00
 Memo Item CONTRIBUTION

B. ALLEN, YVONNE, E., MS.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 856 BRIDGE CREST DR
 City ADA State MI Zip Code 49301-7827
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 585.00

Date of Receipt 11 / 07 / 2016
Transaction ID : SA11A.475901
 Amount of Each Receipt this Period 30.00
 Memo Item CONTRIBUTION

C. ALLEN, YVONNE, E., MS.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 856 BRIDGE CREST DR
 City ADA State MI Zip Code 49301-7827
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 585.00

Date of Receipt 11 / 07 / 2016
Transaction ID : SA11A.475918
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 59 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. ALLEN, YVONNE, E., MS.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 856 BRIDGE CREST DR

City ADA	State MI	Zip Code 49301-7827
-------------	-------------	------------------------

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

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
585.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	05	/	2016

Transaction ID : SA11A.479302

Amount of Each Receipt this Period
25.00

Memo Item
CONTRIBUTION

B. ALLISON, PAUL, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1707 W. 120TH. CT

City TULSA	State OK	Zip Code 74037-
---------------	-------------	--------------------

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

Name of Employer (for Individual) OWNER	Occupation (for Individual) FRANCHISOR
--	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1075.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	27	/	2016

Transaction ID : SA11A.453904

Amount of Each Receipt this Period
50.00

Memo Item
CONTRIBUTION

C. ALLISON, PAUL, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1707 W. 120TH. CT

City TULSA	State OK	Zip Code 74037-
---------------	-------------	--------------------

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

Name of Employer (for Individual) OWNER	Occupation (for Individual) FRANCHISOR
--	---

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
1075.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	04	/	2016

Transaction ID : SA11A.474012

Amount of Each Receipt this Period
50.00

Memo Item
CONTRIBUTION

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 60 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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

A. ALLISON, PAUL, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1707 W. 120TH. CT
 City TULSA State OK Zip Code 74037-
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) OWNER Occupation (for Individual) FRANCHISOR
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1075.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 05 / 2016
Transaction ID : SA11A.478407
 Amount of Each Receipt this Period
 200.00
 Memo Item
 CONTRIBUTION

B. ALLISON, TOM, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3010 THOMAS AVE APT A
 City DALLAS State TX Zip Code 75204-2707
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) INFORMATION REQUESTED PER BEST EFFORTS Occupation (for Individual) INFORMATION REQUESTED PER BE
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 24 / 2016
Transaction ID : SA11A.443480
 Amount of Each Receipt this Period
 300.00
 Memo Item
 CONTRIBUTION

C. ALLSPACH, EUGENE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4654 SPRUCE
 City BELLAIRE State TX Zip Code 77401-3608
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 475.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 26 / 2016
Transaction ID : SA11A.450849
 Amount of Each Receipt this Period
 50.00
 Memo Item
 CONTRIBUTION

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 61 OF 4311
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. ALLSPACH, EUGENE, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 4654 SPRUCE

City BELLAIRE	State TX	Zip Code 77401-3608
------------------	-------------	------------------------

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

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
475.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	28	/	2016

Transaction ID : SA11A.455543

Amount of Each Receipt this Period
25.00

Memo Item
CONTRIBUTION

B. ALLSPACH, EUGENE, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 4654 SPRUCE

City BELLAIRE	State TX	Zip Code 77401-3608
------------------	-------------	------------------------

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

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
475.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	04	/	2016

Transaction ID : SA11A.471582

Amount of Each Receipt this Period
50.00

Memo Item
CONTRIBUTION

C. ALMAGUER, SERGIO, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1700 BROADWAY STREET #403

City SAN FRANCISCO	State CA	Zip Code 94109-2449
-----------------------	-------------	------------------------

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

Name of Employer (for Individual) LATHAM & WATKINS LLP	Occupation (for Individual) LEGAL SECRETARY
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
400.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	27	/	2016

Transaction ID : SA11A.453269

Amount of Each Receipt this Period
100.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	175.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 62 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. ALMAGUER, SERGIO, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1700 BROADWAY STREET #403
 City SAN FRANCISCO State CA Zip Code 94109-2449
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) LATHAM & WATKINS LLP Occupation (for Individual) LEGAL SECRETARY
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt 11 / 03 / 2016
Transaction ID : SA11A.469262
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

B. ALMAGUER, SERGIO, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1700 BROADWAY STREET #403
 City SAN FRANCISCO State CA Zip Code 94109-2449
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) LATHAM & WATKINS LLP Occupation (for Individual) LEGAL SECRETARY
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt 11 / 07 / 2016
Transaction ID : SA11A.476247
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

C. ALMAGUER, SERGIO, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1700 BROADWAY STREET #403
 City SAN FRANCISCO State CA Zip Code 94109-2449
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) LATHAM & WATKINS LLP Occupation (for Individual) LEGAL SECRETARY
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt 11 / 07 / 2016
Transaction ID : SA11A.480601
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 63 OF 4311
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. ALTMAN, ALAN, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 2 GROVE ISLE DRIVE
502

City MIAMI State FL Zip Code 33133-4119

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

Name of Employer (for Individual) SOUTH MIAMI CRITICARE GROUP Occupation (for Individual) EMERGENCY PHYSICIAN

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 1950.00

Date of Receipt 10 / 22 / 2016
Transaction ID : SA11A.446930

Amount of Each Receipt this Period 200.00

Memo Item CONTRIBUTION

B. ALTMAN, ALAN, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 2 GROVE ISLE DRIVE
502

City MIAMI State FL Zip Code 33133-4119

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

Name of Employer (for Individual) SOUTH MIAMI CRITICARE GROUP Occupation (for Individual) EMERGENCY PHYSICIAN

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 1950.00

Date of Receipt 10 / 31 / 2016
Transaction ID : SA11A.463830

Amount of Each Receipt this Period 100.00

Memo Item CONTRIBUTION

C. ALTMAN, ALAN, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 2 GROVE ISLE DRIVE
502

City MIAMI State FL Zip Code 33133-4119

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

Name of Employer (for Individual) SOUTH MIAMI CRITICARE GROUP Occupation (for Individual) EMERGENCY PHYSICIAN

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 1950.00

Date of Receipt 10 / 31 / 2016
Transaction ID : SA11A.463834

Amount of Each Receipt this Period 100.00

Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 400.00

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 64 OF 4311
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. ALTMAN, ALAN, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 2 GROVE ISLE DRIVE
502

City MIAMI State FL Zip Code 33133-4119

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

Name of Employer (for Individual) SOUTH MIAMI CRITICARE GROUP Occupation (for Individual) EMERGENCY PHYSICIAN

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 1950.00

Date of Receipt 11 / 04 / 2016
Transaction ID : SA11A.470377

Amount of Each Receipt this Period 100.00

Memo Item CONTRIBUTION

B. ALTMAN, ALAN, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 2 GROVE ISLE DRIVE
502

City MIAMI State FL Zip Code 33133-4119

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

Name of Employer (for Individual) SOUTH MIAMI CRITICARE GROUP Occupation (for Individual) EMERGENCY PHYSICIAN

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 1950.00

Date of Receipt 11 / 04 / 2016
Transaction ID : SA11A.470379

Amount of Each Receipt this Period 100.00

Memo Item CONTRIBUTION

C. ALTMAN, ALAN, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 2 GROVE ISLE DRIVE
502

City MIAMI State FL Zip Code 33133-4119

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

Name of Employer (for Individual) SOUTH MIAMI CRITICARE GROUP Occupation (for Individual) EMERGENCY PHYSICIAN

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 1950.00

Date of Receipt 11 / 04 / 2016
Transaction ID : SA11A.472053

Amount of Each Receipt this Period 200.00

Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 400.00

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 65 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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

A. ALTMAN, ALAN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2 GROVE ISLE DRIVE
 502
 City MIAMI State FL Zip Code 33133-4119
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SOUTH MIAMI CRITICARE GROUP Occupation (for Individual) EMERGENCY PHYSICIAN
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1950.00

Date of Receipt
 11 / 06 / 2016
Transaction ID : SA11A.477885
 Amount of Each Receipt this Period
 100.00
 Memo Item CONTRIBUTION

B. ALTMAN, ALAN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2 GROVE ISLE DRIVE
 502
 City MIAMI State FL Zip Code 33133-4119
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SOUTH MIAMI CRITICARE GROUP Occupation (for Individual) EMERGENCY PHYSICIAN
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1950.00

Date of Receipt
 11 / 05 / 2016
Transaction ID : SA11A.478934
 Amount of Each Receipt this Period
 100.00
 Memo Item CONTRIBUTION

C. ALTMAN, ALAN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2 GROVE ISLE DRIVE
 502
 City MIAMI State FL Zip Code 33133-4119
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SOUTH MIAMI CRITICARE GROUP Occupation (for Individual) EMERGENCY PHYSICIAN
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1950.00

Date of Receipt
 11 / 05 / 2016
Transaction ID : SA11A.478937
 Amount of Each Receipt this Period
 100.00
 Memo Item CONTRIBUTION

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 66 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
Team Ryan

A. ALTMAN, JAMES, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1108 RED DALE ROAD
 City ORWIGSBURG State PA Zip Code 17961-9469
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 26 / 2016
Transaction ID : SA11A.447678
 Amount of Each Receipt this Period
 500.00
 Memo Item
 CONTRIBUTION

B. ALTMAN, THOMAS, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1000 N.E. SECOND STREET
 City BELLE GLADE State FL Zip Code 33430-2026
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) MORGAN STANLEY Occupation (for Individual) STOCKBROKER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 550.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 04 / 2016
Transaction ID : SA11A.472296
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION

C. ALTSCHULER, JEFFREY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 15 PEMBROKE RD
 City SUMMIT State NJ Zip Code 07901-3055
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) JEFFREY ALTSCHULER Occupation (for Individual) EXEC
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 1100.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 28 / 2016
Transaction ID : SA11A.456047
 Amount of Each Receipt this Period
 200.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	800.00
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 67 OF 4311
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. ALTSCHULER, JEFFREY, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 15 PEMBROKE RD

City SUMMIT	State NJ	Zip Code 07901-3055
----------------	-------------	------------------------

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

Name of Employer (for Individual) JEFFREY ALTSCHULER	Occupation (for Individual) EXEC
---	-------------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1100.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	04	/	2016

Transaction ID : SA11A.472920

Amount of Each Receipt this Period
200.00

Memo Item
CONTRIBUTION

B. ALTSCHULER, STEVEN, M., DR.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1932 PANAMA ST

City PHILADELPHIA	State PA	Zip Code 19103-6610
----------------------	-------------	------------------------

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

Name of Employer (for Individual) THE CHILDRENS HOSPITAL OF PHILADELPHIA	Occupation (for Individual) PHYSICIAN
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	24	/	2016

Transaction ID : SA11A.443459

Amount of Each Receipt this Period
1000.00

Memo Item
CONTRIBUTION

C. ALTSTADT, JAMES, R., MR.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 9029 GREENACRE CT.

City GREENDALE	State WI	Zip Code 53129-1546
-------------------	-------------	------------------------

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

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
400.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	29	/	2016

Transaction ID : SA11A.461147

Amount of Each Receipt this Period
100.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	1300.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 68 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. ALTSTADT, JAMES, R., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 9029 GREENACRE CT.
 City GREENDALE State WI Zip Code 53129-1546
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt
 11 / 04 / 2016
Transaction ID : SA11A.470784
 Amount of Each Receipt this Period
 100.00
 Memo Item CONTRIBUTION

B. ALVAREZ, IRMA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4201 BONITA RD. 146
 City BONITA State CA Zip Code 91902-1442
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 459.00

Date of Receipt
 10 / 26 / 2016
Transaction ID : SA11A.451310
 Amount of Each Receipt this Period
 50.00
 Memo Item CONTRIBUTION

C. ALVAREZ, IRMA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4201 BONITA RD. 146
 City BONITA State CA Zip Code 91902-1442
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 459.00

Date of Receipt
 10 / 26 / 2016
Transaction ID : SA11A.451311
 Amount of Each Receipt this Period
 50.00
 Memo Item CONTRIBUTION

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 69 OF 4311
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. ALVAREZ, IRMA, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 4201 BONITA RD.
146

City BONITA State CA Zip Code 91902-1442

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

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

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 459.00

Date of Receipt 10 / 30 / 2016
Transaction ID : SA11A.460105

Amount of Each Receipt this Period 50.00

Memo Item CONTRIBUTION

B. ALVAREZ, IRMA, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 4201 BONITA RD.
146

City BONITA State CA Zip Code 91902-1442

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

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

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 459.00

Date of Receipt 11 / 04 / 2016
Transaction ID : SA11A.472555

Amount of Each Receipt this Period 50.00

Memo Item CONTRIBUTION

C. ALVAREZ MINERVINI, MARIA DEL SOCORRO, CUEVAS, ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 776413 PALA PALMS DRIVE

City INDIAN WELLS State CA Zip Code 92210-

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

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

Receipt For: Primary General Other (specify)

Aggregate Year-to-Date ▼ 1200.00

Date of Receipt 11 / 10 / 2016
Transaction ID : SA11A.468214

Amount of Each Receipt this Period 1200.00

Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 1300.00

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 70 OF 4311
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. AMATO, DIANE, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 5440 GLENWAY DRIVE

City BRIGHTON	State MI	Zip Code 48116-7727
------------------	-------------	------------------------

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

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
205.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	25	/	2016

Transaction ID : SA11A.451776

Amount of Each Receipt this Period
30.00

Memo Item CONTRIBUTION

B. AMATO, DIANE, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 5440 GLENWAY DRIVE

City BRIGHTON	State MI	Zip Code 48116-7727
------------------	-------------	------------------------

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

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
205.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	02	/	2016

Transaction ID : SA11A.469976

Amount of Each Receipt this Period
25.00

Memo Item CONTRIBUTION

C. AMBROZ, CLARA, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address PO BOX 388

City HEDGESVILLE	State WV	Zip Code 25427-0388
---------------------	-------------	------------------------

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

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

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	26	/	2016

Transaction ID : SA11A.449731

Amount of Each Receipt this Period
250.00

Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	305.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 71 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. AMBROS, PAUL, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 6600 CENTER DRIVE
 City STERLING HEIGHTS State MI Zip Code 48312-2666
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) KUKA SYSTEMS NORTH AMERICA Occupation (for Individual) CHIEF FINANCIAL OFFICER
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 250.00

Date of Receipt: 10 / 20 / 2016
Transaction ID : SA11A.444699
 Amount of Each Receipt this Period: 250.00
 Memo Item CONTRIBUTION

B. AMMERMAN, JOSEPH, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 138 ENCHANTED DRIVE
 City GEORGETOWN State TX Zip Code 78633-4534
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 450.00

Date of Receipt: 10 / 31 / 2016
Transaction ID : SA11A.458691
 Amount of Each Receipt this Period: 250.00
 Memo Item CONTRIBUTION

C. AMPOLINI, JACQUES, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 6800 FLEETWOOD ROAD, UNIT 401
 City MCLEAN State VA Zip Code 22101-3604
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 390.00

Date of Receipt: 10 / 28 / 2016
Transaction ID : SA11A.456084
 Amount of Each Receipt this Period: 25.00
 Memo Item CONTRIBUTION

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 72 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. AMPOLINI, JACQUES, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 6800 FLEETWOOD ROAD, UNIT 401
 City MCLEAN State VA Zip Code 22101-3604
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 390.00

Date of Receipt: 10 / 29 / 2016
Transaction ID : SA11A.461168
 Amount of Each Receipt this Period: 25.00
 Memo Item CONTRIBUTION

B. AMPOLINI, JACQUES, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 6800 FLEETWOOD ROAD, UNIT 401
 City MCLEAN State VA Zip Code 22101-3604
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 390.00

Date of Receipt: 11 / 04 / 2016
Transaction ID : SA11A.470873
 Amount of Each Receipt this Period: 25.00
 Memo Item CONTRIBUTION

C. AMPOLINI, JACQUES, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 6800 FLEETWOOD ROAD, UNIT 401
 City MCLEAN State VA Zip Code 22101-3604
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 390.00

Date of Receipt: 11 / 07 / 2016
Transaction ID : SA11A.475393
 Amount of Each Receipt this Period: 25.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 75.00
TOTAL This Period (last page this line number only)..... ▶

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 73 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. ANCONE, LAUREL, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 8850 OLD MILL CREEK RD
 City BRENHAM State TX Zip Code 77833-1426
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1150.00

Date of Receipt 10 / 26 / 2016
Transaction ID : SA11A.450177
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

B. ANCONE, LAUREL, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 8850 OLD MILL CREEK RD
 City BRENHAM State TX Zip Code 77833-1426
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1150.00

Date of Receipt 10 / 31 / 2016
Transaction ID : SA11A.458316
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

C. ANCONE, LAUREL, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 8850 OLD MILL CREEK RD
 City BRENHAM State TX Zip Code 77833-1426
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1150.00

Date of Receipt 10 / 31 / 2016
Transaction ID : SA11A.458318
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 74 OF 4311
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
Team Ryan

A. ANDERSON, AGNES, V., MRS.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 890 WIXFORD WAY

City SACRAMENTO	State CA	Zip Code 95864-6139
FEC ID number of contributing federal political committee. C		
Name of Employer (for Individual) RETIRED		Occupation (for Individual) RETIRED
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 220.00

Date of Receipt
11 / 01 / 2016
Transaction ID : SA11A.457205

Amount of Each Receipt this Period
60.00

Memo Item CONTRIBUTION

B. ANDERSON, BYRON, H., MR.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 2021 HUNTINGTON LANE

City FORT WORTH	State TX	Zip Code 76110-1743
FEC ID number of contributing federal political committee. C		
Name of Employer (for Individual) NONE		Occupation (for Individual) RETIRED
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 1284.00

Date of Receipt
10 / 24 / 2016
Transaction ID : SA11A.445824

Amount of Each Receipt this Period
250.00

Memo Item CONTRIBUTION

C. ANDERSON, BYRON, H., MR.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 2021 HUNTINGTON LANE

City FORT WORTH	State TX	Zip Code 76110-1743
FEC ID number of contributing federal political committee. C		
Name of Employer (for Individual) NONE		Occupation (for Individual) RETIRED
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		Aggregate Year-to-Date ▼ 1284.00

Date of Receipt
10 / 27 / 2016
Transaction ID : SA11A.453796

Amount of Each Receipt this Period
75.00

Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	385.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 75 OF 4311
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. ANDERSON, BYRON, H., MR.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 2021 HUNTINGTON LANE

City FORT WORTH	State TX	Zip Code 76110-1743
FEC ID number of contributing federal political committee. C		
Name of Employer (for Individual) NONE		Occupation (for Individual) RETIRED
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 1284.00

Date of Receipt
11 / 14 / 2016
Transaction ID : SA11A.468259

Amount of Each Receipt this Period
50.00

Memo Item CONTRIBUTION

B. ANDERSON, BYRON, H., MR.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 2021 HUNTINGTON LANE

City FORT WORTH	State TX	Zip Code 76110-1743
FEC ID number of contributing federal political committee. C		
Name of Employer (for Individual) NONE		Occupation (for Individual) RETIRED
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 1284.00

Date of Receipt
11 / 04 / 2016
Transaction ID : SA11A.471866

Amount of Each Receipt this Period
75.00

Memo Item CONTRIBUTION

C. ANDERSON, CAROL, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 1025 STRONG RD

City VICTOR	State NY	Zip Code 14564-9124
FEC ID number of contributing federal political committee. C		
Name of Employer (for Individual) NONE		Occupation (for Individual) RETIRED
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		Aggregate Year-to-Date ▼ 975.00

Date of Receipt
11 / 06 / 2016
Transaction ID : SA11A.477747

Amount of Each Receipt this Period
50.00

Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	175.00
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 76 OF 4311
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Team Ryan

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

Mailing Address 100 FALL CREEK ROAD

City LAWRENCE	State KS	Zip Code 66049-9067
------------------	-------------	------------------------

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

Name of Employer (for Individual) MACERICH	Occupation (for Individual) REAL ESTATE INVESTMENT TRUST
---	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1200.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		31		2016

Transaction ID : SA11A.459014

Amount of Each Receipt this Period
1000.00

Memo Item
CONTRIBUTION

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

Mailing Address BOX 114

City MARKHAM	State VA	Zip Code 22643-0114
-----------------	-------------	------------------------

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

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
300.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		27		2016

Transaction ID : SA11A.454037

Amount of Each Receipt this Period
100.00

Memo Item
CONTRIBUTION

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

Mailing Address BOX 114

City MARKHAM	State VA	Zip Code 22643-0114
-----------------	-------------	------------------------

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

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
300.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11		04		2016

Transaction ID : SA11A.472155

Amount of Each Receipt this Period
100.00

Memo Item
CONTRIBUTION

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 77 OF 4311
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Team Ryan

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

Mailing Address **7858 BRESSINGHAM DR**

City FAIRFAX STATION	State VA	Zip Code 22039-3155
--------------------------------	--------------------	-------------------------------

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

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
--	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **300.00**

Date of Receipt
11 / 07 / 2016

Transaction ID : SA11A.476122

Amount of Each Receipt this Period
100.00

Memo Item CONTRIBUTION

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

Mailing Address **11412 MISSISSIPPI DR N**

City CHAMPLIN	State MN	Zip Code 55316-3508
-------------------------	--------------------	-------------------------------

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

Name of Employer (for Individual) CROWN IRON WORKS COMPANY	Occupation (for Individual) VP ENGINEERING
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **1000.00**

Date of Receipt
10 / 30 / 2016

Transaction ID : SA11A.459800

Amount of Each Receipt this Period
1000.00

Memo Item CONTRIBUTION

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

Mailing Address **501 ABNER CRUZE ROAD**

City KNOXVILLE	State TN	Zip Code 37920-6371
--------------------------	--------------------	-------------------------------

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

Name of Employer (for Individual) UNIVERSITY OF TENNESSEE	Occupation (for Individual) FOREMAN
---	---

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼ **373.00**

Date of Receipt
10 / 23 / 2016

Transaction ID : SA11A.446580

Amount of Each Receipt this Period
50.00

Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	1150.00
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 78 OF 4311
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

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

Mailing Address 501 ABNER CRUZE ROAD

City KNOXVILLE	State TN	Zip Code 37920-6371
-------------------	-------------	------------------------

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

Name of Employer (for Individual) UNIVERSITY OF TENNESSEE	Occupation (for Individual) FOREMAN
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
373.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	26	/	2016

Transaction ID : SA11A.451232

Amount of Each Receipt this Period
50.00

Memo Item CONTRIBUTION

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

Mailing Address 501 ABNER CRUZE ROAD

City KNOXVILLE	State TN	Zip Code 37920-6371
-------------------	-------------	------------------------

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

Name of Employer (for Individual) UNIVERSITY OF TENNESSEE	Occupation (for Individual) FOREMAN
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
373.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	04	/	2016

Transaction ID : SA11A.473240

Amount of Each Receipt this Period
50.00

Memo Item CONTRIBUTION

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

Mailing Address 397 SHERWOOD DR.

City CAROL STREAM	State IL	Zip Code 60188-2215
----------------------	-------------	------------------------

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

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

Aggregate Year-to-Date ▼
275.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	31	/	2016

Transaction ID : SA11A.457610

Amount of Each Receipt this Period
75.00

Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	175.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 79 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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

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NAME OF COMMITTEE (In Full)
Team Ryan

A. ANDERSON, JIM, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 834 HEALEY BLVD
 City ALPINE State UT Zip Code 84004-2655
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 700.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 23 / 2016
Transaction ID : SA11A.449623
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION

B. ANDERSON, JIM, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 834 HEALEY BLVD
 City ALPINE State UT Zip Code 84004-2655
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 700.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 04 / 2016
Transaction ID : SA11A.471159
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION

C. ANDERSON, LISA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4635 FALCON GROVE DRIVE
 City INDIANAPOLIS State IN Zip Code 46254-5919
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) WELLS FARGO BANK Occupation (for Individual) OPERATIONAL RISK CONSULTANT
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 25 / 2016
Transaction ID : SA11A.451429
 Amount of Each Receipt this Period
 50.00
 Memo Item
 CONTRIBUTION

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 80 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. ANDERSON, LISA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4635 FALCON GROVE DRIVE

City INDIANAPOLIS	State IN	Zip Code 46254-5919
----------------------	-------------	------------------------

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

Name of Employer (for Individual) WELLS FARGO BANK	Occupation (for Individual) OPERATIONAL RISK CONSULTANT
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 25 / 2016
Transaction ID : SA11A.451430

Amount of Each Receipt this Period
50.00

Memo Item
CONTRIBUTION

B. ANDERSON, LISA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4635 FALCON GROVE DRIVE

City INDIANAPOLIS	State IN	Zip Code 46254-5919
----------------------	-------------	------------------------

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

Name of Employer (for Individual) WELLS FARGO BANK	Occupation (for Individual) OPERATIONAL RISK CONSULTANT
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 06 / 2016
Transaction ID : SA11A.478301

Amount of Each Receipt this Period
50.00

Memo Item
CONTRIBUTION

C. ANDERSON, LISA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4635 FALCON GROVE DRIVE

City INDIANAPOLIS	State IN	Zip Code 46254-5919
----------------------	-------------	------------------------

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

Name of Employer (for Individual) WELLS FARGO BANK	Occupation (for Individual) OPERATIONAL RISK CONSULTANT
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 07 / 2016
Transaction ID : SA11A.480372

Amount of Each Receipt this Period
50.00

Memo Item
CONTRIBUTION

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 81 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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

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NAME OF COMMITTEE (In Full)
Team Ryan

A. ANDERSON, NANCY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5046- 16TH AVE NE
 City SEATTLE State WA Zip Code 98105-4229
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 26 / 2016
Transaction ID : SA11A.450111
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION

B. ANDERSON, NANCY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5046- 16TH AVE NE
 City SEATTLE State WA Zip Code 98105-4229
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 26 / 2016
Transaction ID : SA11A.450118
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION

C. ANDERSON, NANCY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5046- 16TH AVE NE
 City SEATTLE State WA Zip Code 98105-4229
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 26 / 2016
Transaction ID : SA11A.450121
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 82 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. ANDERSON, NANCY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5046- 16TH AVE NE
 City SEATTLE State WA Zip Code 98105-4229
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt 10 / 26 / 2016
Transaction ID : SA11A.450123
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

B. ANDERSEN, PAUL, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 196 GRAND OAKS DR.
 City GLENDORA State CA Zip Code 91741-3912
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) ANDERSEN PLUMBING Occupation (for Individual) OWNER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 650.00

Date of Receipt 10 / 26 / 2016
Transaction ID : SA11A.454534
 Amount of Each Receipt this Period 200.00
 Memo Item CONTRIBUTION

C. ANDERSON, RON, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 823 TORRENCE DR.
 City SPRINGFIELD State OH Zip Code 45503-1938
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RON ANDERSON Occupation (for Individual) DENTIST
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 10 / 26 / 2016
Transaction ID : SA11A.450817
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 83 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. ANDERSON, SHIRLEY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 6877 TERRENO DR
 City RANCHO MURIETA State CA Zip Code 95683-9412
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 230.00

Date of Receipt 10 / 24 / 2016
Transaction ID : SA11A.449571
 Amount of Each Receipt this Period 30.00
 Memo Item CONTRIBUTION

B. ANDERSON, SHIRLEY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 6877 TERRENO DR
 City RANCHO MURIETA State CA Zip Code 95683-9412
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 230.00

Date of Receipt 11 / 07 / 2016
Transaction ID : SA11A.480155
 Amount of Each Receipt this Period 45.00
 Memo Item CONTRIBUTION

C. ANDERSON, STEPHANIE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 20835 SAXON CT.
 City BROOKFIELD State WI Zip Code 53045-1734
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 325.00

Date of Receipt 10 / 25 / 2016
Transaction ID : SA11A.449062
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 84 OF 4311
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
Team Ryan

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

Mailing Address 20835 SAXON CT.

City BROOKFIELD	State WI	Zip Code 53045-1734
--------------------	-------------	------------------------

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

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
325.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	25	/	2016

Transaction ID : SA11A.449063

Amount of Each Receipt this Period
25.00

Memo Item CONTRIBUTION

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

Mailing Address 20835 SAXON CT.

City BROOKFIELD	State WI	Zip Code 53045-1734
--------------------	-------------	------------------------

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

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
325.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	07	/	2016

Transaction ID : SA11A.475839

Amount of Each Receipt this Period
25.00

Memo Item CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
C. ANDREWS, BARRY, G., ,

Mailing Address 2730 IRVING BOULEVARD

City DALLAS	State TX	Zip Code 75207-2308
----------------	-------------	------------------------

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

Name of Employer (for Individual) ANDREWS DISTRIBUTING	Occupation (for Individual) BEER WHOLESALER
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
25000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	24	/	2016

Transaction ID : SA11A.443440

Amount of Each Receipt this Period
10000.00

Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	10050.00
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 85 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
Team Ryan

A. ANDRESSEN, CLARENCE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3802 N CALLE HONDONADA
 City TUCSON State AZ Zip Code 85750-2315
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 27 / 2016
Transaction ID : SA11A.453962
 Amount of Each Receipt this Period
 25.00
 Memo Item
 CONTRIBUTION

B. ANDRESSEN, CLARENCE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3802 N CALLE HONDONADA
 City TUCSON State AZ Zip Code 85750-2315
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 27 / 2016
Transaction ID : SA11A.453998
 Amount of Each Receipt this Period
 25.00
 Memo Item
 CONTRIBUTION

C. ANDRESSEN, CLARENCE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3802 N CALLE HONDONADA
 City TUCSON State AZ Zip Code 85750-2315
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 27 / 2016
Transaction ID : SA11A.454002
 Amount of Each Receipt this Period
 25.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	75.00
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 86 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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

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NAME OF COMMITTEE (In Full)
Team Ryan

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

Mailing Address **1392 STATE HIGHWAY M28**

City MARQUETTE	State MI	Zip Code 49855-9328
--------------------------	--------------------	-------------------------------

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

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
--	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **350.00**

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		23		2016

Transaction ID : SA11A.446257

Amount of Each Receipt this Period

50.00

Memo Item
CONTRIBUTION

B. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
ANDREWS, GERALD, , ,

Mailing Address **1392 STATE HIGHWAY M28**

City MARQUETTE	State MI	Zip Code 49855-9328
--------------------------	--------------------	-------------------------------

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

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
--	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **350.00**

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		23		2016

Transaction ID : SA11A.446258

Amount of Each Receipt this Period

50.00

Memo Item
CONTRIBUTION

C. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
ANDREWS, KELLI, , ,

Mailing Address **6605 RIMROCK DR**

City IDAHO FALLS	State ID	Zip Code 83401-8001
----------------------------	--------------------	-------------------------------

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

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
--	---

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼ **747.00**

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11		04		2016

Transaction ID : SA11A.479628

Amount of Each Receipt this Period

50.00

Memo Item
CONTRIBUTION

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 87 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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

A. ANDREWS, KELLI, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 6605 RIMROCK DR
 City IDAHO FALLS State ID Zip Code 83401-8001
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 747.00

Date of Receipt 11 / 04 / 2016
Transaction ID : SA11A.479629
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

B. ANDREWS, KEN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 21 SHADY BROOK DR.
 City LANGHORNE State PA Zip Code 19047-8010
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 207.00

Date of Receipt 11 / 05 / 2016
Transaction ID : SA11A.479030
 Amount of Each Receipt this Period 30.00
 Memo Item CONTRIBUTION

C. ANDREWS, NANCY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 32775 RANCH TRAIL
 City SHAFER State MN Zip Code 55074-4504
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt 10 / 22 / 2016
Transaction ID : SA11A.446982
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	330.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 88 OF 4311
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Team Ryan

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

Mailing Address 32775 RANCH TRAIL

City SHAFER State MN Zip Code 55074-4504

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

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

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 1000.00

Date of Receipt **11 / 04 / 2016**

Transaction ID : SA11A.472678

Amount of Each Receipt this Period 250.00

Memo Item CONTRIBUTION

B. ANDRESEN, RANDI, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 2037 N PARKSIDE DR 2

City PARK RIDGE State IL Zip Code 60068-1001

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

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

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 420.00

Date of Receipt **10 / 21 / 2016**

Transaction ID : SA11A.444594

Amount of Each Receipt this Period 25.00

Memo Item CONTRIBUTION

C. ANDRESEN, RANDI, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 2037 N PARKSIDE DR 2

City PARK RIDGE State IL Zip Code 60068-1001

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

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

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 420.00

Date of Receipt **10 / 31 / 2016**

Transaction ID : SA11A.463552

Amount of Each Receipt this Period 30.00

Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 305.00

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 89 OF 4311
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. ANDRESEN, RANDI, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 2037 N PARKSIDE DR
2

City PARK RIDGE State IL Zip Code 60068-1001

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

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

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
420.00

Date of Receipt
MM / DD / YYYY
10 / 31 / 2016

Transaction ID : SA11A.463636

Amount of Each Receipt this Period
30.00

Memo Item CONTRIBUTION

B. ANDRESEN, RANDI, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 2037 N PARKSIDE DR
2

City PARK RIDGE State IL Zip Code 60068-1001

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

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

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
420.00

Date of Receipt
MM / DD / YYYY
11 / 04 / 2016

Transaction ID : SA11A.472703

Amount of Each Receipt this Period
25.00

Memo Item CONTRIBUTION

C. ANDRESEN, RANDI, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 2037 N PARKSIDE DR
2

City PARK RIDGE State IL Zip Code 60068-1001

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

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

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
420.00

Date of Receipt
MM / DD / YYYY
11 / 04 / 2016

Transaction ID : SA11A.474101

Amount of Each Receipt this Period
30.00

Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 85.00

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 91 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. ANDREWS, WILLIAM, F., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1409 MORAN RD
 City FRANKLIN State TN Zip Code 37069-6301
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 600.00

Date of Receipt 11 / 07 / 2016
Transaction ID : SA11A.476439
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

B. ANDROS, GUS, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1203 PASEO DORADO
 City SAN DIMAS State CA Zip Code 91773-4411
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) DAUM COMMERCIAL Occupation (for Individual) REAL ESTATE SALES
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 225.00

Date of Receipt 11 / 04 / 2016
Transaction ID : SA11A.472216
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

C. ANDROS, GUS, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1203 PASEO DORADO
 City SAN DIMAS State CA Zip Code 91773-4411
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) DAUM COMMERCIAL Occupation (for Individual) REAL ESTATE SALES
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 225.00

Date of Receipt 11 / 05 / 2016
Transaction ID : SA11A.478571
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 92 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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

A. ANDROS, GUS, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1203 PASEO DORADO
 City SAN DIMAS State CA Zip Code 91773-4411
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) DAUM COMMERCIAL Occupation (for Individual) REAL ESTATE SALES
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date **225.00**

Date of Receipt **11 / 05 / 2016**
Transaction ID : SA11A.479230
 Amount of Each Receipt this Period **25.00**
 Memo Item CONTRIBUTION

B. ANGELL, E., JOE, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1880 E STATE HIGHWAY 54
 City LINTON State IN Zip Code 47441-9594
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date **300.00**

Date of Receipt **10 / 26 / 2016**
Transaction ID : SA11A.447612
 Amount of Each Receipt this Period **100.00**
 Memo Item CONTRIBUTION

C. ANGELL, E., JOE, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1880 E STATE HIGHWAY 54
 City LINTON State IN Zip Code 47441-9594
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date **300.00**

Date of Receipt **11 / 03 / 2016**
Transaction ID : SA11A.465465
 Amount of Each Receipt this Period **100.00**
 Memo Item CONTRIBUTION

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 93 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. ANGELES, MARIA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 201 S PACIFIC AVE
 City GLENDALE State CA Zip Code 91204-1117
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) LAW OFFICES OF MC ANGELES Occupation (for Individual) LEGAL
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 450.00

Date of Receipt 10 / 30 / 2016
Transaction ID : SA11A.460073
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

B. ANGELES, MARIA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 201 S PACIFIC AVE
 City GLENDALE State CA Zip Code 91204-1117
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) LAW OFFICES OF MC ANGELES Occupation (for Individual) LEGAL
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 450.00

Date of Receipt 11 / 04 / 2016
Transaction ID : SA11A.471755
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

C. ANGELIN, NELS, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4020 ALABAMA RD
 City APISON State TN Zip Code 37302-9789
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) YORK CABINETS Occupation (for Individual) CABINETMAKER
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 11 / 04 / 2016
Transaction ID : SA11A.472997
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 94 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. ANKLAM, JAMES, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1301 S ARLINGTON RIDGE ROAD
 APT 709
 City ARLINGTON State VA Zip Code 22202-1907
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) FRIED FRANK Occupation (for Individual) ATTORNEY
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 4000.00

Date of Receipt 11 / 01 / 2016
Transaction ID : SA11A.461555
 Amount of Each Receipt this Period 4000.00
 Memo Item CONTRIBUTION

B. ANLE, HARRISON, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 14277 HESBY STREET
 City SHERMAN OAKS State CA Zip Code 91403-
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NORTHGATE GONZALEZ, LLC Occupation (for Individual) CHIEF INFORMATION OFFICER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 618.00

Date of Receipt 10 / 20 / 2016
Transaction ID : SA11A.442472
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

C. ANLE, HARRISON, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 14277 HESBY STREET
 City SHERMAN OAKS State CA Zip Code 91403-
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NORTHGATE GONZALEZ, LLC Occupation (for Individual) CHIEF INFORMATION OFFICER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 618.00

Date of Receipt 11 / 04 / 2016
Transaction ID : SA11A.473380
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	4200.00
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 95 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. ANNEE, PATRICIA, C., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1045 FOUNTAIN ST
 City ALAMEDA State CA Zip Code 94501-5545
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 225.00

Date of Receipt **10 / 31 / 2016**
Transaction ID : SA11A.458071
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

B. ANNEE, PATRICIA, C., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1045 FOUNTAIN ST
 City ALAMEDA State CA Zip Code 94501-5545
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 225.00

Date of Receipt **11 / 05 / 2016**
Transaction ID : SA11A.478929
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

C. ANNEE, PATRICIA, C., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1045 FOUNTAIN ST
 City ALAMEDA State CA Zip Code 94501-5545
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 225.00

Date of Receipt **11 / 05 / 2016**
Transaction ID : SA11A.478931
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 96 OF 4311
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. ANNEE, PATRICIA, C., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1045 FOUNTAIN ST
 City ALAMEDA State CA Zip Code 94501-5545
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 225.00

Date of Receipt **11 / 05 / 2016**
Transaction ID : SA11A.478932
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

B. ANSTINE, BYRON, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 16050 W. BAY DR. 255
 City JUPITER State FL Zip Code 33477-2319
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt **10 / 21 / 2016**
Transaction ID : SA11A.444479
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

C. ANSTINE, BYRON, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 16050 W. BAY DR. 255
 City JUPITER State FL Zip Code 33477-2319
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt **11 / 04 / 2016**
Transaction ID : SA11A.472683
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 97 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. ANTALFFY, LES, P., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 11946 SUMMERDALE ST
 City HOUSTON State TX Zip Code 77077-3022
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) FLUOR Occupation (for Individual) ENGINEER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 209.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 31 / 2016
Transaction ID : SA11A.458449
 Amount of Each Receipt this Period
 25.00
 Memo Item
 CONTRIBUTION

B. ANTALFFY, LES, P., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 11946 SUMMERDALE ST
 City HOUSTON State TX Zip Code 77077-3022
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) FLUOR Occupation (for Individual) ENGINEER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 209.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 31 / 2016
Transaction ID : SA11A.458451
 Amount of Each Receipt this Period
 25.00
 Memo Item
 CONTRIBUTION

C. ANTONUCCI, CHRISTOPHER, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 8 BEEKMAN HILL ROAD
 City ESSEX FELLS State NJ Zip Code 07021-1803
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) ALL CITY LEASING Occupation (for Individual) CFO
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 750.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 28 / 2016
Transaction ID : SA11A.456054
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 98 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. ANTONUCCI, CHRISTOPHER, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 8 BEEKMAN HILL ROAD

City ESSEX FELLS	State NJ	Zip Code 07021-1803
---------------------	-------------	------------------------

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

Name of Employer (for Individual) ALL CITY LEASING	Occupation (for Individual) CFO
---	------------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
750.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 04 / 2016
Transaction ID : SA11A.473360

Amount of Each Receipt this Period
100.00

Memo Item
CONTRIBUTION

B. ANTOS, STELLA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4725 CHAREST AVE.

City WATERFORD	State MI	Zip Code 48327-3408
-------------------	-------------	------------------------

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

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
215.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 30 / 2016
Transaction ID : SA11A.460224

Amount of Each Receipt this Period
10.00

Memo Item
CONTRIBUTION

C. ANTOS, STELLA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4725 CHAREST AVE.

City WATERFORD	State MI	Zip Code 48327-3408
-------------------	-------------	------------------------

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

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
215.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 04 / 2016
Transaction ID : SA11A.473942

Amount of Each Receipt this Period
10.00

Memo Item
CONTRIBUTION

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 99 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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

A. ANTOS, STELLA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4725 CHAREST AVE.
 City WATERFORD State MI Zip Code 48327-3408
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 215.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 07 / 2016
Transaction ID : SA11A.476144
 Amount of Each Receipt this Period
 10.00
 Memo Item
 CONTRIBUTION

B. ANUNDTSEN, JOHN, K., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 326 BENTLEY DRIVE
 City NAPLES State FL Zip Code 34110-8634
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 700.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 04 / 2016
Transaction ID : SA11A.467492
 Amount of Each Receipt this Period
 200.00
 Memo Item
 CONTRIBUTION

C. ANWAR, AZAM, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4218 LOMO ALTO COURT
 City DALLAS State TX Zip Code 75219-1537
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) AZAM ANWAR Occupation (for Individual) PHYSICIAN
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 02 / 2016
Transaction ID : SA11A.469478
 Amount of Each Receipt this Period
 400.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	610.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 100 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. APPLE, CASS, P., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 249 POLHEMUS AVE
 City ATHERTON State CA Zip Code 94027-5442
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 700.00

Date of Receipt 10 / 21 / 2016
Transaction ID : SA11A.443558
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

B. APPLE, CASS, P., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 249 POLHEMUS AVE
 City ATHERTON State CA Zip Code 94027-5442
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 700.00

Date of Receipt 10 / 30 / 2016
Transaction ID : SA11A.459860
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

C. APPELATE, ERIN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 12718 WANDERING STREAMS DR
 City TOMBALL State TX Zip Code 77377-8782
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) FLEETCARD INC Occupation (for Individual) OWNER
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 10 / 24 / 2016
Transaction ID : SA11A.449241
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 101 OF 4311
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. APPLEGATE, ERIN, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 12718 WANDERING STREAMS DR

City TOMBALL	State TX	Zip Code 77377-8782
-----------------	-------------	------------------------

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

Name of Employer (for Individual) FLEETCARD INC	Occupation (for Individual) OWNER
--	--------------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	24	/	2016

Transaction ID : SA11A.449243

Amount of Each Receipt this Period
25.00

Memo Item
CONTRIBUTION

B. APPLEGATE, ERIN, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 12718 WANDERING STREAMS DR

City TOMBALL	State TX	Zip Code 77377-8782
-----------------	-------------	------------------------

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

Name of Employer (for Individual) FLEETCARD INC	Occupation (for Individual) OWNER
--	--------------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	02	/	2016

Transaction ID : SA11A.466986

Amount of Each Receipt this Period
100.00

Memo Item
CONTRIBUTION

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

Mailing Address 5302 SUMMERTIME LANE

City CULVER CITY	State CA	Zip Code 90230-4508
---------------------	-------------	------------------------

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

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

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
498.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	28	/	2016

Transaction ID : SA11A.461530

Amount of Each Receipt this Period
50.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	175.00
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 102 OF 4311
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. APPLEBAUM, JEROME, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5302 SUMMERTIME LANE
 City CULVER CITY State CA Zip Code 90230-4508
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) ATTORNEY
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 498.00

Date of Receipt 10 / 31 / 2016
Transaction ID : SA11A.464580
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

B. APPLEBAUM, JEROME, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5302 SUMMERTIME LANE
 City CULVER CITY State CA Zip Code 90230-4508
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) ATTORNEY
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 498.00

Date of Receipt 10 / 31 / 2016
Transaction ID : SA11A.464582
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

C. APPLING, MEDRITH, N., MS,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2500 BARTON CREEK BLVD. 3403
 City AUSTIN State TX Zip Code 78735-1603
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 10 / 31 / 2016
Transaction ID : SA11A.457956
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 103 OF 4311
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Team Ryan

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

Mailing Address 2500 BARTON CREEK BLVD.
3403

City AUSTIN State TX Zip Code 78735-1603

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

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

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt
11 / 04 / 2016
Transaction ID : SA11A.471884

Amount of Each Receipt this Period
25.00

Memo Item CONTRIBUTION

B. ARCHBALD, ROXINE, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 2429 EMERALD LAKE DRIVE
111

City SUN CITY CENTER State FL Zip Code 33573-3820

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

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

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
275.00

Date of Receipt
10 / 21 / 2016
Transaction ID : SA11A.444629

Amount of Each Receipt this Period
75.00

Memo Item CONTRIBUTION

C. ARCHER, DONALD, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 920 11TH STREET

City HUNTINGTON BEACH State CA Zip Code 92648-3411

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

Name of Employer (for Individual) PQM, INC. Occupation (for Individual) ENGINEER

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
300.00

Date of Receipt
10 / 28 / 2016
Transaction ID : SA11A.456204

Amount of Each Receipt this Period
100.00

Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 200.00

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 104 OF 4311
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. ARCHER, DONALD, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 920 11TH STREET
City HUNTINGTON BEACH State CA Zip Code 92648-3411
FEC ID number of contributing federal political committee. **C**
Name of Employer (for Individual) PQM, INC. Occupation (for Individual) ENGINEER
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 300.00

Date of Receipt 10 / 28 / 2016
Transaction ID : SA11A.456206
Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

B. ARELLANO, CHERYL, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 20644 CALLE TRANQUILO
City YORBA LINDA State CA Zip Code 92886-4624
FEC ID number of contributing federal political committee. **C**
Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 220.00

Date of Receipt 10 / 26 / 2016
Transaction ID : SA11A.454287
Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

C. ARELLANO, CHERYL, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 20644 CALLE TRANQUILO
City YORBA LINDA State CA Zip Code 92886-4624
FEC ID number of contributing federal political committee. **C**
Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 220.00

Date of Receipt 10 / 31 / 2016
Transaction ID : SA11A.464703
Amount of Each Receipt this Period 20.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 170.00
TOTAL This Period (last page this line number only)..... ▶

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 105 OF 4311
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. ARELLANO, CHERYL, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 20644 CALLE TRANQUILO
 City YORBA LINDA State CA Zip Code 92886-4624
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 220.00

Date of Receipt 11 / 04 / 2016
Transaction ID : SA11A.473451
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

B. ARELLANO, CHERYL, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 20644 CALLE TRANQUILO
 City YORBA LINDA State CA Zip Code 92886-4624
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 220.00

Date of Receipt 11 / 07 / 2016
Transaction ID : SA11A.475590
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

C. ARGUINZONI, LYNN, C., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 107 ARD RD.
 City SEAGOVILLE State TX Zip Code 75159-2401
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) ESTATE SALES
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 350.00

Date of Receipt 10 / 29 / 2016
Transaction ID : SA11A.461137
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 106 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. ARGUINZONI, LYNN, C., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 107 ARD RD.
 City SEAGOVILLE State TX Zip Code 75159-2401
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) ESTATE SALES
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 350.00

Date of Receipt 11 / 04 / 2016
Transaction ID : SA11A.472646
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

B. ARMOR, DAVID, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 17246 PEPPERSTOCK LANE
 City JEFFERSONTON State VA Zip Code 22724-1769
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 450.00

Date of Receipt 10 / 31 / 2016
Transaction ID : SA11A.459033
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

C. ARMSTRONG, RAYMOND, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 639 STRINGS DRIVE
 City SAN ANTONIO State TX Zip Code 78216-2612
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) MEDCARE Occupation (for Individual) PHYSICIAN
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 425.00

Date of Receipt 11 / 04 / 2016
Transaction ID : SA11A.472450
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	350.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 107 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. ARMSTRONG, ROBERTA, M., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2276 MILL ROAD
 City BINGHAMTON State NY Zip Code 13903-6144
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) ARMSTRONG TELECOM Occupation (for Individual) TELCOM
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 310.00

Date of Receipt 10 / 25 / 2016
Transaction ID : SA11A.448824
 Amount of Each Receipt this Period 30.00
 Memo Item CONTRIBUTION

B. ARMSTRONG, ROBERTA, M., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2276 MILL ROAD
 City BINGHAMTON State NY Zip Code 13903-6144
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) ARMSTRONG TELECOM Occupation (for Individual) TELCOM
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 310.00

Date of Receipt 10 / 27 / 2016
Transaction ID : SA11A.452946
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

C. ARMSTRONG, ROBERTA, M., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2276 MILL ROAD
 City BINGHAMTON State NY Zip Code 13903-6144
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) ARMSTRONG TELECOM Occupation (for Individual) TELCOM
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 310.00

Date of Receipt 11 / 07 / 2016
Transaction ID : SA11A.475609
 Amount of Each Receipt this Period 30.00
 Memo Item CONTRIBUTION

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 108 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
Team Ryan

A. ARMSTRONG, SUSAN, H., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1205 LANDONS WAY
 City MISSOULA State MT Zip Code 59803-1346
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 475.00

Date of Receipt 10 / 29 / 2016
Transaction ID : SA11A.460689
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

B. ARMSTRONG, SUSAN, H., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1205 LANDONS WAY
 City MISSOULA State MT Zip Code 59803-1346
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 475.00

Date of Receipt 10 / 31 / 2016
Transaction ID : SA11A.463498
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

C. ARMSTRONG, SUSAN, H., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1205 LANDONS WAY
 City MISSOULA State MT Zip Code 59803-1346
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 475.00

Date of Receipt 11 / 07 / 2016
Transaction ID : SA11A.475051
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	75.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 109 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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

A. ARNETT, WARREN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 411 GORDON TERRACE #4
 City PASADENA State CA Zip Code 91105-1854
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) PVT ASSET MGMNT Occupation (for Individual) INV COUNSL
 Receipt For: Primary General Other (specify) Aggregate Year-to-Date 750.00

Date of Receipt 10 / 31 / 2016
Transaction ID : SA11A.459297
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

B. ARNETT, WARREN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 411 GORDON TERRACE #4
 City PASADENA State CA Zip Code 91105-1854
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) PVT ASSET MGMNT Occupation (for Individual) INV COUNSL
 Receipt For: Primary General Other (specify) Aggregate Year-to-Date 750.00

Date of Receipt 10 / 31 / 2016
Transaction ID : SA11A.459301
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

C. ARNETT, WARREN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 411 GORDON TERRACE #4
 City PASADENA State CA Zip Code 91105-1854
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) PVT ASSET MGMNT Occupation (for Individual) INV COUNSL
 Receipt For: Primary General Other (specify) Aggregate Year-to-Date 750.00

Date of Receipt 10 / 31 / 2016
Transaction ID : SA11A.459302
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 110 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name A. ARNETT, WARREN, , ,		Date of Receipt MM / DD / YYYY 11 / 01 / 2016 Transaction ID : SA11A.462229
Mailing Address 411 GORDON TERRACE #4 4		Amount of Each Receipt this Period 250.00
City PASADENA	State CA	Zip Code 91105-1854
FEC ID number of contributing federal political committee. C		<input type="checkbox"/> Memo Item CONTRIBUTION
Name of Employer (for Individual) PVT ASSET MGMNT	Occupation (for Individual) INV COUNSL	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 750.00	

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name B. ARNETT, WARREN, , ,		Date of Receipt MM / DD / YYYY 11 / 07 / 2016 Transaction ID : SA11A.480688
Mailing Address 411 GORDON TERRACE #4 4		Amount of Each Receipt this Period 200.00
City PASADENA	State CA	Zip Code 91105-1854
FEC ID number of contributing federal political committee. C		<input type="checkbox"/> Memo Item CONTRIBUTION
Name of Employer (for Individual) PVT ASSET MGMNT	Occupation (for Individual) INV COUNSL	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 750.00	

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name C. ARNOLD, ANITA, , ,		Date of Receipt MM / DD / YYYY 10 / 24 / 2016 Transaction ID : SA11A.443457
Mailing Address 2900 ST. MICHAEL DR 5TH FL		Amount of Each Receipt this Period 5000.00
City TEXARKANA	State TX	Zip Code 75503-2388
FEC ID number of contributing federal political committee. C		<input type="checkbox"/> Memo Item CONTRIBUTION
Name of Employer (for Individual) INFORMATION REQUESTED PER BEST EFFORTS	Occupation (for Individual) INFORMATION REQUESTED PER BES	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Aggregate Year-to-Date ▼ 5000.00	

SUBTOTAL of Receipts This Page (optional).....▶	5450.00
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 111 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. ARNOLD, GREG, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3900 GILON AVE
 City DALLAS State TX Zip Code 75205-3117
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) TAC ENERGY Occupation (for Individual) CEO
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 25000.00

Date of Receipt 10 / 24 / 2016
Transaction ID : SA11A.443490
 Amount of Each Receipt this Period 15000.00
 Memo Item
CONTRIBUTION

B. ARNOLD, LARRY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address HC70,BOX 123
 City BOSWELL State OK Zip Code 74727-9312
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 10 / 26 / 2016
Transaction ID : SA11A.451000
 Amount of Each Receipt this Period 100.00
 Memo Item
CONTRIBUTION

C. ARNOLD, LARRY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address HC70,BOX 123
 City BOSWELL State OK Zip Code 74727-9312
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 10 / 28 / 2016
Transaction ID : SA11A.456194
 Amount of Each Receipt this Period 100.00
 Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	15200.00
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 112 OF 4311
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. ARNOLD, LARRY, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address HC70,BOX 123
City BOSWELL State OK Zip Code 74727-9312
FEC ID number of contributing federal political committee. **C**
Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 300.00

Date of Receipt 11 / 04 / 2016
Transaction ID : SA11A.470806
Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

B. ARNOLD, ROBIN, D., MR.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 201 SHOREWOOD CT.
City COLUMBIA State SC Zip Code 29212-8713
FEC ID number of contributing federal political committee. **C**
Name of Employer (for Individual) CUNA BROKERAGE SERVICES,INC Occupation (for Individual) FINANCIAL ADVISOR
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 250.00

Date of Receipt 11 / 03 / 2016
Transaction ID : SA11A.469033
Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

C. ARNOLD, SCOTT, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 2802 RUMSON CT NE
City ATLANTA State GA Zip Code 30305-3240
FEC ID number of contributing federal political committee. **C**
Name of Employer (for Individual) IRON TREE CAPITAL Occupation (for Individual) INVESTOR
Receipt For: Primary General Other (specify)
Aggregate Year-to-Date ▼ 900.00

Date of Receipt 10 / 23 / 2016
Transaction ID : SA11A.449606
Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 113 OF 4311
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Team Ryan

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

Mailing Address **2802 RUMSON CT NE**

City ATLANTA	State GA	Zip Code 30305-3240
------------------------	--------------------	-------------------------------

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

Name of Employer (for Individual) IRON TREE CAPITAL	Occupation (for Individual) INVESTOR
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **900.00**

Date of Receipt
10 / 27 / 2016

Transaction ID : SA11A.453501

Amount of Each Receipt this Period
100.00

Memo Item
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
B. ARNOLD, SCOTT, , ,

Mailing Address **2802 RUMSON CT NE**

City ATLANTA	State GA	Zip Code 30305-3240
------------------------	--------------------	-------------------------------

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

Name of Employer (for Individual) IRON TREE CAPITAL	Occupation (for Individual) INVESTOR
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **900.00**

Date of Receipt
10 / 31 / 2016

Transaction ID : SA11A.459120

Amount of Each Receipt this Period
100.00

Memo Item
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
C. ARNOLD, SCOTT, , ,

Mailing Address **2802 RUMSON CT NE**

City ATLANTA	State GA	Zip Code 30305-3240
------------------------	--------------------	-------------------------------

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

Name of Employer (for Individual) IRON TREE CAPITAL	Occupation (for Individual) INVESTOR
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼ **900.00**

Date of Receipt
11 / 04 / 2016

Transaction ID : SA11A.471153

Amount of Each Receipt this Period
100.00

Memo Item
CONTRIBUTION

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 114 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. ARNOLD, SUSAN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1321 ROBYNWOOD LANE
 City WEST CHESTER State PA Zip Code 19380-5748
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 10 / 25 / 2016
Transaction ID : SA11A.451842
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

B. ARNOLD, SUSAN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1321 ROBYNWOOD LANE
 City WEST CHESTER State PA Zip Code 19380-5748
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 11 / 04 / 2016
Transaction ID : SA11A.473337
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

C. ARNOLD, TRUMAN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2900 ST. MICHAEL DR 5TH FL
 City TEXARKANA State TX Zip Code 75503-2388
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) TRUMAN ARNOLD COMPANIES Occupation (for Individual) EXECUTIVE
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 5000.00

Date of Receipt 10 / 24 / 2016
Transaction ID : SA11A.443458
 Amount of Each Receipt this Period 5000.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	5100.00
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 115 OF 4311
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. ARNOUX, GALE, C., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 9614 GRETNA GREEN DRIVE
 City TAMPA State FL Zip Code 33626-5310
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 380.00

Date of Receipt **11 / 01 / 2016**
Transaction ID : SA11A.467297
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

B. ARNOUX, GALE, C., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 9614 GRETNA GREEN DRIVE
 City TAMPA State FL Zip Code 33626-5310
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 380.00

Date of Receipt **11 / 03 / 2016**
Transaction ID : SA11A.468815
 Amount of Each Receipt this Period 30.00
 Memo Item CONTRIBUTION

C. ARNSTEIN, FRANK, G., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1017 LAUREL WAY
 City BEVERLY HILLS State CA Zip Code 90210-2304
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) IPC Occupation (for Individual) IPC
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt **10 / 20 / 2016**
Transaction ID : SA11A.441950
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 305.00
TOTAL This Period (last page this line number only)..... ▶

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 116 OF 4311
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Team Ryan

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

Mailing Address 1 PERSIMMON LANE

City WHITE PLAINS	State NY	Zip Code 10605-4454
----------------------	-------------	------------------------

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

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
300.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		25		2016

Transaction ID : SA11A.451699

Amount of Each Receipt this Period
100.00

Memo Item CONTRIBUTION

B. ARONOW, RICHARD, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1 PERSIMMON LANE

City WHITE PLAINS	State NY	Zip Code 10605-4454
----------------------	-------------	------------------------

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

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
300.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		31		2016

Transaction ID : SA11A.464049

Amount of Each Receipt this Period
25.00

Memo Item CONTRIBUTION

C. ARONOW, RICHARD, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1 PERSIMMON LANE

City WHITE PLAINS	State NY	Zip Code 10605-4454
----------------------	-------------	------------------------

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

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
300.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11		07		2016

Transaction ID : SA11A.475071

Amount of Each Receipt this Period
50.00

Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	175.00
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 117 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
Team Ryan

A. ARONOW, RICHARD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1 PERSIMMON LANE
 City WHITE PLAINS State NY Zip Code 10605-4454
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 11 / 07 / 2016
Transaction ID : SA11A.475075
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

B. ARONOW, RICHARD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1 PERSIMMON LANE
 City WHITE PLAINS State NY Zip Code 10605-4454
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 11 / 07 / 2016
Transaction ID : SA11A.475076
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

C. ARRAND, MICHAEL, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 43270 O'HARA CIRCLE
 City STERLING HEIGHTS State MI Zip Code 48314-3531
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 310.00

Date of Receipt 10 / 29 / 2016
Transaction ID : SA11A.460452
 Amount of Each Receipt this Period 30.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	130.00
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 118 OF 4311
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Team Ryan

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
A. ARRAND, MICHAEL, , ,

Mailing Address **43270 O'HARA CIRCLE**

City **STERLING HEIGHTS** State **MI** Zip Code **48314-3531**

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

Name of Employer (for Individual) **NONE** Occupation (for Individual) **RETIRED**

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **310.00**

Date of Receipt
11 / 04 / 2016

Transaction ID : SA11A.473941

Amount of Each Receipt this Period
25.00

Memo Item
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
B. ARRIX, ROBERT, , ,

Mailing Address **205 MAIN STREET
29**

City **NEW CANAAN** State **CT** Zip Code **06840-5634**

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

Name of Employer (for Individual) **NONE** Occupation (for Individual) **RETIRED**

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **370.00**

Date of Receipt
10 / 24 / 2016

Transaction ID : SA11A.446064

Amount of Each Receipt this Period
50.00

Memo Item
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
C. ARRIX, ROBERT, , ,

Mailing Address **205 MAIN STREET
29**

City **NEW CANAAN** State **CT** Zip Code **06840-5634**

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

Name of Employer (for Individual) **NONE** Occupation (for Individual) **RETIRED**

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼ **370.00**

Date of Receipt
11 / 07 / 2016

Transaction ID : SA11A.476312

Amount of Each Receipt this Period
25.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... **100.00**

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 119 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. ARTHUR, ALAN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 18921 GRASSY BRANCH RD
 City WESTFIELD State IN Zip Code 46074-9695
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 10 / 27 / 2016
Transaction ID : SA11A.453156
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

B. ARTHUR, ALAN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 18921 GRASSY BRANCH RD
 City WESTFIELD State IN Zip Code 46074-9695
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 10 / 27 / 2016
Transaction ID : SA11A.453157
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

C. ARTHUR, ALAN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 18921 GRASSY BRANCH RD
 City WESTFIELD State IN Zip Code 46074-9695
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 11 / 02 / 2016
Transaction ID : SA11A.466496
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 120 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. ASARESE, OTTAVIANO, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 16 ALVORD PLACE
 City SOUTH HADLEY State MA Zip Code 01075-1368
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 225.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 27 / 2016
Transaction ID : SA11A.454084
 Amount of Each Receipt this Period
 50.00
 Memo Item
 CONTRIBUTION

B. ASARESE, OTTAVIANO, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 16 ALVORD PLACE
 City SOUTH HADLEY State MA Zip Code 01075-1368
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 225.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 27 / 2016
Transaction ID : SA11A.454112
 Amount of Each Receipt this Period
 50.00
 Memo Item
 CONTRIBUTION

C. ASBILL, DONNA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 13319 MISSION VALLEY
 City HOUSTON State TX Zip Code 77069-2525
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 29 / 2016
Transaction ID : SA11A.461020
 Amount of Each Receipt this Period
 50.00
 Memo Item
 CONTRIBUTION

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 121 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. ASHER, DONALD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 270 BIRCH STREET
 City WINNETKA State IL Zip Code 60093-3806
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) INFORMATION REQUESTED PER BE
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 02 / 2016
Transaction ID : SA11A.465110
 Amount of Each Receipt this Period
 500.00
 Memo Item
 CONTRIBUTION

B. ASHLOCK, JOY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2727 LAKE PICKETT PLACE
 City CHULUOTA State FL Zip Code 32766-9402
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 350.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 04 / 2016
Transaction ID : SA11A.470426
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION

C. ASHWORTH, PATRICIA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1566 SYCAMORE RD.
 City COLLIERVILLE State TN Zip Code 38017-9510
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) BOUTIQUE OWNER
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 225.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 28 / 2016
Transaction ID : SA11A.455835
 Amount of Each Receipt this Period
 25.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	625.00
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 122 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. ASHWORTH, PATRICIA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1566 SYCAMORE RD.
 City COLLIERVILLE State TN Zip Code 38017-9510
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) BOUTIQUE OWNER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 225.00

Date of Receipt 11 / 07 / 2016
Transaction ID : SA11A.479991
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

B. ASKEY, THELMA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2811 N GEORGE MASON DRIVE
 City ARLINGTON State VA Zip Code 22207-1767
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) TRADE & DEVELOPMENT CONSULT.
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 925.00

Date of Receipt 10 / 20 / 2016
Transaction ID : SA11A.442263
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

C. ASKEY, THELMA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2811 N GEORGE MASON DRIVE
 City ARLINGTON State VA Zip Code 22207-1767
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) TRADE & DEVELOPMENT CONSULTA
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 925.00

Date of Receipt 11 / 07 / 2016
Transaction ID : SA11A.475812
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 123 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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

A. ASMUSSEN, KEITH, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1543 TUCKER LANE
 City ENCINITAS State CA Zip Code 92024-2923
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) GENERAL ATOMICS Occupation (for Individual) ENGINEER/MANAGER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 475.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 30 / 2016
Transaction ID : SA11A.459825
 Amount of Each Receipt this Period
 50.00
 Memo Item
 CONTRIBUTION

B. ASMUSSEN, KEITH, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1543 TUCKER LANE
 City ENCINITAS State CA Zip Code 92024-2923
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) GENERAL ATOMICS Occupation (for Individual) ENGINEER/MANAGER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 475.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 30 / 2016
Transaction ID : SA11A.459827
 Amount of Each Receipt this Period
 50.00
 Memo Item
 CONTRIBUTION

C. ASMUSSEN, KEITH, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1543 TUCKER LANE
 City ENCINITAS State CA Zip Code 92024-2923
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) GENERAL ATOMICS Occupation (for Individual) ENGINEER/MANAGER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 475.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 02 / 2016
Transaction ID : SA11A.466604
 Amount of Each Receipt this Period
 50.00
 Memo Item
 CONTRIBUTION

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 124 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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

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NAME OF COMMITTEE (In Full)
Team Ryan

A. ASMUSSEN, KEITH, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1543 TUCKER LANE
 City ENCINITAS State CA Zip Code 92024-2923
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) GENERAL ATOMICS Occupation (for Individual) ENGINEER/MANAGER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 475.00

Date of Receipt 11 / 04 / 2016
Transaction ID : SA11A.470465
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

B. ASMUSSEN, KEITH, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1543 TUCKER LANE
 City ENCINITAS State CA Zip Code 92024-2923
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) GENERAL ATOMICS Occupation (for Individual) ENGINEER/MANAGER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 475.00

Date of Receipt 11 / 07 / 2016
Transaction ID : SA11A.480628
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

C. ASMUSSEN, KEITH, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1543 TUCKER LANE
 City ENCINITAS State CA Zip Code 92024-2923
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) GENERAL ATOMICS Occupation (for Individual) ENGINEER/MANAGER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 475.00

Date of Receipt 11 / 07 / 2016
Transaction ID : SA11A.480629
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

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

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 125 OF 4311
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. ASPLUNDH, BRENT, D., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1356 MEADOWBROOK RD
 City RYDAL State PA Zip Code 19046-1007
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) ASPLUNDH TREE EXPERT CO Occupation (for Individual) EXECUTIVE
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 5000.00

Date of Receipt 10 / 28 / 2016
Transaction ID : SA11A.449680
 Amount of Each Receipt this Period 5000.00
 Memo Item CONTRIBUTION

B. ASPLUNDH, CHRISTOPHER, B., , JR.
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1115 STRAWNTOWN RD
 City QUAKERTOWN State PA Zip Code 18951-5432
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) ASPLUNDH TREE EXPERT CO. Occupation (for Individual) EXECUTIVE
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 5000.00

Date of Receipt 10 / 28 / 2016
Transaction ID : SA11A.449675
 Amount of Each Receipt this Period 2500.00
 Memo Item CONTRIBUTION

C. ASPLUNDH, CHRISTOPHER, B., , JR.
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1115 STRAWNTOWN RD
 City QUAKERTOWN State PA Zip Code 18951-5432
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) ASPLUNDH TREE EXPERT CO. Occupation (for Individual) EXECUTIVE
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 5000.00

Date of Receipt 10 / 28 / 2016
Transaction ID : SA11A.449676
 Amount of Each Receipt this Period 2500.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	10000.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 126 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13 <input type="checkbox"/> 11b <input type="checkbox"/> 14 <input type="checkbox"/> 11c <input type="checkbox"/> 15 <input type="checkbox"/> 12 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. ASPLUNDH, CHRISTOPHER, B., , SR.
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3700 BUCK RD
 City HUNTINGDON VALLEY State PA Zip Code 19006-2201
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) ASPLUNDH TREE EXPERT CO Occupation (for Individual) EXECUTIVE
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 5000.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 28 / 2016
Transaction ID : SA11A.449686
 Amount of Each Receipt this Period
 5000.00
 Memo Item
 CONTRIBUTION

B. ASPLUNDH, EDWARD, K., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 230 EL PUEBLO WAY
 City PALM BEACH State FL Zip Code 33480-3218
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) ASPLUNDH TREE EXPERT CO Occupation (for Individual) EXECUTIVE
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 5000.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 28 / 2016
Transaction ID : SA11A.449681
 Amount of Each Receipt this Period
 5000.00
 Memo Item
 CONTRIBUTION

C. ASPLUNDH, GREGG, G., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1405 TERWOOD RD
 City HUNTINGDON VALLEY State PA Zip Code 19006-5903
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) ASPLUNDH TREE EXPERT CO Occupation (for Individual) EXECUTIVE
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 5000.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 28 / 2016
Transaction ID : SA11A.449678
 Amount of Each Receipt this Period
 5000.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	15000.00
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 127 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. ASPLUNDH, IAN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 10817 CHERRY HILL DRIVE
 City GLEN ALLEN State VA Zip Code 23059-5454
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF Occupation (for Individual) INVESTOR
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 3000.00

Date of Receipt **10 / 28 / 2016**
Transaction ID : SA11A.449668
 Amount of Each Receipt this Period 3000.00
 Memo Item CONTRIBUTION

B. ASPLUNDH, KURT, H., REV.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 653 WAVERLY LANE
 City BRYN ATHYN State PA Zip Code 19009-
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 5000.00

Date of Receipt **11 / 08 / 2016**
Transaction ID : SA11A.467906
 Amount of Each Receipt this Period 5000.00
 Memo Item CONTRIBUTION

C. ASPLUNDH, MARILYN, P., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO BOX 54
 City BRYN ATHYN State PA Zip Code 19009-0054
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) INFORMATION REQUESTED PER BEST EFFORTS Occupation (for Individual) INFORMATION REQUESTED PER BES
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 2500.00

Date of Receipt **11 / 08 / 2016**
Transaction ID : SA11A.467914
 Amount of Each Receipt this Period 2500.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶ 10500.00
TOTAL This Period (last page this line number only).....▶

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 128 OF 4311		
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14	<input type="checkbox"/> 11c <input type="checkbox"/> 15	<input type="checkbox"/> 12 <input type="checkbox"/> 16

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NAME OF COMMITTEE (In Full)
Team Ryan

A. ASPLUNDH, MATTHEW, B., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 708 BLAIR MILL RD
 City WILLOW GROVE State PA Zip Code 19090-1701
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) ASPLUNDH TREE EXPERT CO Occupation (for Individual) EXECUTIVE
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 5000.00

Date of Receipt 10 / 28 / 2016
Transaction ID : SA11A.449674
 Amount of Each Receipt this Period 5000.00
 Memo Item CONTRIBUTION

B. ASPLUNDH, MIMI, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3175 BUCK RD
 City HUNTINGDON VALLEY State PA Zip Code 19006-4703
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) ASPLUNDH TREE EXPERT CO Occupation (for Individual) EXECUTIVE
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 2500.00

Date of Receipt 10 / 28 / 2016
Transaction ID : SA11A.449683
 Amount of Each Receipt this Period 2500.00
 Memo Item CONTRIBUTION

C. ASPLUNDH, SCOTT, M., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1591 HAMPTON RD
 City MEADOWBROOK State PA Zip Code 19046-1245
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) ASPLUNDH TREE EXPERT CO Occupation (for Individual) EXECUTIVE
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 5000.00

Date of Receipt 10 / 28 / 2016
Transaction ID : SA11A.449679
 Amount of Each Receipt this Period 5000.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	12500.00
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 129 OF 4311
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. ASPLUNDH, STEVEN, G., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2100 BUTTONWOOD LANE
 City HUNTINGDON VALLEY State PA Zip Code 19006-4414
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) ASPLUNDH TREE EXPERT CO Occupation (for Individual) EXECUTIVE
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 5000.00

Date of Receipt 10 / 28 / 2016
Transaction ID : SA11A.449677
 Amount of Each Receipt this Period 5000.00
 Memo Item CONTRIBUTION

B. ATAMIAN, HAIG, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 6420 SUNSET CORP DRIVE
 City LAS VEGAS State NV Zip Code 89120-2797
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) PRINTER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt 11 / 02 / 2016
Transaction ID : SA11A.466943
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

C. ATAMIAN, HAIG, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 6420 SUNSET CORP DRIVE
 City LAS VEGAS State NV Zip Code 89120-2797
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) PRINTER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt 11 / 02 / 2016
Transaction ID : SA11A.466962
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 5200.00
TOTAL This Period (last page this line number only)..... ▶

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 130 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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

A. ATAMIAN, HAIG, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 6420 SUNSET CORP DRIVE
 City LAS VEGAS State NV Zip Code 89120-2797
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) PRINTER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 02 / 2016
Transaction ID : SA11A.466967
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION

B. ATAMIAN, JEAN-MARIE, L., MS.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1326 MADISON AVENUE APT 71
 City NEW YORK State NY Zip Code 10128-1364
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) MAYER BROWN, LLP Occupation (for Individual) ATTORNEY
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 20 / 2016
Transaction ID : SA11A.433499
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION

C. ATHERTON, MARCELLA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1070 EASTWOOD CT
 City LOS ALTOS State CA Zip Code 94024-5015
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 450.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 20 / 2016
Transaction ID : SA11A.441979
 Amount of Each Receipt this Period
 25.00
 Memo Item
 CONTRIBUTION

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 131 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. ATHERTON, MARCELLA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1070 EASTWOOD CT
 City LOS ALTOS State CA Zip Code 94024-5015
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 450.00

Date of Receipt 10 / 26 / 2016
Transaction ID : SA11A.451011
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

B. ATHERTON, MARCELLA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1070 EASTWOOD CT
 City LOS ALTOS State CA Zip Code 94024-5015
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 450.00

Date of Receipt 11 / 04 / 2016
Transaction ID : SA11A.471813
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

C. ATHERTON, MARCELLA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1070 EASTWOOD CT
 City LOS ALTOS State CA Zip Code 94024-5015
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 450.00

Date of Receipt 11 / 04 / 2016
Transaction ID : SA11A.473490
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 132 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13 <input type="checkbox"/> 11b <input type="checkbox"/> 14 <input type="checkbox"/> 11c <input type="checkbox"/> 15 <input type="checkbox"/> 12 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name A. ATKINS, JAMES, , ,		Date of Receipt MM / DD / YYYY 10 / 22 / 2016 Transaction ID : SA11A.449644
Mailing Address 8030 FRANKFORD RD APT 1		Amount of Each Receipt this Period 50.00
City DALLAS	State TX	Zip Code 75252-6836
FEC ID number of contributing federal political committee. C		<input type="checkbox"/> Memo Item CONTRIBUTION
Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 630.00	

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name B. ATKINS, JAMES, , ,		Date of Receipt MM / DD / YYYY 10 / 26 / 2016 Transaction ID : SA11A.449753
Mailing Address 8030 FRANKFORD RD APT 1		Amount of Each Receipt this Period 50.00
City DALLAS	State TX	Zip Code 75252-6836
FEC ID number of contributing federal political committee. C		<input type="checkbox"/> Memo Item CONTRIBUTION
Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 630.00	

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name C. ATKINS, JAMES, , ,		Date of Receipt MM / DD / YYYY 10 / 30 / 2016 Transaction ID : SA11A.464852
Mailing Address 8030 FRANKFORD RD APT 1		Amount of Each Receipt this Period 100.00
City DALLAS	State TX	Zip Code 75252-6836
FEC ID number of contributing federal political committee. C		<input type="checkbox"/> Memo Item CONTRIBUTION
Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Aggregate Year-to-Date ▼ 630.00	

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 133 OF 4311
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Team Ryan

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

Mailing Address 8030 FRANKFORD RD
APT 1

City DALLAS State TX Zip Code 75252-6836

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

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

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
630.00

Date of Receipt
11 / 04 / 2016
Transaction ID : SA11A.470933

Amount of Each Receipt this Period
50.00

Memo Item CONTRIBUTION

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

Mailing Address 8030 FRANKFORD RD
APT 1

City DALLAS State TX Zip Code 75252-6836

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

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

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
630.00

Date of Receipt
11 / 05 / 2016
Transaction ID : SA11A.478893

Amount of Each Receipt this Period
30.00

Memo Item CONTRIBUTION

C. ATKINS, ROBERT, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 142 LOMOND LANE

City SPARTANBURG State SC Zip Code 29307-3819

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

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

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
400.00

Date of Receipt
11 / 07 / 2016
Transaction ID : SA11A.480234

Amount of Each Receipt this Period
100.00

Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 180.00

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 134 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. ATKINSON, THOMAS, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4507 MAYBROOK WOODS
 City SAN ANTONIO State TX Zip Code 78249-1879
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 225.00

Date of Receipt 10 / 27 / 2016
Transaction ID : SA11A.453985
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

B. ATLAS, HOLLY, E., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4705 OAKMONT BOULEVARD
 City AUSTIN State TX Zip Code 78731-5929
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) INFORMATION REQUESTED PER BEST EFFORTS Occupation (for Individual) INFORMATION REQUESTED PER BE
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 10 / 25 / 2016
Transaction ID : SA11A.447533
 Amount of Each Receipt this Period 200.00
 Memo Item CONTRIBUTION

C. ATWOOD, KATHERINE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 736 HONEYDEW LANE
 City VISTA State CA Zip Code 92084-3114
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 220.00

Date of Receipt 11 / 06 / 2016
Transaction ID : SA11A.477011
 Amount of Each Receipt this Period 15.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	315.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 135 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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

A. AUDETTE, ALBERT, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 400 MAIN ST
 SUITE 400
 City STAMFORD State CT Zip Code 06901-3004
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 315.00

Date of Receipt 11 / 04 / 2016
Transaction ID : SA11A.470299
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

B. AUGENSTEIN, CHARLES, R., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2 DON DANVILLE RD, UNIT 601
 City SAINT AUGUSTINE State FL Zip Code 32080-8047
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1005.00

Date of Receipt 10 / 21 / 2016
Transaction ID : SA11A.447145
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

C. AUGENSTEIN, CHARLES, R., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2 DON DANVILLE RD, UNIT 601
 City SAINT AUGUSTINE State FL Zip Code 32080-8047
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 1005.00

Date of Receipt 10 / 25 / 2016
Transaction ID : SA11A.447916
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 136 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. AUGENSTEIN, CHARLES, R., MR.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 2 DONDANVILLE RD, UNIT 601

City SAINT AUGUSTINE	State FL	Zip Code 32080-8047
-------------------------	-------------	------------------------

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

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1005.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	04	/	2016

Transaction ID : SA11A.470657

Amount of Each Receipt this Period
50.00

Memo Item
CONTRIBUTION

B. AUGUSTUS, JOSEPH, R., ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 512 PONTE VEDRA BLVD

City PONTE VEDRA BEACH	State FL	Zip Code 32082-2316
---------------------------	-------------	------------------------

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

Name of Employer (for Individual) SWISHER INTERNATIONAL, INC.	Occupation (for Individual) EXECUTIVE
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
2500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	24	/	2016

Transaction ID : SA11A.443463

Amount of Each Receipt this Period
2500.00

Memo Item
CONTRIBUTION

C. AULD, ROBERT, L., MR.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 124 A AVENUE EAST

City OSKALOOSA	State IA	Zip Code 52577-2816
-------------------	-------------	------------------------

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

Name of Employer (for Individual) SELF EMPLOYED	Occupation (for Individual) INVESTMENT ADVISOR
--	---

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
355.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	26	/	2016

Transaction ID : SA11A.449771

Amount of Each Receipt this Period
50.00

Memo Item
CONTRIBUTION

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 137 OF 4311
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. AULTMAN, PAUL, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 3055 SHEARER ROAD

City COLEMAN	State MI	Zip Code 48618-9337
-----------------	-------------	------------------------

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

Name of Employer (for Individual) VANTAGE PLASTICS	Occupation (for Individual) COMPANY FACILITATOR
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
300.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		28		2016

Transaction ID : SA11A.455043

Amount of Each Receipt this Period
100.00

Memo Item
CONTRIBUTION

B. AULTMAN, PAUL, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 3055 SHEARER ROAD

City COLEMAN	State MI	Zip Code 48618-9337
-----------------	-------------	------------------------

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

Name of Employer (for Individual) VANTAGE PLASTICS	Occupation (for Individual) COMPANY FACILITATOR
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
300.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		28		2016

Transaction ID : SA11A.455044

Amount of Each Receipt this Period
100.00

Memo Item
CONTRIBUTION

C. AULTMAN, PAUL, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 3055 SHEARER ROAD

City COLEMAN	State MI	Zip Code 48618-9337
-----------------	-------------	------------------------

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

Name of Employer (for Individual) VANTAGE PLASTICS	Occupation (for Individual) COMPANY FACILITATOR
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
300.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11		04		2016

Transaction ID : SA11A.470770

Amount of Each Receipt this Period
100.00

Memo Item
CONTRIBUTION

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 138 OF 4311
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. AVERY, DOUGLAS, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 20220 INLAND LANE
 City MALIBU State CA Zip Code 90265-5320
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) RANCHER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 950.00

Date of Receipt 10 / 25 / 2016
Transaction ID : SA11A.451518
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

B. AVERY, DOUGLAS, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 20220 INLAND LANE
 City MALIBU State CA Zip Code 90265-5320
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) RANCHER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 950.00

Date of Receipt 10 / 25 / 2016
Transaction ID : SA11A.451519
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

C. AVERY, DOUGLAS, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 20220 INLAND LANE
 City MALIBU State CA Zip Code 90265-5320
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) RANCHER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 950.00

Date of Receipt 11 / 01 / 2016
Transaction ID : SA11A.462567
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶ 350.00
TOTAL This Period (last page this line number only).....▶

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 139 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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

A. AVEY, CATHERINE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 120 BROAD ST.
 City MARLBOROUGH State MA Zip Code 01752-4002
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SHRIVER NURSING SERVICES/ FAMILY LIVES Occupation (for Individual) REGISTERED NURSE
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 350.00

Date of Receipt 10 / 21 / 2016
Transaction ID : SA11A.444592
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

B. AVEY, CATHERINE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 120 BROAD ST.
 City MARLBOROUGH State MA Zip Code 01752-4002
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SHRIVER NURSING SERVICES/ FAMILY LIVES Occupation (for Individual) REGISTERED NURSE
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 350.00

Date of Receipt 11 / 04 / 2016
Transaction ID : SA11A.473264
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

C. AVILA, MIGUEL, A., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 415 ALHAMBRA RD
 City SAN GABRIEL State CA Zip Code 91775-2705
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 375.00

Date of Receipt 10 / 26 / 2016
Transaction ID : SA11A.454355
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	75.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 140 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
Team Ryan

A. AVILA, MIGUEL, A., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 415 ALHAMBRA RD
 City SAN GABRIEL State CA Zip Code 91775-2705
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 375.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 30 / 2016
Transaction ID : SA11A.464919
 Amount of Each Receipt this Period
 25.00
 Memo Item
 CONTRIBUTION

B. AVILA, MIGUEL, A., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 415 ALHAMBRA RD
 City SAN GABRIEL State CA Zip Code 91775-2705
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 375.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 04 / 2016
Transaction ID : SA11A.472674
 Amount of Each Receipt this Period
 25.00
 Memo Item
 CONTRIBUTION

C. AVILA, MIGUEL, A., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 415 ALHAMBRA RD
 City SAN GABRIEL State CA Zip Code 91775-2705
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 375.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 04 / 2016
Transaction ID : SA11A.472847
 Amount of Each Receipt this Period
 25.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	75.00
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 141 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. AVILA, MIGUEL, A., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 415 ALHAMBRA RD
 City SAN GABRIEL State CA Zip Code 91775-2705
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 375.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 11 / 04 / 2016
Transaction ID : SA11A.473402
 Amount of Each Receipt this Period
 25.00
 Memo Item
 CONTRIBUTION

B. AVILA, MIGUEL, A., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 415 ALHAMBRA RD
 City SAN GABRIEL State CA Zip Code 91775-2705
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 375.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 11 / 03 / 2016
Transaction ID : SA11A.474389
 Amount of Each Receipt this Period
 25.00
 Memo Item
 CONTRIBUTION

C. AYERS, HELEN, Z., MRS.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 724 E 1000 NORTH ROAD
 City BEMENT State IL Zip Code 61813-3715
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 11 / 01 / 2016
Transaction ID : SA11A.461592
 Amount of Each Receipt this Period
 200.00
 Memo Item
 CONTRIBUTION

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 142 OF 4311
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Team Ryan

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

Mailing Address 10208 FROG HOLLOW LANE

City PETERSBURG	State PA	Zip Code 16669-2107
--------------------	-------------	------------------------

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

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
650.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		28		2016

Transaction ID : SA11A.454819

Amount of Each Receipt this Period
500.00

Memo Item CONTRIBUTION

B. AYERS, STEVEN, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 41 EXECUTIVE CT

City WESTERVILLE	State OH	Zip Code 43081-1465
---------------------	-------------	------------------------

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

Name of Employer (for Individual) LASTING LEGACY FINANCIAL, INC	Occupation (for Individual) AYERS
--	--------------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
210.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		28		2016

Transaction ID : SA11A.45485

Amount of Each Receipt this Period
30.00

Memo Item CONTRIBUTION

C. AYERS, STEVEN, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 41 EXECUTIVE CT

City WESTERVILLE	State OH	Zip Code 43081-1465
---------------------	-------------	------------------------

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

Name of Employer (for Individual) LASTING LEGACY FINANCIAL, INC	Occupation (for Individual) AYERS
--	--------------------------------------

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
210.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		28		2016

Transaction ID : SA11A.455486

Amount of Each Receipt this Period
30.00

Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	560.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 143 OF 4311
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. AYERS, STEVEN, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 41 EXECUTIVE CT

City WESTERVILLE	State OH	Zip Code 43081-1465
---------------------	-------------	------------------------

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

Name of Employer (for Individual) LASTING LEGACY FINANCIAL, INC	Occupation (for Individual) AYERS
--	--------------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
210.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	30	/	2016

Transaction ID : SA11A.460244

Amount of Each Receipt this Period
50.00

Memo Item
CONTRIBUTION

B. AYERS, STEVEN, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 41 EXECUTIVE CT

City WESTERVILLE	State OH	Zip Code 43081-1465
---------------------	-------------	------------------------

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

Name of Employer (for Individual) LASTING LEGACY FINANCIAL, INC	Occupation (for Individual) AYERS
--	--------------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
210.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	06	/	2016

Transaction ID : SA11A.478280

Amount of Each Receipt this Period
50.00

Memo Item
CONTRIBUTION

C. AZER, MIKHAIL, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1 TRACY DRIVE

City MANALAPAN	State NJ	Zip Code 07726-2838
-------------------	-------------	------------------------

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

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
295.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	27	/	2016

Transaction ID : SA11A.453251

Amount of Each Receipt this Period
25.00

Memo Item
CONTRIBUTION

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 144 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. AZER, MIKHAIL, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1 TRACY DRIVE
 City MANALAPAN State NJ Zip Code 07726-2838
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 295.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 27 / 2016
Transaction ID : SA11A.453258
 Amount of Each Receipt this Period
 25.00
 Memo Item
 CONTRIBUTION

B. AZER, MIKHAIL, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1 TRACY DRIVE
 City MANALAPAN State NJ Zip Code 07726-2838
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 295.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 26 / 2016
Transaction ID : SA11A.454374
 Amount of Each Receipt this Period
 25.00
 Memo Item
 CONTRIBUTION

C. AZER, MIKHAIL, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1 TRACY DRIVE
 City MANALAPAN State NJ Zip Code 07726-2838
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 295.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 26 / 2016
Transaction ID : SA11A.454379
 Amount of Each Receipt this Period
 25.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 75.00
TOTAL This Period (last page this line number only)..... ▶

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 145 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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

A. AZER, MIKHAIL, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1 TRACY DRIVE
 City MANALAPAN State NJ Zip Code 07726-2838
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 295.00

Date of Receipt
 11 / 02 / 2016
Transaction ID : SA11A.469571
 Amount of Each Receipt this Period 5.00
 Memo Item CONTRIBUTION

B. AZER, MIKHAIL, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1 TRACY DRIVE
 City MANALAPAN State NJ Zip Code 07726-2838
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 295.00

Date of Receipt
 11 / 02 / 2016
Transaction ID : SA11A.469572
 Amount of Each Receipt this Period 5.00
 Memo Item CONTRIBUTION

C. AZER, MIKHAIL, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1 TRACY DRIVE
 City MANALAPAN State NJ Zip Code 07726-2838
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 295.00

Date of Receipt
 11 / 02 / 2016
Transaction ID : SA11A.469597
 Amount of Each Receipt this Period 5.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	15.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 146 OF 4311
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. AZER, MIKHAIL, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1 TRACY DRIVE

City MANALAPAN	State NJ	Zip Code 07726-2838
-------------------	-------------	------------------------

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

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
295.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	02	/	2016

Transaction ID : SA11A.469602

Amount of Each Receipt this Period
25.00

Memo Item
CONTRIBUTION

B. AZER, MIKHAIL, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1 TRACY DRIVE

City MANALAPAN	State NJ	Zip Code 07726-2838
-------------------	-------------	------------------------

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

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
295.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	03	/	2016

Transaction ID : SA11A.474417

Amount of Each Receipt this Period
25.00

Memo Item
CONTRIBUTION

C. AZER, MIKHAIL, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1 TRACY DRIVE

City MANALAPAN	State NJ	Zip Code 07726-2838
-------------------	-------------	------------------------

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

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
295.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	06	/	2016

Transaction ID : SA11A.476893

Amount of Each Receipt this Period
25.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	55.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 147 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. AZER, MIKHAIL, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1 TRACY DRIVE
 City MANALAPAN State NJ Zip Code 07726-2838
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 295.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 06 / 2016
Transaction ID : SA11A.476896
 Amount of Each Receipt this Period
 25.00
 Memo Item
 CONTRIBUTION

B. BABCOCK, LARRY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO BOX 495
 City ELM CREEK State NE Zip Code 68836-0495
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 550.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 25 / 2016
Transaction ID : SA11A.451561
 Amount of Each Receipt this Period
 50.00
 Memo Item
 CONTRIBUTION

C. BACARDI, FACUNDO, L., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4975 PINE DR
 City MIAMI State FL Zip Code 33143-8518
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) BACARDI LIMITED Occupation (for Individual) CHAIRMAN OF THE BOARD
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 40000.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 24 / 2016
Transaction ID : SA11A.443434
 Amount of Each Receipt this Period
 25000.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	25075.00
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 148 OF 4311
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
Team Ryan

A. BACHAN, P.W., , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 825 DELAWARE ST
 City WATSONVILLE State CA Zip Code 95076-2803
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 11 / 05 / 2016
Transaction ID : SA11A.478512
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

B. BACHER, ARTHUR, A., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 47 FOREST COVE DRIVE APT 25
 City AKRON State OH Zip Code 44319-3666
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) INFORMATION REQUESTED PER BEST EFFORTS Occupation (for Individual) INFORMATION REQUESTED PER BE
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 11 / 04 / 2016
Transaction ID : SA11A.467579
 Amount of Each Receipt this Period 150.00
 Memo Item CONTRIBUTION

C. BACHMAN, CLAY, C., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2371 SEVEN PINES DRIVE UNIT 6 UNIT 6
 City SAINT LOUIS State MO Zip Code 63146-2276
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 10 / 27 / 2016
Transaction ID : SA11A.452271
 Amount of Each Receipt this Period 200.00
 Memo Item CONTRIBUTION

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 149 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
Team Ryan

A. BACON, CAROLINE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 625 A ONONDAGA LANE
 City STRATFORD State CT Zip Code 06614-8324
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 10 / 31 / 2016
Transaction ID : SA11A.458568
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

B. BADER, VALMA, G., MRS.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 525 ORCHARD COURT
 City ST LOUIS State MI Zip Code 48880-9705
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 10 / 21 / 2016
Transaction ID : SA11A.443563
 Amount of Each Receipt this Period 200.00
 Memo Item CONTRIBUTION

C. BAER, JOHN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 455 EAST 57TH ST 15B
 City NEW YORK State NY Zip Code 10022-3065
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) ROSEDALE CAPITAL Occupation (for Individual) PORTFOLIO MANAGER
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 10 / 28 / 2016
Transaction ID : SA11A.461415
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 150 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. BAERG, JAMES, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5824 NAGLE AVENUE
 City VAN NUYS State CA Zip Code 91401-4025
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 350.00

Date of Receipt 10 / 31 / 2016
Transaction ID : SA11A.463805
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

B. BAGBEY, FRANCIS, C., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 103 GREEN PARK LANE
 City CARY State NC Zip Code 27518-9769
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SMITH ANDERSON LAW FIRM Occupation (for Individual) ATTORNEY
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 11 / 02 / 2016
Transaction ID : SA11A.465134
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

C. BAGGETT, BETTE, B., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 7235 CAYTON
 City HOUSTON State TX Zip Code 77061-2711
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) HOMEMAKER
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 10 / 31 / 2016
Transaction ID : SA11A.457235
 Amount of Each Receipt this Period 500.00
 Memo Item CONTRIBUTION

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 151 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. BAGGETT, RICHARD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1508 MESA RIDGE LN.
 City AUSTIN State TX Zip Code 78735-1643
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 900.00

Date of Receipt 10 / 27 / 2016
Transaction ID : SA11A.454166
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

B. BAGGETT, RICHARD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1508 MESA RIDGE LN.
 City AUSTIN State TX Zip Code 78735-1643
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 900.00

Date of Receipt 11 / 04 / 2016
Transaction ID : SA11A.471475
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

C. BAGLEY IV, CHARLES, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2661 RIVA ROAD SUITE 1001
 City ANNAPOLIS State MD Zip Code 21401-8428
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) BAGLEY & RHODY P.C. Occupation (for Individual) MANAGING PARTNER
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 11 / 06 / 2016
Transaction ID : SA11A.480918
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 152 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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

A. BAHLE, MILDRED, S., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 205 S WOODS MILL ROAD
 APT 3308
 City CHESTERFIELD State MO Zip Code 63017-3511
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) HOMEMAKER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 31 / 2016
Transaction ID : SA11A.457346
 Amount of Each Receipt this Period
 1000.00
 Memo Item
 CONTRIBUTION

B. BAHLER, WALTER, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5927 S CREEKSIDE CT
 City REMINGTON State IN Zip Code 47977-8867
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1995.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 20 / 2016
Transaction ID : SA11A.442252
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION

C. BAHLER, WALTER, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5927 S CREEKSIDE CT
 City REMINGTON State IN Zip Code 47977-8867
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 1995.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 24 / 2016
Transaction ID : SA11A.445932
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 153 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. BAHLER, WALTER, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5927 S CREEKSIDE CT
 City REMINGTON State IN Zip Code 47977-8867
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1995.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 25 / 2016
Transaction ID : SA11A.448539
 Amount of Each Receipt this Period
 50.00
 Memo Item
 CONTRIBUTION

B. BAHLER, WALTER, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5927 S CREEKSIDE CT
 City REMINGTON State IN Zip Code 47977-8867
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1995.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 25 / 2016
Transaction ID : SA11A.448606
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION

C. BAHLER, WALTER, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5927 S CREEKSIDE CT
 City REMINGTON State IN Zip Code 47977-8867
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1995.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 25 / 2016
Transaction ID : SA11A.448623
 Amount of Each Receipt this Period
 50.00
 Memo Item
 CONTRIBUTION

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 154 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. BAHLER, WALTER, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5927 S CREEKSIDE CT
 City REMINGTON State IN Zip Code 47977-8867
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1995.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 26 / 2016
Transaction ID : SA11A.450677
 Amount of Each Receipt this Period
 50.00
 Memo Item
 CONTRIBUTION

B. BAHLER, WALTER, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5927 S CREEKSIDE CT
 City REMINGTON State IN Zip Code 47977-8867
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1995.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 26 / 2016
Transaction ID : SA11A.450696
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION

C. BAHLER, WALTER, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5927 S CREEKSIDE CT
 City REMINGTON State IN Zip Code 47977-8867
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1995.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 27 / 2016
Transaction ID : SA11A.452625
 Amount of Each Receipt this Period
 50.00
 Memo Item
 CONTRIBUTION

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 155 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. BAHLER, WALTER, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5927 S CREEKSIDE CT
 City REMINGTON State IN Zip Code 47977-8867
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1995.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 31 / 2016
Transaction ID : SA11A.459011
 Amount of Each Receipt this Period
 25.00
 Memo Item
 CONTRIBUTION

B. BAHLER, WALTER, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5927 S CREEKSIDE CT
 City REMINGTON State IN Zip Code 47977-8867
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1995.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 30 / 2016
Transaction ID : SA11A.459431
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION

C. BAHLER, WALTER, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5927 S CREEKSIDE CT
 City REMINGTON State IN Zip Code 47977-8867
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1995.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 29 / 2016
Transaction ID : SA11A.460772
 Amount of Each Receipt this Period
 25.00
 Memo Item
 CONTRIBUTION

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 156 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. BAHLER, WALTER, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5927 S CREEKSIDE CT
 City REMINGTON State IN Zip Code 47977-8867
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1995.00

Date of Receipt **10 / 29 / 2016**
Transaction ID : SA11A.460878
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

B. BAHLER, WALTER, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5927 S CREEKSIDE CT
 City REMINGTON State IN Zip Code 47977-8867
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1995.00

Date of Receipt **11 / 01 / 2016**
Transaction ID : SA11A.462189
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

C. BAHLER, WALTER, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5927 S CREEKSIDE CT
 City REMINGTON State IN Zip Code 47977-8867
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1995.00

Date of Receipt **10 / 31 / 2016**
Transaction ID : SA11A.464428
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 157 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name A. BAHLER, WALTER, , ,			Date of Receipt M M / D D / Y Y Y Y Y Y 11 / 02 / 2016 Transaction ID : SA11A.466767		
Mailing Address 5927 S CREEKSIDE CT			Amount of Each Receipt this Period 100.00		
City REMINGTON	State IN	Zip Code 47977-8867	<input type="checkbox"/> Memo Item CONTRIBUTION		
FEC ID number of contributing federal political committee. C					
Name of Employer (for Individual) NONE		Occupation (for Individual) RETIRED	<input type="checkbox"/> Memo Item CONTRIBUTION		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 1995.00			

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name B. BAHLER, WALTER, , ,			Date of Receipt M M / D D / Y Y Y Y Y Y 11 / 02 / 2016 Transaction ID : SA11A.466786		
Mailing Address 5927 S CREEKSIDE CT			Amount of Each Receipt this Period 50.00		
City REMINGTON	State IN	Zip Code 47977-8867	<input type="checkbox"/> Memo Item CONTRIBUTION		
FEC ID number of contributing federal political committee. C					
Name of Employer (for Individual) NONE		Occupation (for Individual) RETIRED	<input type="checkbox"/> Memo Item CONTRIBUTION		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 1995.00			

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name C. BAHLER, WALTER, , ,			Date of Receipt M M / D D / Y Y Y Y Y Y 11 / 04 / 2016 Transaction ID : SA11A.470409		
Mailing Address 5927 S CREEKSIDE CT			Amount of Each Receipt this Period 100.00		
City REMINGTON	State IN	Zip Code 47977-8867	<input type="checkbox"/> Memo Item CONTRIBUTION		
FEC ID number of contributing federal political committee. C					
Name of Employer (for Individual) NONE		Occupation (for Individual) RETIRED	<input type="checkbox"/> Memo Item CONTRIBUTION		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		Aggregate Year-to-Date ▼ 1995.00			

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 158 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. BAHLER, WALTER, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5927 S CREEKSIDE CT
 City REMINGTON State IN Zip Code 47977-8867
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1995.00

Date of Receipt
 11 / 05 / 2016
Transaction ID : SA11A.479074
 Amount of Each Receipt this Period
 50.00
 Memo Item
 CONTRIBUTION

B. BAHLER, WALTER, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5927 S CREEKSIDE CT
 City REMINGTON State IN Zip Code 47977-8867
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1995.00

Date of Receipt
 11 / 05 / 2016
Transaction ID : SA11A.479082
 Amount of Each Receipt this Period
 50.00
 Memo Item
 CONTRIBUTION

C. BAHNSON, GLADYS, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 908 W. GOLDEN EAGLE ST.
 City SIOUX FALLS State SD Zip Code 57108-4863
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt
 10 / 31 / 2016
Transaction ID : SA11A.457434
 Amount of Each Receipt this Period
 250.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	350.00
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 159 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. BAHNSON, GLADYS, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 908 W. GOLDEN EAGLE ST.
 City SIOUX FALLS State SD Zip Code 57108-4863
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 10 / 31 / 2016
Transaction ID : SA11A.457441
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

B. BAILEY, BILL, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3232 NW GREENBRIAR
 City PORTLAND State OR Zip Code 97210-2715
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 10 / 24 / 2016
Transaction ID : SA11A.446040
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

C. BAILEY, BILL, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3232 NW GREENBRIAR
 City PORTLAND State OR Zip Code 97210-2715
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 10 / 24 / 2016
Transaction ID : SA11A.446044
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 160 OF 4311
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. BAILEY, BILL, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 3232 NW GREENBRIAR

City PORTLAND	State OR	Zip Code 97210-2715
------------------	-------------	------------------------

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

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	04	/	2016

Transaction ID : SA11A.473324

Amount of Each Receipt this Period
100.00

Memo Item CONTRIBUTION

B. BAILEY, BOB, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 2500 BARTON CREEK BLVD # 1410

City AUSTIN	State TX	Zip Code 78735-1603
----------------	-------------	------------------------

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

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
365.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	20	/	2016

Transaction ID : SA11A.442301

Amount of Each Receipt this Period
10.00

Memo Item CONTRIBUTION

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

Mailing Address 2500 BARTON CREEK BLVD # 1410

City AUSTIN	State TX	Zip Code 78735-1603
----------------	-------------	------------------------

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

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
365.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	26	/	2016

Transaction ID : SA11A.450350

Amount of Each Receipt this Period
25.00

Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	135.00
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 161 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. BAILEY, BOB, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 2500 BARTON CREEK BLVD # 1410

City AUSTIN State TX Zip Code 78735-1603

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

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

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ **365.00**

Date of Receipt **11 / 02 / 2016**

Transaction ID : SA11A.466602

Amount of Each Receipt this Period **25.00**

Memo Item CONTRIBUTION

B. BAILEY, BOB, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 2500 BARTON CREEK BLVD # 1410

City AUSTIN State TX Zip Code 78735-1603

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

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

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ **365.00**

Date of Receipt **11 / 03 / 2016**

Transaction ID : SA11A.468566

Amount of Each Receipt this Period **25.00**

Memo Item CONTRIBUTION

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

Mailing Address 2500 BARTON CREEK BLVD # 1410

City AUSTIN State TX Zip Code 78735-1603

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

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

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ **365.00**

Date of Receipt **11 / 03 / 2016**

Transaction ID : SA11A.468823

Amount of Each Receipt this Period **10.00**

Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... **60.00**

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 162 OF 4311
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. BAILEY, BOB, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 2500 BARTON CREEK BLVD # 1410

City AUSTIN State TX Zip Code 78735-1603

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

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

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 365.00

Date of Receipt
MM / DD / YYYY
11 / 04 / 2016

Transaction ID : SA11A.470623

Amount of Each Receipt this Period
5.00

Memo Item CONTRIBUTION

B. BAILEY, BOB, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 2500 BARTON CREEK BLVD # 1410

City AUSTIN State TX Zip Code 78735-1603

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

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

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 365.00

Date of Receipt
MM / DD / YYYY
11 / 04 / 2016

Transaction ID : SA11A.474000

Amount of Each Receipt this Period
25.00

Memo Item CONTRIBUTION

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

Mailing Address 2500 BARTON CREEK BLVD # 1410

City AUSTIN State TX Zip Code 78735-1603

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

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

Receipt For: Primary General Other (specify)

Aggregate Year-to-Date ▼ 365.00

Date of Receipt
MM / DD / YYYY
11 / 07 / 2016

Transaction ID : SA11A.476187

Amount of Each Receipt this Period
25.00

Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 55.00

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 164 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. BAILEY, DONALD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4131 POINTE WEST DRIVE
 301
 City GALVESTON State TX Zip Code 77554-3053
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 550.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 27 / 2016
Transaction ID : SA11A.456715
 Amount of Each Receipt this Period
 50.00
 Memo Item
 CONTRIBUTION

B. BAILEY, DONALD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4131 POINTE WEST DRIVE
 301
 City GALVESTON State TX Zip Code 77554-3053
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 550.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 27 / 2016
Transaction ID : SA11A.456724
 Amount of Each Receipt this Period
 50.00
 Memo Item
 CONTRIBUTION

C. BAILEY, DONALD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4131 POINTE WEST DRIVE
 301
 City GALVESTON State TX Zip Code 77554-3053
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 550.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 27 / 2016
Transaction ID : SA11A.456762
 Amount of Each Receipt this Period
 50.00
 Memo Item
 CONTRIBUTION

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 165 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. BAILEY, DONALD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4131 POINTE WEST DRIVE
 301
 City GALVESTON State TX Zip Code 77554-3053
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 550.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 27 / 2016
Transaction ID : SA11A.456802
 Amount of Each Receipt this Period
 50.00
 Memo Item
 CONTRIBUTION

B. BAILEY, DONALD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4131 POINTE WEST DRIVE
 301
 City GALVESTON State TX Zip Code 77554-3053
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 550.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 27 / 2016
Transaction ID : SA11A.456816
 Amount of Each Receipt this Period
 50.00
 Memo Item
 CONTRIBUTION

C. BAILEY, MIKE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2004 WEST PARK AVE
 City RIVERTON State WY Zip Code 82501-3135
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) BAILEY OIL COMPANY Occupation (for Individual) EXECUTIVE
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 04 / 2016
Transaction ID : SA11A.473640
 Amount of Each Receipt this Period
 250.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	350.00
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 166 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. BAILEY, PAMELA, G., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1350 I ST NW, STE 300
 City WASHINGTON State DC Zip Code 20005-3377
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) GROCERY MANUFACTURERS ASSOC. Occupation (for Individual) PRESIDENT
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 10000.00

Date of Receipt 10 / 25 / 2016
Transaction ID : SA11A.445022
 Amount of Each Receipt this Period 2500.00
 Memo Item CONTRIBUTION

B. BAILEY, STEVE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3273 OAKLAND SQUARE DR.
 City BETHLEHEM State PA Zip Code 18020-1292
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) OPERATIONS RESOURCES, INC Occupation (for Individual) PRINCIPAL - INDUSTRIAL ENGINEER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 205.00

Date of Receipt 11 / 04 / 2016
Transaction ID : SA11A.473460
 Amount of Each Receipt this Period 30.00
 Memo Item CONTRIBUTION

C. BAIN, W. D., , MR., JR
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 307 ESSEX RIDGE COURT
 City SPARTANBURG State SC Zip Code 29307-1540
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1600.00

Date of Receipt 10 / 24 / 2016
Transaction ID : SA11A.443807
 Amount of Each Receipt this Period 400.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	2930.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 167 OF 4311
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. BAIN, W. D., , MR., JR
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 307 ESSEX RIDGE COURT

City SPARTANBURG	State SC	Zip Code 29307-1540
---------------------	-------------	------------------------

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

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1600.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	10	/	2016

Transaction ID : SA11A.468196

Amount of Each Receipt this Period
1000.00

Memo Item
CONTRIBUTION

B. BAINES, KEVIN, H., MR.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 2275 HUNTINGTON DRIVE,, #219
219

City SAN MARINO	State CA	Zip Code 91108-2640
--------------------	-------------	------------------------

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

Name of Employer (for Individual) CALTECH	Occupation (for Individual) RESEARCH SCIENTIST
--	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
800.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	25	/	2016

Transaction ID : SA11A.448125

Amount of Each Receipt this Period
100.00

Memo Item
CONTRIBUTION

C. BAIR, JEANNE, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 3800 LATIMER DRIVE

City AUSTIN	State TX	Zip Code 78732-2204
----------------	-------------	------------------------

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

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	27	/	2016

Transaction ID : SA11A.453923

Amount of Each Receipt this Period
25.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	1125.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 168 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. BAIR, JEANNE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3800 LATIMER DRIVE
 City AUSTIN State TX Zip Code 78732-2204
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt
 11 / 04 / 2016
Transaction ID : SA11A.471160
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

B. BAIR, JEANNE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3800 LATIMER DRIVE
 City AUSTIN State TX Zip Code 78732-2204
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt
 11 / 04 / 2016
Transaction ID : SA11A.472230
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

C. BAIR, JEANNE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3800 LATIMER DRIVE
 City AUSTIN State TX Zip Code 78732-2204
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt
 11 / 06 / 2016
Transaction ID : SA11A.477148
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	75.00
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 169 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. BAIRD, WARREN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5578 S 500 W
 City ATLANTA State IN Zip Code 46031-9363
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt
 11 / 03 / 2016
Transaction ID : SA11A.468642
 Amount of Each Receipt this Period
 100.00
 Memo Item CONTRIBUTION

B. BAIRD, WARREN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5578 S 500 W
 City ATLANTA State IN Zip Code 46031-9363
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt
 11 / 03 / 2016
Transaction ID : SA11A.468644
 Amount of Each Receipt this Period
 100.00
 Memo Item CONTRIBUTION

C. BAISH, RICHARD, O., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5440 LA ESTANCIA CIRCLE
 City EL PASO State TX Zip Code 79932-2012
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 1050.00

Date of Receipt
 10 / 24 / 2016
Transaction ID : SA11A.443776
 Amount of Each Receipt this Period
 200.00
 Memo Item CONTRIBUTION

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 170 OF 4311		
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14	<input type="checkbox"/> 11c <input type="checkbox"/> 15	<input type="checkbox"/> 12 <input type="checkbox"/> 16

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NAME OF COMMITTEE (In Full)
Team Ryan

A. BAISH, RICHARD, O., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5440 LA ESTANCIA CIRCLE
 City EL PASO State TX Zip Code 79932-2012
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1050.00

Date of Receipt 11 / 01 / 2016
Transaction ID : SA11A.461639
 Amount of Each Receipt this Period 200.00
 Memo Item CONTRIBUTION

B. BAKER, BRADFORD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 270 RIVER BROOK DR.
 City ROCHESTER State VT Zip Code 05767-4406
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt 10 / 27 / 2016
Transaction ID : SA11A.456846
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

C. BAKER, BRADFORD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 270 RIVER BROOK DR.
 City ROCHESTER State VT Zip Code 05767-4406
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt 10 / 30 / 2016
Transaction ID : SA11A.460193
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 171 OF 4311
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Team Ryan

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

Mailing Address 270 RIVER BROOK DR.

City ROCHESTER	State VT	Zip Code 05767-4406
-------------------	-------------	------------------------

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

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		29		2016

Transaction ID : SA11A.460835

Amount of Each Receipt this Period
100.00

Memo Item CONTRIBUTION

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

Mailing Address 270 RIVER BROOK DR.

City ROCHESTER	State VT	Zip Code 05767-4406
-------------------	-------------	------------------------

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

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11		02		2016

Transaction ID : SA11A.469417

Amount of Each Receipt this Period
50.00

Memo Item CONTRIBUTION

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

Mailing Address 270 RIVER BROOK DR.

City ROCHESTER	State VT	Zip Code 05767-4406
-------------------	-------------	------------------------

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

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
1000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11		02		2016

Transaction ID : SA11A.470027

Amount of Each Receipt this Period
50.00

Memo Item CONTRIBUTION

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 172 OF 4311
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Team Ryan

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

Mailing Address 270 RIVER BROOK DR.

City ROCHESTER	State VT	Zip Code 05767-4406
-------------------	-------------	------------------------

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

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	04	/	2016

Transaction ID : SA11A.473798

Amount of Each Receipt this Period
100.00

Memo Item
CONTRIBUTION

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

Mailing Address 270 RIVER BROOK DR.

City ROCHESTER	State VT	Zip Code 05767-4406
-------------------	-------------	------------------------

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

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	05	/	2016

Transaction ID : SA11A.478652

Amount of Each Receipt this Period
100.00

Memo Item
CONTRIBUTION

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

Mailing Address 139 SUNSET RIDGE RD.

City NORTHFIELD	State IL	Zip Code 60093-2711
--------------------	-------------	------------------------

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

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
575.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	24	/	2016

Transaction ID : SA11A.445716

Amount of Each Receipt this Period
100.00

Memo Item
CONTRIBUTION

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 173 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. BAKER, BRUCE, E., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 139 SUNSET RIDGE RD.
 City NORTHFIELD State IL Zip Code 60093-2711
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 575.00

Date of Receipt 10 / 24 / 2016
Transaction ID : SA11A.445725
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

B. BAKER, BRUCE, E., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 139 SUNSET RIDGE RD.
 City NORTHFIELD State IL Zip Code 60093-2711
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 575.00

Date of Receipt 10 / 31 / 2016
Transaction ID : SA11A.464090
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

C. BAKER, DONALD, E., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1412 ROAD 11
 City YORK State NE Zip Code 68467-7514
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) INFORMATION REQUESTED PER BEST EFFORTS Occupation (for Individual) INFORMATION REQUESTED PER BEST EFFORTS
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 11 / 01 / 2016
Transaction ID : SA11A.461865
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 174 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. BAKER, GEORGE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 921 RIPLEY LANE
 City OYSTER BAY State NY Zip Code 11771-4605
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) WILLIAMS JONES & ASSOCIATES Occupation (for Individual) INVESTMENT MANAGER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1455.00

Date of Receipt 10 / 21 / 2016
Transaction ID : SA11A.444333
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

B. BAKER, GEORGE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 921 RIPLEY LANE
 City OYSTER BAY State NY Zip Code 11771-4605
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) WILLIAMS JONES & ASSOCIATES Occupation (for Individual) INVESTMENT MANAGER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1455.00

Date of Receipt 10 / 27 / 2016
Transaction ID : SA11A.453804
 Amount of Each Receipt this Period 110.00
 Memo Item CONTRIBUTION

C. BAKER, GEORGE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 921 RIPLEY LANE
 City OYSTER BAY State NY Zip Code 11771-4605
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) WILLIAMS JONES & ASSOCIATES Occupation (for Individual) INVESTMENT MANAGER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1455.00

Date of Receipt 11 / 01 / 2016
Transaction ID : SA11A.462782
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	310.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 175 OF 4311
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Team Ryan

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

Mailing Address 921 RIPLEY LANE

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

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

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

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1455.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	04	/	2016

Transaction ID : SA11A.472561

Amount of Each Receipt this Period
110.00

Memo Item CONTRIBUTION

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

Mailing Address 3160 LUNAR RD.

City CARROLLTON	State OH	Zip Code 44615-9708
--------------------	-------------	------------------------

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

Name of Employer (for Individual) FUSION CERAMICS, INC	Occupation (for Individual) VP MANUFACTURING
---	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	01	/	2016

Transaction ID : SA11A.462594

Amount of Each Receipt this Period
250.00

Memo Item CONTRIBUTION

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

Mailing Address 10179 SE TERRA LINDA CT

City HAPPY VALLEY	State OR	Zip Code 97086-6888
----------------------	-------------	------------------------

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

Name of Employer (for Individual) BAKER BEARING CO.	Occupation (for Individual) ACCOUNTANT
--	---

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
400.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	04	/	2016

Transaction ID : SA11A.470333

Amount of Each Receipt this Period
100.00

Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	460.00
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 176 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. BAKER BROWN, OLIVE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4440 MORRIS ST. NE
 333
 City ALBUQUERQUE State NM Zip Code 87111-6946
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 915.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 31 / 2016
Transaction ID : SA11A.464685
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION

B. BAKER BROWN, OLIVE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4440 MORRIS ST. NE
 333
 City ALBUQUERQUE State NM Zip Code 87111-6946
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 915.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 05 / 2016
Transaction ID : SA11A.479132
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION

C. BAKER, VERNON, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 202 SOUTH MOUNTAIN DRIVE
 City NEW BRITAIN State CT Zip Code 06052-1514
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) FINANCIAL PLANNER
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 26 / 2016
Transaction ID : SA11A.450131
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 177 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

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

Mailing Address 202 SOUTH MOUNTAIN DRIVE

City NEW BRITAIN	State CT	Zip Code 06052-1514
---------------------	-------------	------------------------

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

Name of Employer (for Individual) SELF EMPLOYED	Occupation (for Individual) FINANCIAL PLANNER
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
400.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
11		02		2016

Transaction ID : SA11A.467083

Amount of Each Receipt this Period
100.00

Memo Item
CONTRIBUTION

B. BAKKER, LENNARD, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 10478 MORGAN BLVD

City CEDAR HILLS	State UT	Zip Code 84062-8823
---------------------	-------------	------------------------

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

Name of Employer (for Individual) BRIGHAM YOUNG UNIVERSITY	Occupation (for Individual) PROFESSOR
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
275.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
11		04		2016

Transaction ID : SA11A.472864

Amount of Each Receipt this Period
25.00

Memo Item
CONTRIBUTION

C. BALDAUF, HAROLD, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 11750 SPENCER RD

City SAGINAW	State MI	Zip Code 48609-9138
-----------------	-------------	------------------------

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

Name of Employer (for Individual) KERKAU	Occupation (for Individual) PRESIDENT
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
400.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
10		30		2016

Transaction ID : SA11A.460101

Amount of Each Receipt this Period
100.00

Memo Item
CONTRIBUTION

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 178 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

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

Date of Receipt 11 / 04 / 2016
Transaction ID : SA11A.472419
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

B. BALDWIN, EDWIN, S., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1 DROMARA ROAD
 City SAINT LOUIS State MO Zip Code 63124-1816
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 600.00

Date of Receipt 11 / 03 / 2016
Transaction ID : SA11A.465327
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

C. BALDWIN, HENRY, FURLONG, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO BOX 547
 City CHERITON State VA Zip Code 23316-0547
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt 11 / 01 / 2016
Transaction ID : SA11A.461667
 Amount of Each Receipt this Period 1000.00
 Memo Item CONTRIBUTION

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 179 OF 4311
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. BALDWIN, JANNIS, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 4500 CHRISTOPHER DRIVE

City AUSTIN	State TX	Zip Code 78746-2448
----------------	-------------	------------------------

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

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

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		26		2016

Transaction ID : SA11A.450859

Amount of Each Receipt this Period
250.00

Memo Item
CONTRIBUTION

B. BALDWIN, KAREN, , MRS.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1770 S BLUEMOUND DR

City APPLETON	State WI	Zip Code 54914-4141
------------------	-------------	------------------------

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

Name of Employer (for Individual) COLDWELL BANKER THE REAL ESTATE GROUP	Occupation (for Individual) REALTOR
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
325.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		25		2016

Transaction ID : SA11A.448357

Amount of Each Receipt this Period
50.00

Memo Item
CONTRIBUTION

C. BALDWIN, KAREN, , MRS.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1770 S BLUEMOUND DR

City APPLETON	State WI	Zip Code 54914-4141
------------------	-------------	------------------------

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

Name of Employer (for Individual) COLDWELL BANKER THE REAL ESTATE GROUP	Occupation (for Individual) REALTOR
--	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
325.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11		01		2016

Transaction ID : SA11A.467246

Amount of Each Receipt this Period
25.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	325.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 180 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. BALDWIN, MAX, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2 RIVER OTTER LANE
 City SAVANNAH State GA Zip Code 31411-3027
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 02 / 2016
Transaction ID : SA11A.465068
 Amount of Each Receipt this Period
 50.00
 Memo Item
 CONTRIBUTION

B. BALDWIN, MAX, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2 RIVER OTTER LANE
 City SAVANNAH State GA Zip Code 31411-3027
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 02 / 2016
Transaction ID : SA11A.465972
 Amount of Each Receipt this Period
 50.00
 Memo Item
 CONTRIBUTION

C. BALDWIN, MAX, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2 RIVER OTTER LANE
 City SAVANNAH State GA Zip Code 31411-3027
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 04 / 2016
Transaction ID : SA11A.473719
 Amount of Each Receipt this Period
 50.00
 Memo Item
 CONTRIBUTION

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 181 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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

A. BALDWIN, RONAL, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2017 EAGLE AV
 City ALAMEDA State CA Zip Code 94501-1323
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SERENE THOSE LLC Occupation (for Individual) GENERAL COUNSEL
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 11 / 04 / 2016
Transaction ID : SA11A.472626
 Amount of Each Receipt this Period 50.00
 Memo Item
 CONTRIBUTION

B. BALKAN, ROBERT, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2504 AUDUBON TRACE
 City JEFFERSON State LA Zip Code 70121-1583
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NOES Occupation (for Individual) PHYSICIAN
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 325.00

Date of Receipt 10 / 31 / 2016
Transaction ID : SA11A.464781
 Amount of Each Receipt this Period 50.00
 Memo Item
 CONTRIBUTION

C. BALKIND, MARY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1564 LAUREL HOLLOW RD.
 City SYOSSET State NY Zip Code 11791-9636
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 11 / 03 / 2016
Transaction ID : SA11A.469029
 Amount of Each Receipt this Period 100.00
 Memo Item
 CONTRIBUTION

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 182 OF 4311
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. BALKIND, MARY, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 1564 LAUREL HOLLOW RD.
City SYOSSET State NY Zip Code 11791-9636
FEC ID number of contributing federal political committee. **C**
Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 500.00

Date of Receipt 11 / 03 / 2016
Transaction ID : SA11A.469052
Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

B. BALKIND, MARY, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 1564 LAUREL HOLLOW RD.
City SYOSSET State NY Zip Code 11791-9636
FEC ID number of contributing federal political committee. **C**
Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 500.00

Date of Receipt 11 / 04 / 2016
Transaction ID : SA11A.473921
Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

C. BALLARD, A.L., , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 1021 MAIN ST STE 2310
City HOUSTON State TX Zip Code 77002-6506
FEC ID number of contributing federal political committee. **C**
Name of Employer (for Individual) BALLARD EXPLORATION COMPANY, INC. Occupation (for Individual) OIL & GAS
Receipt For: Primary General Other (specify)
Aggregate Year-to-Date ▼ 6000.00

Date of Receipt 10 / 24 / 2016
Transaction ID : SA11A.443495
Amount of Each Receipt this Period 5000.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 5200.00
TOTAL This Period (last page this line number only)..... ▶

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 183 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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

A. BALLARD, DIANE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 9625 WOOD VISTA CIRCLE
 City SOUTH JORDAN State UT Zip Code 84009-1551
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) UNIVERSITY OF UTAH Occupation (for Individual) SECRETARY
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt 10 / 21 / 2016
Transaction ID : SA11A.444300
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

B. BANCROFT, J. GAIL, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 7010 ARMAT DRIVE
 City BETHESDA State MD Zip Code 20817-2104
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 725.00

Date of Receipt 10 / 31 / 2016
Transaction ID : SA11A.463468
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

C. BANE, RONALD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 6610 E. CRESTED SAGUARO LANE
 City SCOTTSDALE State AZ Zip Code 85266-7335
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 10 / 28 / 2016
Transaction ID : SA11A.455034
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 184 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. BANG, GARY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address **PO BOX 1925**
 City **CARMEL** State **CA** Zip Code **93921-1925**
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) **NONE** Occupation (for Individual) **RETIRED**
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ **450.00**

Date of Receipt **11 / 07 / 2016**
Transaction ID : SA11A.476239
 Amount of Each Receipt this Period **250.00**
 Memo Item CONTRIBUTION

B. BANKERS, DOROTHY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address **2887 HILTON CIR**
 City **KENNESAW** State **GA** Zip Code **30152-5865**
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) **NONE** Occupation (for Individual) **RETIRED**
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ **225.00**

Date of Receipt **11 / 07 / 2016**
Transaction ID : SA11A.475492
 Amount of Each Receipt this Period **100.00**
 Memo Item CONTRIBUTION

C. BANKS, JUDY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address **1621 BRIDLE DR**
 City **HENDERSON** State **NV** Zip Code **89002-3411**
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) **NONE** Occupation (for Individual) **RETIRED**
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ **405.00**

Date of Receipt **10 / 21 / 2016**
Transaction ID : SA11A.444506
 Amount of Each Receipt this Period **20.00**
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	370.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 185 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. BANKS, JUDY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1621 BRIDLE DR
 City HENDERSON State NV Zip Code 89002-3411
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 405.00

Date of Receipt 10 / 24 / 2016
Transaction ID : SA11A.449215
 Amount of Each Receipt this Period 20.00
 Memo Item CONTRIBUTION

B. BANKS, JUDY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1621 BRIDLE DR
 City HENDERSON State NV Zip Code 89002-3411
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 405.00

Date of Receipt 10 / 27 / 2016
Transaction ID : SA11A.452529
 Amount of Each Receipt this Period 30.00
 Memo Item CONTRIBUTION

C. BANKS, JUDY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1621 BRIDLE DR
 City HENDERSON State NV Zip Code 89002-3411
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 405.00

Date of Receipt 11 / 04 / 2016
Transaction ID : SA11A.471724
 Amount of Each Receipt this Period 20.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 70.00
TOTAL This Period (last page this line number only)..... ▶

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 186 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. BANKS, JUDY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1621 BRIDLE DR
 City HENDERSON State NV Zip Code 89002-3411
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 405.00

Date of Receipt
 11 / 07 / 2016
Transaction ID : SA11A.475249
 Amount of Each Receipt this Period 20.00
 Memo Item CONTRIBUTION

B. BANKS, JUDY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1621 BRIDLE DR
 City HENDERSON State NV Zip Code 89002-3411
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 405.00

Date of Receipt
 11 / 07 / 2016
Transaction ID : SA11A.475250
 Amount of Each Receipt this Period 20.00
 Memo Item CONTRIBUTION

C. BANKS, JUDY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1621 BRIDLE DR
 City HENDERSON State NV Zip Code 89002-3411
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 405.00

Date of Receipt
 11 / 08 / 2016
Transaction ID : SA11A.479726
 Amount of Each Receipt this Period 20.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 60.00
TOTAL This Period (last page this line number only)..... ▶

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 187 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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

A. BANKS, JUDY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1621 BRIDLE DR
 City HENDERSON State NV Zip Code 89002-3411
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 405.00

Date of Receipt
 11 / 08 / 2016
Transaction ID : SA11A.479727
 Amount of Each Receipt this Period 20.00
 Memo Item CONTRIBUTION

B. BANT, JOYCE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 6937 HWY. 51
 City HAZELHURST State WI Zip Code 54531-9652
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 220.00

Date of Receipt
 10 / 31 / 2016
Transaction ID : SA11A.464585
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

C. BANVARD, NAVY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5880 RAMIREZ CANYON RD
 City MALIBU State CA Zip Code 90265-4421
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) ARCHITECT
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt
 10 / 31 / 2016
Transaction ID : SA11A.457436
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	295.00
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 188 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. BARELAS, HORTENCIA, S., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 11915 HILLCROFT AVE.
 City HOUSTON State TX Zip Code 77035-4222
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 444.00

Date of Receipt 10 / 21 / 2016
Transaction ID : SA11A.444396
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

B. BARELAS, HORTENCIA, S., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 11915 HILLCROFT AVE.
 City HOUSTON State TX Zip Code 77035-4222
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 444.00

Date of Receipt 10 / 21 / 2016
Transaction ID : SA11A.444397
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

C. BARELAS, HORTENCIA, S., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 11915 HILLCROFT AVE.
 City HOUSTON State TX Zip Code 77035-4222
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 444.00

Date of Receipt 10 / 21 / 2016
Transaction ID : SA11A.444398
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 189 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. BARELAS, HORTENCIA, S., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 11915 HILLCROFT AVE.
 City HOUSTON State TX Zip Code 77035-4222
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 444.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 02 / 2016
Transaction ID : SA11A.469774
 Amount of Each Receipt this Period
 25.00
 Memo Item
 CONTRIBUTION

B. BARELAS, HORTENCIA, S., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 11915 HILLCROFT AVE.
 City HOUSTON State TX Zip Code 77035-4222
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 444.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 02 / 2016
Transaction ID : SA11A.469786
 Amount of Each Receipt this Period
 30.00
 Memo Item
 CONTRIBUTION

C. BARELAS, HORTENCIA, S., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 11915 HILLCROFT AVE.
 City HOUSTON State TX Zip Code 77035-4222
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 444.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 04 / 2016
Transaction ID : SA11A.471796
 Amount of Each Receipt this Period
 50.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	105.00
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 190 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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

A. BARES, KEITH, S., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 520 INDIAN MOUND STREET #1A
 #1A
 City WAYZATA State MN Zip Code 55391-3700
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) CC MANAGEMENT, LLC Occupation (for Individual) INVESTMENT MANAGEMENT
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt
 11 / 02 / 2016
Transaction ID : SA11A.465730
 Amount of Each Receipt this Period
 250.00
 Memo Item
 CONTRIBUTION

B. BARFIELD, WILLIAM, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3324 SENASAC AVE.
 City LONG BEACH State CA Zip Code 90808-3826
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 275.00

Date of Receipt
 10 / 27 / 2016
Transaction ID : SA11A.453982
 Amount of Each Receipt this Period
 25.00
 Memo Item
 CONTRIBUTION

C. BARGER, ROBERT, L., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 239 COUNTRY CLUB BOULEVARD
 City PORTLAND State TX Zip Code 78374-4018
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) CHEMOURS Occupation (for Individual) ENGINEER
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 600.00

Date of Receipt
 10 / 25 / 2016
Transaction ID : SA11A.447269
 Amount of Each Receipt this Period
 500.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	775.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 191 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. BARKER, CHARLOTTE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 35940 HIGHWAY 10
 City KIMBERLY State OR Zip Code 97848-
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) GEOLOGIST
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 493.00

Date of Receipt 10 / 22 / 2016
Transaction ID : SA11A.446831
 Amount of Each Receipt this Period 18.00
 Memo Item CONTRIBUTION

B. BARKER, CHARLOTTE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 35940 HIGHWAY 10
 City KIMBERLY State OR Zip Code 97848-
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) GEOLOGIST
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 493.00

Date of Receipt 10 / 22 / 2016
Transaction ID : SA11A.446971
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

C. BARKER, CHARLOTTE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 35940 HIGHWAY 10
 City KIMBERLY State OR Zip Code 97848-
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) GEOLOGIST
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 493.00

Date of Receipt 11 / 02 / 2016
Transaction ID : SA11A.466677
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶ 143.00
TOTAL This Period (last page this line number only).....▶

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 192 OF 4311
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. BARKER, CHARLOTTE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 35940 HIGHWAY 10
 City KIMBERLY State OR Zip Code 97848-
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) GEOLOGIST
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 493.00

Date of Receipt 11 / 04 / 2016
Transaction ID : SA11A.471138
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

B. BARKERA, GLADIES, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4600 CONNECTICUT AVE., NW APT 602
 City WASHINGTON State DC Zip Code 20008-5705
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) TRAINER/WRITER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 350.00

Date of Receipt 10 / 24 / 2016
Transaction ID : SA11A.446212
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

C. BARKERA, GLADIES, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4600 CONNECTICUT AVE., NW APT 602
 City WASHINGTON State DC Zip Code 20008-5705
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) TRAINER/WRITER
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 350.00

Date of Receipt 10 / 31 / 2016
Transaction ID : SA11A.459005
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 193 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. BARKERA, GLADIES, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4600 CONNECTICUT AVE., NW
 APT 602
 City WASHINGTON State DC Zip Code 20008-5705
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) TRAINER/WRITER
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 350.00

Date of Receipt 11 / 04 / 2016
Transaction ID : SA11A.472550
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

B. BARLOW, HERBERT, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 9139 SE HAWKSBILL WAY
 City HOBE SOUND State FL Zip Code 33455-3113
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 400.00

Date of Receipt 10 / 31 / 2016
Transaction ID : SA11A.459125
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

C. BARLOW, HERBERT, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 9139 SE HAWKSBILL WAY
 City HOBE SOUND State FL Zip Code 33455-3113
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 400.00

Date of Receipt 11 / 04 / 2016
Transaction ID : SA11A.471222
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 194 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. BARLOW, LINDA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4337 STANHOPE STREET
 City DALLAS State TX Zip Code 75205-1662
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) INFORMATION REQUESTED PER BEST EFFORTS Occupation (for Individual) INFORMATION REQUESTED PER BE
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 300.00

Date of Receipt 11 / 03 / 2016
Transaction ID : SA11A.465605
 Amount of Each Receipt this Period 200.00
 Memo Item CONTRIBUTION

B. BARNA, JOHN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 122 HEATHER COURT
 City PALM DESERT State CA Zip Code 92260-6748
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 1227.00

Date of Receipt 10 / 26 / 2016
Transaction ID : SA11A.454352
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

C. BARNA, JOHN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 122 HEATHER COURT
 City PALM DESERT State CA Zip Code 92260-6748
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 1227.00

Date of Receipt 11 / 01 / 2016
Transaction ID : SA11A.463143
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 195 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. BARNAS, JOHN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 122 HEATHER COURT
 City PALM DESERT State CA Zip Code 92260-6748
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1227.00

Date of Receipt 11 / 01 / 2016
Transaction ID : SA11A.463150
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

B. BARNARD, TED, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 103 BROCADE AVE
 City BAKERSFIELD State CA Zip Code 93312-7085
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) CATTLE RANCHER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt 10 / 25 / 2016
Transaction ID : SA11A.451632
 Amount of Each Receipt this Period 1000.00
 Memo Item CONTRIBUTION

C. BARNES, ASA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 715 N COOPER STREET
 City SILVER CITY State NM Zip Code 88061-5043
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 465.00

Date of Receipt 10 / 24 / 2016
Transaction ID : SA11A.445878
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶ 1150.00
TOTAL This Period (last page this line number only).....▶

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 196 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. BARNES, ASA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 715 N COOPER STREET
 City SILVER CITY State NM Zip Code 88061-5043
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 465.00

Date of Receipt 10 / 26 / 2016
Transaction ID : SA11A.447671
 Amount of Each Receipt this Period 35.00
 Memo Item CONTRIBUTION

B. BARNES, ASA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 715 N COOPER STREET
 City SILVER CITY State NM Zip Code 88061-5043
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 465.00

Date of Receipt 10 / 26 / 2016
Transaction ID : SA11A.454561
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

C. BARNES, ASA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 715 N COOPER STREET
 City SILVER CITY State NM Zip Code 88061-5043
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 465.00

Date of Receipt 10 / 26 / 2016
Transaction ID : SA11A.454657
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	135.00
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 197 OF 4311
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. BARNES, ASA, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 715 N COOPER STREET

City SILVER CITY	State NM	Zip Code 88061-5043
---------------------	-------------	------------------------

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

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
465.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	26	/	2016

Transaction ID : SA11A.454659

Amount of Each Receipt this Period
50.00

Memo Item CONTRIBUTION

B. BARNES, ASA, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 715 N COOPER STREET

City SILVER CITY	State NM	Zip Code 88061-5043
---------------------	-------------	------------------------

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

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
465.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	01	/	2016

Transaction ID : SA11A.467395

Amount of Each Receipt this Period
25.00

Memo Item CONTRIBUTION

C. BARNES, ASA, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 715 N COOPER STREET

City SILVER CITY	State NM	Zip Code 88061-5043
---------------------	-------------	------------------------

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

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
465.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	07	/	2016

Transaction ID : SA11A.467875

Amount of Each Receipt this Period
50.00

Memo Item CONTRIBUTION

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 198 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. BARNES, BRIAN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 618 TORTOISE WAY
 City SATELLITE BEACH State FL Zip Code 32937-3830
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) HARRIS CORPORATION Occupation (for Individual) SYSTEMS ENGINEER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 525.00

Date of Receipt 10 / 30 / 2016
Transaction ID : SA11A.459789
 Amount of Each Receipt this Period 75.00
 Memo Item CONTRIBUTION

B. BARNETT, C, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3711 FAIRWAY LANE
 City LOUISVILLE State KY Zip Code 40207-1414
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) ALGOOD FOOD COMPANY Occupation (for Individual) CHAIRMAN
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 6000.00

Date of Receipt 10 / 25 / 2016
Transaction ID : SA11A.448836
 Amount of Each Receipt this Period 1000.00
 Memo Item CONTRIBUTION

C. BARNES, CURTIS, O., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3 SKYBIRD COURT
 City LAS VEGAS State NV Zip Code 89135-7865
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) INFORMATION REQUESTED PER BEST EFFORTS Occupation (for Individual) INFORMATION REQUESTED PER BEST EFFORTS
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 1500.00

Date of Receipt 10 / 25 / 2016
Transaction ID : SA11A.447513
 Amount of Each Receipt this Period 1000.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶ 2075.00
TOTAL This Period (last page this line number only).....▶

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 199 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. BARNETT, GAIL, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 18338 CAPE BAHAMAS
 City HOUSTON State TX Zip Code 77058-3407
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NASA Occupation (for Individual) ENGINEER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 25 / 2016
Transaction ID : SA11A.448929
 Amount of Each Receipt this Period
 25.00
 Memo Item
 CONTRIBUTION

B. BARNETT, GAIL, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 18338 CAPE BAHAMAS
 City HOUSTON State TX Zip Code 77058-3407
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NASA Occupation (for Individual) ENGINEER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 07 / 2016
Transaction ID : SA11A.480117
 Amount of Each Receipt this Period
 25.00
 Memo Item
 CONTRIBUTION

C. BARNET, JAMES, , MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 18072 PAMELA PLACE
 City VILLA PARK State CA Zip Code 92861-2625
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 03 / 2016
Transaction ID : SA11A.465604
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 200 OF 4311
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. BARNETT JR, KIMBREW, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address **9811 SALISBURY AVE**

City LUBBOCK	State TX	Zip Code 79424-5010
------------------------	--------------------	-------------------------------

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

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
--	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **300.00**

Date of Receipt
10 / 27 / 2016

Transaction ID : SA11A.453179

Amount of Each Receipt this Period
100.00

Memo Item
CONTRIBUTION

B. BARNETT JR, KIMBREW, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address **9811 SALISBURY AVE**

City LUBBOCK	State TX	Zip Code 79424-5010
------------------------	--------------------	-------------------------------

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

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
--	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **300.00**

Date of Receipt
11 / 02 / 2016

Transaction ID : SA11A.466246

Amount of Each Receipt this Period
100.00

Memo Item
CONTRIBUTION

C. BARNES, ROGER, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address **5404 NORTH COLLEGE DRIVE**

City CHEYENNE	State WY	Zip Code 82009-4602
-------------------------	--------------------	-------------------------------

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

Name of Employer (for Individual) UNICOVER CORPORATION	Occupation (for Individual) COMPUTER PROGRAMMER
--	---

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼ **225.00**

Date of Receipt
10 / 25 / 2016

Transaction ID : SA11A.451985

Amount of Each Receipt this Period
50.00

Memo Item
CONTRIBUTION

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 201 OF 4311
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
Team Ryan

A. BARNES, ROGER, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 5404 NORTH COLLEGE DRIVE

City CHEYENNE	State WY	Zip Code 82009-4602
------------------	-------------	------------------------

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

Name of Employer (for Individual) UNICOVER CORPORATION	Occupation (for Individual) COMPUTER PROGRAMMER
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
225.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		31		2016

Transaction ID : SA11A.464474

Amount of Each Receipt this Period
25.00

Memo Item
CONTRIBUTION

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

Mailing Address MARKET BRIDGE LANE
302

City RALEIGH	State NC	Zip Code 27608-
-----------------	-------------	--------------------

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

Name of Employer (for Individual) BP LLC	Occupation (for Individual) REAL ESTATE
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
700.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		27		2016

Transaction ID : SA11A.453814

Amount of Each Receipt this Period
100.00

Memo Item
CONTRIBUTION

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

Mailing Address MARKET BRIDGE LANE
302

City RALEIGH	State NC	Zip Code 27608-
-----------------	-------------	--------------------

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

Name of Employer (for Individual) BP LLC	Occupation (for Individual) REAL ESTATE
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
700.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11		04		2016

Transaction ID : SA11A.471863

Amount of Each Receipt this Period
100.00

Memo Item
CONTRIBUTION

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 202 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
Team Ryan

A. BARON, CARL, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3505 INNISBROOK DR
 City LAKELAND State FL Zip Code 33810-5738
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 20 / 2016
Transaction ID : SA11A.444816
 Amount of Each Receipt this Period
 1000.00
 Memo Item
 CONTRIBUTION

B. BARR, REGINALD, E., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5383 E ROCKRIDGE ROAD
 City PHOENIX State AZ Zip Code 85018-1936
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) EDVENTURE INC Occupation (for Individual) EDUCATOR
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 31 / 2016
Transaction ID : SA11A.457231
 Amount of Each Receipt this Period
 500.00
 Memo Item
 CONTRIBUTION

C. BARRETT, HUBERT, W., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3221 ARTHUR DRIVE
 City MURFREESBORO State TN Zip Code 37127-6634
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 218.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 03 / 2016
Transaction ID : SA11A.465564
 Amount of Each Receipt this Period
 80.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	1580.00
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 203 OF 4311
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
Team Ryan

A. BARRETT, IRAL, D., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 343 LOWER LAVISTA CT. NW
 City SALEM State OR Zip Code 97304-4701
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 23 / 2016
Transaction ID : SA11A.446315
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION

B. BARRETT, IRAL, D., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 343 LOWER LAVISTA CT. NW
 City SALEM State OR Zip Code 97304-4701
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 04 / 2016
Transaction ID : SA11A.473329
 Amount of Each Receipt this Period
 50.00
 Memo Item
 CONTRIBUTION

C. BARRETT, JAMES, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2015 MEADOW GLEN
 City WYOMISSING State PA Zip Code 19610-2719
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 225.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 26 / 2016
Transaction ID : SA11A.450834
 Amount of Each Receipt this Period
 50.00
 Memo Item
 CONTRIBUTION

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 204 OF 4311
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Team Ryan

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

Mailing Address 2015 MEADOW GLEN

City WYOMISSING	State PA	Zip Code 19610-2719
--------------------	-------------	------------------------

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

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
225.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		31		2016

Transaction ID : SA11A.457546

Amount of Each Receipt this Period
25.00

Memo Item
CONTRIBUTION

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

Mailing Address 29 GRAY TERRACE

City BRAintree	State MA	Zip Code 02184-8253
-------------------	-------------	------------------------

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

Name of Employer (for Individual) CES LLC	Occupation (for Individual) SALES
--	--------------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
700.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		26		2016

Transaction ID : SA11A.451010

Amount of Each Receipt this Period
100.00

Memo Item
CONTRIBUTION

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

Mailing Address 29 GRAY TERRACE

City BRAintree	State MA	Zip Code 02184-8253
-------------------	-------------	------------------------

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

Name of Employer (for Individual) CES LLC	Occupation (for Individual) SALES
--	--------------------------------------

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
700.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11		04		2016

Transaction ID : SA11A.472092

Amount of Each Receipt this Period
100.00

Memo Item
CONTRIBUTION

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 205 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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

A. BARRICK, RICH, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 15907 BOOTH CIRCLE
 City VOLENTE State TX Zip Code 78641-9679
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RICH BARRICK Occupation (for Individual) CONSTRUCTION
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 04 / 2016
Transaction ID : SA11A.472930
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION

B. BARROWS, ALICE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 12034 TOPAZ ST.
 City CLERMONT State FL Zip Code 34711-8876
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 550.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 23 / 2016
Transaction ID : SA11A.446380
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION

C. BARRON, THOMAS, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 8 FEATHERSTON DRIVE
 City NEWNAN State GA Zip Code 30263-1520
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) LINDSEY'S, INC. Occupation (for Individual) REAL ESTATE BROKER
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 21 / 2016
Transaction ID : SA11A.444102
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 206 OF 4311
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

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

Mailing Address 8 FEATHERSTON DRIVE

City NEWNAN	State GA	Zip Code 30263-1520
----------------	-------------	------------------------

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

Name of Employer (for Individual) LINDSEY'S, INC.	Occupation (for Individual) REAL ESTATE BROKER
--	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		25		2016

Transaction ID : SA11A.448086

Amount of Each Receipt this Period
100.00

Memo Item CONTRIBUTION

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

Mailing Address 8 FEATHERSTON DRIVE

City NEWNAN	State GA	Zip Code 30263-1520
----------------	-------------	------------------------

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

Name of Employer (for Individual) LINDSEY'S, INC.	Occupation (for Individual) REAL ESTATE BROKER
--	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11		01		2016

Transaction ID : SA11A.462233

Amount of Each Receipt this Period
100.00

Memo Item CONTRIBUTION

C. BARTHOLOMAY, ALICE, C., ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 5015 35TH AVENUE S APT 136
136

City MINNEAPOLIS	State MN	Zip Code 55417-1562
---------------------	-------------	------------------------

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

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
532.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		29		2016

Transaction ID : SA11A.460624

Amount of Each Receipt this Period
25.00

Memo Item CONTRIBUTION

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 208 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. BARTLETT, TIMOTHY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 7401 US ROUTE 9
 City ELIZABETHTOWN State NY Zip Code 12932-1720
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 350.00

Date of Receipt 10 / 26 / 2016
Transaction ID : SA11A.451024
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

B. BARTLETT, TIMOTHY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 7401 US ROUTE 9
 City ELIZABETHTOWN State NY Zip Code 12932-1720
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 350.00

Date of Receipt 11 / 04 / 2016
Transaction ID : SA11A.471734
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

C. BARTMESS, ROBERT, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2815 WILLOWS RD #227 B 227 B
 City SEAVIEW State WA Zip Code 98644-4253
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 657.00

Date of Receipt 10 / 25 / 2016
Transaction ID : SA11A.448295
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	350.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 209 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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

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NAME OF COMMITTEE (In Full)
Team Ryan

A. BARTON, MICHAEL, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 140 N TUACAHN DR. #70
 City IVINS State UT Zip Code 84738-6187
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 350.00

Date of Receipt 10 / 26 / 2016
Transaction ID : SA11A.450852
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

B. BARTON, MICHAEL, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 140 N TUACAHN DR. #70
 City IVINS State UT Zip Code 84738-6187
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 350.00

Date of Receipt 11 / 05 / 2016
Transaction ID : SA11A.478809
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

C. BARTON, TROY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 868 SUNSHINE CT
 City SANTA MARIA State CA Zip Code 93455-2168
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) COAST FLUID-AIRE, INC Occupation (for Individual) GM
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 700.00

Date of Receipt 10 / 24 / 2016
Transaction ID : SA11A.446051
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 210 OF 4311		
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14	<input type="checkbox"/> 11c <input type="checkbox"/> 15	<input type="checkbox"/> 12 <input type="checkbox"/> 16

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NAME OF COMMITTEE (In Full)
Team Ryan

A. BARTON, TROY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 868 SUNSHINE CT

City SANTA MARIA	State CA	Zip Code 93455-2168
---------------------	-------------	------------------------

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

Name of Employer (for Individual) COAST FLUID-AIRE, INC	Occupation (for Individual) GM
--	-----------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
700.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 24 / 2016
Transaction ID : SA11A.446057

Amount of Each Receipt this Period
100.00

Memo Item
CONTRIBUTION

B. BARTON, TROY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 868 SUNSHINE CT

City SANTA MARIA	State CA	Zip Code 93455-2168
---------------------	-------------	------------------------

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

Name of Employer (for Individual) COAST FLUID-AIRE, INC	Occupation (for Individual) GM
--	-----------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
700.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 27 / 2016
Transaction ID : SA11A.453624

Amount of Each Receipt this Period
100.00

Memo Item
CONTRIBUTION

C. BARTON, TROY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 868 SUNSHINE CT

City SANTA MARIA	State CA	Zip Code 93455-2168
---------------------	-------------	------------------------

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

Name of Employer (for Individual) COAST FLUID-AIRE, INC	Occupation (for Individual) GM
--	-----------------------------------

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
700.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 31 / 2016
Transaction ID : SA11A.459035

Amount of Each Receipt this Period
100.00

Memo Item
CONTRIBUTION

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 211 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. BARTOW, WILLIAM, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3531 ROYAL SCOTS WAY
 City FORT SMITH State AR Zip Code 72908-9331
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 475.00

Date of Receipt 10 / 31 / 2016
Transaction ID : SA11A.459237
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

B. BARTOW, WILLIAM, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3531 ROYAL SCOTS WAY
 City FORT SMITH State AR Zip Code 72908-9331
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 475.00

Date of Receipt 11 / 01 / 2016
Transaction ID : SA11A.462886
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

C. BARTOW, WILLIAM, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3531 ROYAL SCOTS WAY
 City FORT SMITH State AR Zip Code 72908-9331
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 475.00

Date of Receipt 11 / 02 / 2016
Transaction ID : SA11A.466440
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 212 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. BARTOW, WILLIAM, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3531 ROYAL SCOTS WAY
 City FORT SMITH State AR Zip Code 72908-9331
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 475.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 02 / 2016
Transaction ID : SA11A.466441
 Amount of Each Receipt this Period
 50.00
 Memo Item
 CONTRIBUTION

B. BARTOW, WILLIAM, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3531 ROYAL SCOTS WAY
 City FORT SMITH State AR Zip Code 72908-9331
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 475.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 07 / 2016
Transaction ID : SA11A.476501
 Amount of Each Receipt this Period
 50.00
 Memo Item
 CONTRIBUTION

C. BASHOR, THOMAS, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 20159 GIBBS DR.
 City SONORA State CA Zip Code 95370-8040
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 260.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 29 / 2016
Transaction ID : SA11A.460693
 Amount of Each Receipt this Period
 25.00
 Memo Item
 CONTRIBUTION

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 213 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. BASHOR, THOMAS, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 20159 GIBBS DR.
 City SONORA State CA Zip Code 95370-8040
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 260.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 29 / 2016
Transaction ID : SA11A.460696
 Amount of Each Receipt this Period 30.00
 Memo Item CONTRIBUTION

B. BASHOR, THOMAS, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 20159 GIBBS DR.
 City SONORA State CA Zip Code 95370-8040
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 260.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 29 / 2016
Transaction ID : SA11A.460697
 Amount of Each Receipt this Period 30.00
 Memo Item CONTRIBUTION

C. BASILE, ROBERT, , , SR.
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 210 WOODRIDGE COURT
 City CIRCLE PINES State MN Zip Code 55014-5442
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 575.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 30 / 2016
Transaction ID : SA11A.460257
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	110.00
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 214 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. BASILE, ROBERT, , , SR.
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 210 WOODRIDGE COURT
 City CIRCLE PINES State MN Zip Code 55014-5442
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 575.00

Date of Receipt
 11 / 02 / 2016
Transaction ID : SA11A.470205
 Amount of Each Receipt this Period
 100.00
 Memo Item CONTRIBUTION

B. BASILE, ROBERT, , , SR.
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 210 WOODRIDGE COURT
 City CIRCLE PINES State MN Zip Code 55014-5442
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 575.00

Date of Receipt
 11 / 02 / 2016
Transaction ID : SA11A.470207
 Amount of Each Receipt this Period
 100.00
 Memo Item CONTRIBUTION

C. BASILE, ROBERT, , , SR.
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 210 WOODRIDGE COURT
 City CIRCLE PINES State MN Zip Code 55014-5442
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 575.00

Date of Receipt
 11 / 04 / 2016
Transaction ID : SA11A.470602
 Amount of Each Receipt this Period
 50.00
 Memo Item CONTRIBUTION

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 215 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
Team Ryan

A. BASILE, ROBERT, , , SR.
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 210 WOODRIDGE COURT
 City CIRCLE PINES State MN Zip Code 55014-5442
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 575.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 11 / 04 / 2016
Transaction ID : SA11A.470603
 Amount of Each Receipt this Period
 50.00
 Memo Item
 CONTRIBUTION

B. BASKIN, HERBERT, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 264 YALE AVE
 City KENSINGTON State CA Zip Code 94708-1048
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 10 / 20 / 2016
Transaction ID : SA11A.442238
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION

C. BASKIN, JAMES, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO BOX 1380
 City MENLO PARK State CA Zip Code 94026-1380
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) REAL ESTATE
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 750.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 11 / 04 / 2016
Transaction ID : SA11A.471617
 Amount of Each Receipt this Period
 250.00
 Memo Item
 CONTRIBUTION

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 216 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. BASKIN, JAMES, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO BOX 1380
 City MENLO PARK State CA Zip Code 94026-1380
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) REAL ESTATE
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 750.00

Date of Receipt 11 / 03 / 2016
Transaction ID : SA11A.474468
 Amount of Each Receipt this Period 250.00
 Memo Item
 CONTRIBUTION

B. BASS, EDWARD, P., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 201 MAIN ST, ST 2700
 City FORT WORTH State TX Zip Code 76102-3131
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) BASS GROUP Occupation (for Individual) EXECUTIVE
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 12700.00

Date of Receipt 10 / 24 / 2016
Transaction ID : SA11A.443443
 Amount of Each Receipt this Period 10000.00
 Memo Item
 CONTRIBUTION

C. BASS, JACK, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 17606 N 134TH AVE
 City SUN CITY WEST State AZ Zip Code 85375-5308
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt 11 / 01 / 2016
Transaction ID : SA11A.462859
 Amount of Each Receipt this Period 100.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	10350.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 217 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. BASS, MERCEDES, T., MRS.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 201 MAIN ST, STE 3200
 City FORT WORTH State TX Zip Code 76102-3134
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SRBI, LP Occupation (for Individual) MANAGER
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date 15000.00

Date of Receipt 10 / 24 / 2016
Transaction ID : SA11A.443489
 Amount of Each Receipt this Period 5000.00
 Memo Item CONTRIBUTION

B. BASS, SID, R., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 201 MAIN STREET SUITE 2700
 City FT WORTH State TX Zip Code 76102-3131
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) BASS COMPANIES Occupation (for Individual) INVESTOR
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date 10000.00

Date of Receipt 10 / 24 / 2016
Transaction ID : SA11A.443439
 Amount of Each Receipt this Period 10000.00
 Memo Item CONTRIBUTION

C. BASSERT, LINDA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5147 PUMPHREY DRIVE
 City FAIRFAX State VA Zip Code 22032-2719
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) MASTERWORKS WINDOW FASHIONS & DESIGN Occupation (for Individual) INTERIOR DESIGNER
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date 250.00

Date of Receipt 10 / 26 / 2016
Transaction ID : SA11A.454321
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... 15050.00
TOTAL This Period (last page this line number only).....

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 218 OF 4311
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. BASSERT, LINDA, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 5147 PUMPHREY DRIVE

City FAIRFAX	State VA	Zip Code 22032-2719
-----------------	-------------	------------------------

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

Name of Employer (for Individual) MASTERWORKS WINDOW FASHIONS & DESIGN	Occupation (for Individual) INTERIOR DESIGNER
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
11		02		2016

Transaction ID : SA11A.465864

Amount of Each Receipt this Period
25.00

Memo Item
CONTRIBUTION

B. BASSERT, LINDA, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 5147 PUMPHREY DRIVE

City FAIRFAX	State VA	Zip Code 22032-2719
-----------------	-------------	------------------------

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

Name of Employer (for Individual) MASTERWORKS WINDOW FASHIONS & DESIGN	Occupation (for Individual) INTERIOR DESIGNER
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
11		02		2016

Transaction ID : SA11A.465866

Amount of Each Receipt this Period
25.00

Memo Item
CONTRIBUTION

C. BASSO, PETER, J., MR.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 3638 CAMDEN COURT

City AUBURN HILLS	State MI	Zip Code 48326-1888
----------------------	-------------	------------------------

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

Name of Employer (for Individual) PETER BASSO ASSOC INC	Occupation (for Individual) ENGINEER
--	---

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
1300.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
10		24		2016

Transaction ID : SA11A.443710

Amount of Each Receipt this Period
500.00

Memo Item
CONTRIBUTION

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 219 OF 4311
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. BATEMAN SR., KEN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 8353 BENNETT DR.
 95212
 City STOCKTON State CA Zip Code 95212-2202
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 230.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 26 / 2016
Transaction ID : SA11A.451331
 Amount of Each Receipt this Period
 30.00
 Memo Item CONTRIBUTION

B. BATEMAN SR., KEN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 8353 BENNETT DR.
 95212
 City STOCKTON State CA Zip Code 95212-2202
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 230.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 31 / 2016
Transaction ID : SA11A.463287
 Amount of Each Receipt this Period
 25.00
 Memo Item CONTRIBUTION

C. BATEMAN SR., KEN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 8353 BENNETT DR.
 95212
 City STOCKTON State CA Zip Code 95212-2202
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 230.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 02 / 2016
Transaction ID : SA11A.469961
 Amount of Each Receipt this Period
 25.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	80.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 220 OF 4311
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. BATEMAN, RUSSELL, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 1102 N 850 E

City BOUNTIFUL	State UT	Zip Code 84010-2665
FEC ID number of contributing federal political committee. C		
Name of Employer (for Individual) NONE		Occupation (for Individual) RETIRED
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 375.00

Date of Receipt
10 / 26 / 2016
Transaction ID : SA11A.451023

Amount of Each Receipt this Period
50.00

Memo Item
CONTRIBUTION

B. BATEMAN, RUSSELL, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 1102 N 850 E

City BOUNTIFUL	State UT	Zip Code 84010-2665
FEC ID number of contributing federal political committee. C		
Name of Employer (for Individual) NONE		Occupation (for Individual) RETIRED
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 375.00

Date of Receipt
11 / 04 / 2016
Transaction ID : SA11A.472594

Amount of Each Receipt this Period
50.00

Memo Item
CONTRIBUTION

C. BATES, DAVID, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 84 RAYMOND ALLARD RD

City SWANSEA	State MA	Zip Code 02777-1529
FEC ID number of contributing federal political committee. C		
Name of Employer (for Individual) A N NUNES AGENCY		Occupation (for Individual) INSURANCE AGENT
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		Aggregate Year-to-Date ▼ 300.00

Date of Receipt
11 / 01 / 2016
Transaction ID : SA11A.462615

Amount of Each Receipt this Period
100.00

Memo Item
CONTRIBUTION

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 221 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. BATES, EARLE, S., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 160 KENDAL DRIVE, APT 214
 APT. 214
 City LEXINGTON State VA Zip Code 24450-1791
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1100.00

Date of Receipt 10 / 20 / 2016
Transaction ID : SA11A.433445
 Amount of Each Receipt this Period 200.00
 Memo Item CONTRIBUTION

B. BATES, EARLE, S., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 160 KENDAL DRIVE, APT 214
 APT. 214
 City LEXINGTON State VA Zip Code 24450-1791
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1100.00

Date of Receipt 10 / 31 / 2016
Transaction ID : SA11A.457298
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

C. BATES, EARLE, S., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 160 KENDAL DRIVE, APT 214
 APT. 214
 City LEXINGTON State VA Zip Code 24450-1791
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1100.00

Date of Receipt 11 / 02 / 2016
Transaction ID : SA11A.465011
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 222 OF 4311
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. BATES, EARLE, S., MR.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 160 KENDAL DRIVE, APT 214
APT. 214

City LEXINGTON State VA Zip Code 24450-1791

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

Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1100.00

Date of Receipt
11 / 02 / 2016
Transaction ID : SA11A.465012

Amount of Each Receipt this Period
100.00

Memo Item CONTRIBUTION

B. BATES, EARLE, S., MR.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 160 KENDAL DRIVE, APT 214
APT. 214

City LEXINGTON State VA Zip Code 24450-1791

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

Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1100.00

Date of Receipt
11 / 17 / 2016
Transaction ID : SA11A.468394

Amount of Each Receipt this Period
50.00

Memo Item CONTRIBUTION

C. BATES, TIM, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 22054 WILLISVILLE RD

City UPPERVILLE State VA Zip Code 20184-3122

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

Name of Employer (for Individual) CALATLANTIC HOMES Occupation (for Individual) DIVISION PRESIDENT

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
205.00

Date of Receipt
10 / 27 / 2016
Transaction ID : SA11A.453515

Amount of Each Receipt this Period
25.00

Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 175.00

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 223 OF 4311
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. BATES, TIM, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 22054 WILLISVILLE RD

City UPPERVILLE	State VA	Zip Code 20184-3122
--------------------	-------------	------------------------

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

Name of Employer (for Individual) CALATLANTIC HOMES	Occupation (for Individual) DIVISION PRESIDENT
--	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
205.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	27	/	2016

Transaction ID : SA11A.453531

Amount of Each Receipt this Period
25.00

Memo Item
CONTRIBUTION

B. BATES, TIM, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 22054 WILLISVILLE RD

City UPPERVILLE	State VA	Zip Code 20184-3122
--------------------	-------------	------------------------

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

Name of Employer (for Individual) CALATLANTIC HOMES	Occupation (for Individual) DIVISION PRESIDENT
--	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
205.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	04	/	2016

Transaction ID : SA11A.470997

Amount of Each Receipt this Period
25.00

Memo Item
CONTRIBUTION

C. BAUER, CATHERINE, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 2453 ALAQUA DR

City LONGWOOD	State FL	Zip Code 32779-3124
------------------	-------------	------------------------

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

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
550.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	26	/	2016

Transaction ID : SA11A.449959

Amount of Each Receipt this Period
100.00

Memo Item
CONTRIBUTION

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 224 OF 4311
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Team Ryan

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
A. BAUER, PAMELA, , ,

Mailing Address **918 FREEBURG AVE**

City BELLEVILLE	State IL	Zip Code 62220-2623
---------------------------	--------------------	-------------------------------

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

Name of Employer (for Individual) EMPIRE COMFORT SUSTEMS	Occupation (for Individual) EMPIRE COMFORT SYSTEMS
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
350.00

Date of Receipt
10 / 26 / 2016

Transaction ID : SA11A.450551

Amount of Each Receipt this Period
250.00

Memo Item
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
B. BAUM, BRADLEY, , ,

Mailing Address **4503 WINDY HOLLOW DR**

City KINGWOOD	State TX	Zip Code 77345-1040
-------------------------	--------------------	-------------------------------

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

Name of Employer (for Individual) KBR	Occupation (for Individual) ACCOUNTANT
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
400.00

Date of Receipt
10 / 31 / 2016

Transaction ID : SA11A.464174

Amount of Each Receipt this Period
100.00

Memo Item
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
C. BAUM, HERBERT, M., ,

Mailing Address **5223 CENTER STREET**

City JUPITER	State FL	Zip Code 33458-4052
------------------------	--------------------	-------------------------------

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

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
--	---

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
300.00

Date of Receipt
11 / 01 / 2016

Transaction ID : SA11A.462707

Amount of Each Receipt this Period
100.00

Memo Item
CONTRIBUTION

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 225 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. BAUM, HERBERT, M., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5223 CENTER STREET
 City JUPITER State FL Zip Code 33458-4052
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 11 / 05 / 2016
Transaction ID : SA11A.478649
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

B. BAUMAN, BRUCE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 25 CHESTNUTST.
 City DEDHAM State MA Zip Code 02026-4105
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1200.00

Date of Receipt 11 / 01 / 2016
Transaction ID : SA11A.462545
 Amount of Each Receipt this Period 500.00
 Memo Item CONTRIBUTION

C. BAVENDER, JOHN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2300 GRANBURY DR.
 City MESQUITE State TX Zip Code 75150-7818
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 287.00

Date of Receipt 11 / 04 / 2016
Transaction ID : SA11A.474021
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	650.00
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 226 OF 4311
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Team Ryan

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

Mailing Address 11100 SANTA MONICA BLVD STE 1200

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

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

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
15800.00

Date of Receipt
11 / 01 / 2016
Transaction ID : SA11A.461888

Amount of Each Receipt this Period
5000.00

Memo Item
CONTRIBUTION

B. BAYER, IRENE, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 31 NANCY DRIVE

City WESTBURY	State NY	Zip Code 11590-1117
------------------	-------------	------------------------

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

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
225.00

Date of Receipt
11 / 02 / 2016
Transaction ID : SA11A.469969

Amount of Each Receipt this Period
50.00

Memo Item
CONTRIBUTION

C. BAYER, IRENE, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 31 NANCY DRIVE

City WESTBURY	State NY	Zip Code 11590-1117
------------------	-------------	------------------------

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

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
225.00

Date of Receipt
11 / 02 / 2016
Transaction ID : SA11A.469971

Amount of Each Receipt this Period
50.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	5100.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 227 OF 4311
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. BEADLES, VICTOR, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address P. O. BOX 3457
11 CHEROKEE ROAD

City MOULTRIE State GA Zip Code 31776-3457

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

Name of Employer (for Individual) CANFOR, BEADLES LUMBER Occupation (for Individual) MANAGEMENT

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 1200.00

Date of Receipt 10 / 21 / 2016
Transaction ID : SA11A.444448

Amount of Each Receipt this Period 250.00

Memo Item CONTRIBUTION

B. BEADLES, VICTOR, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address P. O. BOX 3457
11 CHEROKEE ROAD

City MOULTRIE State GA Zip Code 31776-3457

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

Name of Employer (for Individual) CANFOR, BEADLES LUMBER Occupation (for Individual) MANAGEMENT

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 1200.00

Date of Receipt 10 / 21 / 2016
Transaction ID : SA11A.444449

Amount of Each Receipt this Period 250.00

Memo Item CONTRIBUTION

C. BEAHM, ROBERT, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 12 RIVERMEAD ROAD

City PETERBOROUGH State NH Zip Code 03458-1701

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

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

Receipt For: Primary General Other (specify)

Aggregate Year-to-Date ▼ 250.00

Date of Receipt 11 / 02 / 2016
Transaction ID : SA11A.466877

Amount of Each Receipt this Period 50.00

Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 550.00

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 228 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. BEAHM, ROBERT, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 12 RIVERMEAD ROAD
 City PETERBOROUGH State NH Zip Code 03458-1701
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt
 11 / 07 / 2016
Transaction ID : SA11A.480498
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

B. BEAHM, ROBERT, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 12 RIVERMEAD ROAD
 City PETERBOROUGH State NH Zip Code 03458-1701
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt
 11 / 07 / 2016
Transaction ID : SA11A.480525
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

C. BEAHM, ROBERT, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 12 RIVERMEAD ROAD
 City PETERBOROUGH State NH Zip Code 03458-1701
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt
 11 / 07 / 2016
Transaction ID : SA11A.480528
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 229 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. BEAHRS, JOHN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3006 NE BRYCE STREET
 City PORTLAND State OR Zip Code 97212-1718
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 03 / 2016
Transaction ID : SA11A.465384
 Amount of Each Receipt this Period
 250.00
 Memo Item
 CONTRIBUTION

B. BEAL, SANDRA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3245 S ATLANTIC AVE, 1003
 City DAYTONA BEACH SHOR State FL Zip Code 32118-6298
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 850.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 26 / 2016
Transaction ID : SA11A.451072
 Amount of Each Receipt this Period
 50.00
 Memo Item
 CONTRIBUTION

C. BEAL, SANDRA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3245 S ATLANTIC AVE, 1003
 City DAYTONA BEACH SHOR State FL Zip Code 32118-6298
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 850.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 04 / 2016
Transaction ID : SA11A.472994
 Amount of Each Receipt this Period
 50.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	350.00
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 230 OF 4311
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. BEALL, ERNEST, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address P. O BOX 172

City CONCORD	State NC	Zip Code 28026-0172
FEC ID number of contributing federal political committee. C		
Name of Employer (for Individual) NONE		Occupation (for Individual) RETIRED
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 325.00	

Date of Receipt
10 / 24 / 2016
Transaction ID : **SA11A.445811**

Amount of Each Receipt this Period
25.00

Memo Item CONTRIBUTION

B. BEALL, JAMES, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 100 ARROWHEAD PASS

City WIMBERLEY	State TX	Zip Code 78676-6342
FEC ID number of contributing federal political committee. C		
Name of Employer (for Individual) NONE		Occupation (for Individual) RETIRED
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 635.00	

Date of Receipt
10 / 21 / 2016
Transaction ID : **SA11A.444239**

Amount of Each Receipt this Period
50.00

Memo Item CONTRIBUTION

C. BEALL, JAMES, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 100 ARROWHEAD PASS

City WIMBERLEY	State TX	Zip Code 78676-6342
FEC ID number of contributing federal political committee. C		
Name of Employer (for Individual) NONE		Occupation (for Individual) RETIRED
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Aggregate Year-to-Date ▼ 635.00	

Date of Receipt
10 / 25 / 2016
Transaction ID : **SA11A.448358**

Amount of Each Receipt this Period
50.00

Memo Item CONTRIBUTION

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 231 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. BEALL, JAMES, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 100 ARROWHEAD PASS
 City WIMBERLEY State TX Zip Code 78676-6342
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 635.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 27 / 2016
Transaction ID : SA11A.453548
 Amount of Each Receipt this Period
 50.00
 Memo Item
 CONTRIBUTION

B. BEALL, JAMES, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 100 ARROWHEAD PASS
 City WIMBERLEY State TX Zip Code 78676-6342
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 635.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 01 / 2016
Transaction ID : SA11A.462436
 Amount of Each Receipt this Period
 50.00
 Memo Item
 CONTRIBUTION

C. BEALL, JAMES, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 100 ARROWHEAD PASS
 City WIMBERLEY State TX Zip Code 78676-6342
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 635.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 07 / 2016
Transaction ID : SA11A.480264
 Amount of Each Receipt this Period
 50.00
 Memo Item
 CONTRIBUTION

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 232 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
Team Ryan

A. BEAN, JEROME, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3940 OAKLEAF DR
 City ZIONSVILLE State IN Zip Code 46077-9293
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 31 / 2016
Transaction ID : SA11A.458923
 Amount of Each Receipt this Period
 250.00
 Memo Item
 CONTRIBUTION

B. BEARD, HERSCHEL, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address P. O. BOX 50
 City MADILL State OK Zip Code 73446-0050
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) MARSHALL COUNTY ABSTRACT CO. Occupation (for Individual) ABTRACTOR
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 30 / 2016
Transaction ID : SA11A.460300
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION

C. BEARD, HERSCHEL, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address P. O. BOX 50
 City MADILL State OK Zip Code 73446-0050
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) MARSHALL COUNTY ABSTRACT CO. Occupation (for Individual) ABSTRACTOR
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 04 / 2016
Transaction ID : SA11A.471477
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 233 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
Team Ryan

A. BEARD, JOAN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 503 FOREST CIRCLE
 City TROY State AL Zip Code 36081-1626
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1600.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 25 / 2016
Transaction ID : SA11A.448834
 Amount of Each Receipt this Period
 250.00
 Memo Item
 CONTRIBUTION

B. BEARD, JOAN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 503 FOREST CIRCLE
 City TROY State AL Zip Code 36081-1626
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1600.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 04 / 2016
Transaction ID : SA11A.471586
 Amount of Each Receipt this Period
 250.00
 Memo Item
 CONTRIBUTION

C. BEARDSLEE, JOSEPHINE, S., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 382 PROVENCAL ROAD
 City GROSSE POINTE FARM State MI Zip Code 48236-2959
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) HOMEMAKER Occupation (for Individual) HOMEMAKER
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 2700.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 26 / 2016
Transaction ID : SA11A.447711
 Amount of Each Receipt this Period
 2700.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	3200.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 234 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. BEARDEN, MARY, E., MRS.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 7277 ABERDEEN PARKWAY EAST
 City TULSA State OK Zip Code 74132-2139
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 325.00

Date of Receipt 10 / 28 / 2016
Transaction ID : SA11A.454741
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

B. BEARD, PAUL, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO BOX 1564
 City PORT ARTHUR State TX Zip Code 77641-1564
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) INFORMATION REQUESTED PER BEST EFFORTS Occupation (for Individual) INFORMATION REQUESTED PER BE
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 10 / 20 / 2016
Transaction ID : SA11A.433464
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

C. BEARDEN, WILLIAM, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 25 MADISON AVENUE
 City CHERRY HILL State NJ Zip Code 08002-3523
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) STOCKTON UNIVERSITY Occupation (for Individual) LIBRARIAN
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 11 / 01 / 2016
Transaction ID : SA11A.461556
 Amount of Each Receipt this Period 500.00
 Memo Item CONTRIBUTION

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 235 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. BEAUCHMAN, MIKE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3420 HOUND PLACE
 City LAKE HAVASU CITY State AZ Zip Code 86404-3434
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) REAL ESTATE
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 300.00

Date of Receipt **10 / 28 / 2016**
Transaction ID : SA11A.455683
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

B. BEAUCHMAN, MIKE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3420 HOUND PLACE
 City LAKE HAVASU CITY State AZ Zip Code 86404-3434
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) REAL ESTATE
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 300.00

Date of Receipt **11 / 02 / 2016**
Transaction ID : SA11A.466292
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

C. BECHT, BALAZS, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 679 CARPATH PL
 City SIMI VALLEY State CA Zip Code 93065-6675
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 275.00

Date of Receipt **10 / 22 / 2016**
Transaction ID : SA11A.446891
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 236 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
Team Ryan

A. BECHT, BALAZS, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 679 CARTPATH PL
 City SIMI VALLEY State CA Zip Code 93065-6675
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 275.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 04 / 2016
Transaction ID : SA11A.472204
 Amount of Each Receipt this Period
 25.00
 Memo Item
 CONTRIBUTION

B. BECK, JANE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1920 MANOR CIRCLE SE
 City WINTER HAVEN State FL Zip Code 33880-4722
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 275.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 28 / 2016
Transaction ID : SA11A.455325
 Amount of Each Receipt this Period
 30.00
 Memo Item
 CONTRIBUTION

C. BECK, JANE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1920 MANOR CIRCLE SE
 City WINTER HAVEN State FL Zip Code 33880-4722
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 275.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 28 / 2016
Transaction ID : SA11A.455330
 Amount of Each Receipt this Period
 25.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	80.00
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 237 OF 4311
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. BECK, JANE, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1920 MANOR CIRCLE SE

City WINTER HAVEN	State FL	Zip Code 33880-4722
----------------------	-------------	------------------------

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

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
275.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		28		2016

Transaction ID : SA11A.455344

Amount of Each Receipt this Period
30.00

Memo Item
CONTRIBUTION

B. BECK, JANE, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1920 MANOR CIRCLE SE

City WINTER HAVEN	State FL	Zip Code 33880-4722
----------------------	-------------	------------------------

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

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
275.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11		02		2016

Transaction ID : SA11A.466271

Amount of Each Receipt this Period
50.00

Memo Item
CONTRIBUTION

C. BECK, ROBERT, N., MR.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address PO BOX 467
LITTLE CREEK FARM

City THOMPSONS STATION	State TN	Zip Code 37179-0467
---------------------------	-------------	------------------------

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

Name of Employer (for Individual) PREMIERE PROPERTIES GROUP	Occupation (for Individual) REALTOR/INVESTOR
--	---

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
450.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		29		2016

Transaction ID : SA11A.460729

Amount of Each Receipt this Period
25.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	105.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 238 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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

A. BECK, ROBERT, N., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO BOX 467
 LITTLE CREEK FARM
 City THOMPSONS STATION State TN Zip Code 37179-0467
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) PREMIERE PROPERTIES GROUP Occupation (for Individual) REALTOR/INVESTOR
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 450.00

Date of Receipt 10 / 29 / 2016
Transaction ID : SA11A.461242
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

B. BECK, ROBERT, N., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO BOX 467
 LITTLE CREEK FARM
 City THOMPSONS STATION State TN Zip Code 37179-0467
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) PREMIERE PROPERTIES GROUP Occupation (for Individual) REALTOR/INVESTOR
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 450.00

Date of Receipt 10 / 29 / 2016
Transaction ID : SA11A.461243
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

C. BECK, ROBERT, N., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO BOX 467
 LITTLE CREEK FARM
 City THOMPSONS STATION State TN Zip Code 37179-0467
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) PREMIERE PROPERTIES GROUP Occupation (for Individual) REALTOR/INVESTOR
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 450.00

Date of Receipt 10 / 31 / 2016
Transaction ID : SA11A.463408
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 75.00
TOTAL This Period (last page this line number only)..... ▶

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 239 OF 4311
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

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

Mailing Address PO BOX 467
LITTLE CREEK FARM

City THOMPSONS STATION State TN Zip Code 37179-0467

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

Name of Employer (for Individual) PREMIERE PROPERTIES GROUP Occupation (for Individual) REALTOR/INVESTOR

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 450.00

Date of Receipt 10 / 31 / 2016
Transaction ID : SA11A.463409

Amount of Each Receipt this Period 25.00

Memo Item CONTRIBUTION

B. BECK, ROBERT, N., MR.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address PO BOX 467
LITTLE CREEK FARM

City THOMPSONS STATION State TN Zip Code 37179-0467

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

Name of Employer (for Individual) PREMIERE PROPERTIES GROUP Occupation (for Individual) REALTOR/INVESTOR

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 450.00

Date of Receipt 11 / 05 / 2016
Transaction ID : SA11A.478734

Amount of Each Receipt this Period 25.00

Memo Item CONTRIBUTION

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

Mailing Address 4017 ALMAHURST DR

City SPRINGFIELD State IL Zip Code 62712-8715

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

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

Receipt For: Primary General Other (specify)

Aggregate Year-to-Date ▼ 250.00

Date of Receipt 11 / 04 / 2016
Transaction ID : SA11A.472922

Amount of Each Receipt this Period 100.00

Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶ 150.00

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 240 OF 4311
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. BECKER, LINDA, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 2020 SAXONIA LANE

City KALAMAZOO	State MI	Zip Code 49008-2257
-------------------	-------------	------------------------

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

Name of Employer (for Individual) SELF EMPLOYED	Occupation (for Individual) INTERIOR DESIGN
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
225.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
11		04		2016

Transaction ID : SA11A.472110

Amount of Each Receipt this Period
25.00

Memo Item
CONTRIBUTION

B. BECKER, RALPH, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 5394 LAKE RIDGE DR.

City BRIGHTON	State MI	Zip Code 48116-7736
------------------	-------------	------------------------

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

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
300.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
10		21		2016

Transaction ID : SA11A.444117

Amount of Each Receipt this Period
100.00

Memo Item
CONTRIBUTION

C. BECKER, RALPH, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 5394 LAKE RIDGE DR.

City BRIGHTON	State MI	Zip Code 48116-7736
------------------	-------------	------------------------

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

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
300.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
10		21		2016

Transaction ID : SA11A.444121

Amount of Each Receipt this Period
100.00

Memo Item
CONTRIBUTION

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 241 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. BECKWITH, ROBERT, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1680 VALLEY WOODS DRIVE
 City SEVIERVILLE State TN Zip Code 37862-7206
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 260.00

Date of Receipt 10 / 21 / 2016
Transaction ID : SA11A.444623
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

B. BECKWITH, ROBERT, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1680 VALLEY WOODS DRIVE
 City SEVIERVILLE State TN Zip Code 37862-7206
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 260.00

Date of Receipt 10 / 25 / 2016
Transaction ID : SA11A.448559
 Amount of Each Receipt this Period 30.00
 Memo Item CONTRIBUTION

C. BECKWITH, ROBERT, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1680 VALLEY WOODS DRIVE
 City SEVIERVILLE State TN Zip Code 37862-7206
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 260.00

Date of Receipt 10 / 25 / 2016
Transaction ID : SA11A.448561
 Amount of Each Receipt this Period 30.00
 Memo Item CONTRIBUTION

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 242 OF 4311
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
Team Ryan

A. BEDESCHI, SILVIO, M., MR.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 3107 SUNSET BOULEVARD

City STEUBENVILLE	State OH	Zip Code 43952-2335
FEC ID number of contributing federal political committee. C		
Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 4700.00	

Date of Receipt
11 / 02 / 2016
Transaction ID : SA11A.465069

Amount of Each Receipt this Period
1000.00

Memo Item CONTRIBUTION

B. BEDNARSKI, IRENE, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 490 PALMDALE DR

City OLDSMAR	State FL	Zip Code 34677-2068
FEC ID number of contributing federal political committee. C		
Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00	

Date of Receipt
10 / 26 / 2016
Transaction ID : SA11A.451105

Amount of Each Receipt this Period
100.00

Memo Item CONTRIBUTION

C. BEDNARSKI, IRENE, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 490 PALMDALE DR

City OLDSMAR	State FL	Zip Code 34677-2068
FEC ID number of contributing federal political committee. C		
Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Aggregate Year-to-Date ▼ 300.00	

Date of Receipt
11 / 04 / 2016
Transaction ID : SA11A.472360

Amount of Each Receipt this Period
100.00

Memo Item CONTRIBUTION

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 243 OF 4311
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Team Ryan

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

Mailing Address 1258 ALLERTON ROAD

City WEST CHESTER	State PA	Zip Code 19382-2025
----------------------	-------------	------------------------

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

Name of Employer (for Individual) THE BEDWELL COMPANY	Occupation (for Individual) GENERAL CONTRACTOR
--	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
950.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	29	/	2016

Transaction ID : SA11A.461100

Amount of Each Receipt this Period
100.00

Memo Item
CONTRIBUTION

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

Mailing Address 1258 ALLERTON ROAD

City WEST CHESTER	State PA	Zip Code 19382-2025
----------------------	-------------	------------------------

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

Name of Employer (for Individual) THE BEDWELL COMPANY	Occupation (for Individual) GENERAL CONTRACTOR
--	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
950.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	04	/	2016

Transaction ID : SA11A.470991

Amount of Each Receipt this Period
100.00

Memo Item
CONTRIBUTION

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

Mailing Address 5100 JOHN D RYAN
522

City SAN ANTONIO	State TX	Zip Code 78245-3527
---------------------	-------------	------------------------

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

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
2129.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	20	/	2016

Transaction ID : SA11A.441994

Amount of Each Receipt this Period
25.00

Memo Item
CONTRIBUTION

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 244 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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

A. BEERS, CLAIRE, N., MS.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5100 JOHN D RYAN
 522
 City SAN ANTONIO State TX Zip Code 78245-3527
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 2129.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 22 / 2016
Transaction ID : SA11A.446625
 Amount of Each Receipt this Period
 25.00
 Memo Item
 CONTRIBUTION

B. BEERS, CLAIRE, N., MS.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5100 JOHN D RYAN
 522
 City SAN ANTONIO State TX Zip Code 78245-3527
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 2129.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 21 / 2016
Transaction ID : SA11A.447158
 Amount of Each Receipt this Period
 25.00
 Memo Item
 CONTRIBUTION

C. BEERS, CLAIRE, N., MS.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5100 JOHN D RYAN
 522
 City SAN ANTONIO State TX Zip Code 78245-3527
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 2129.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 24 / 2016
Transaction ID : SA11A.449270
 Amount of Each Receipt this Period
 25.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	75.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 245 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. BEERS, CLAIRE, N., MS.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5100 JOHN D RYAN
 522
 City SAN ANTONIO State TX Zip Code 78245-3527
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 2129.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 24 / 2016
Transaction ID : SA11A.449276
 Amount of Each Receipt this Period
 25.00
 Memo Item
 CONTRIBUTION

B. BEERS, CLAIRE, N., MS.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5100 JOHN D RYAN
 522
 City SAN ANTONIO State TX Zip Code 78245-3527
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 2129.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 26 / 2016
Transaction ID : SA11A.450361
 Amount of Each Receipt this Period
 25.00
 Memo Item
 CONTRIBUTION

C. BEERS, CLAIRE, N., MS.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5100 JOHN D RYAN
 522
 City SAN ANTONIO State TX Zip Code 78245-3527
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 2129.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 26 / 2016
Transaction ID : SA11A.450430
 Amount of Each Receipt this Period
 30.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 80.00
TOTAL This Period (last page this line number only)..... ▶

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 246 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. BEERS, CLAIRE, N., MS.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5100 JOHN D RYAN
 522
 City SAN ANTONIO State TX Zip Code 78245-3527
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 2129.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 28 / 2016
Transaction ID : SA11A.456044
 Amount of Each Receipt this Period
 25.00
 Memo Item
 CONTRIBUTION

B. BEERS, CLAIRE, N., MS.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5100 JOHN D RYAN
 522
 City SAN ANTONIO State TX Zip Code 78245-3527
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 2129.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 27 / 2016
Transaction ID : SA11A.456744
 Amount of Each Receipt this Period
 25.00
 Memo Item
 CONTRIBUTION

C. BEERS, CLAIRE, N., MS.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5100 JOHN D RYAN
 522
 City SAN ANTONIO State TX Zip Code 78245-3527
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 2129.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 29 / 2016
Transaction ID : SA11A.460351
 Amount of Each Receipt this Period
 25.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	75.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 247 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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

A. BEERS, CLAIRE, N., MS.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5100 JOHN D RYAN
 522
 City SAN ANTONIO State TX Zip Code 78245-3527
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 2129.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 31 / 2016
Transaction ID : SA11A.463921
 Amount of Each Receipt this Period
 30.00
 Memo Item
 CONTRIBUTION

B. BEERS, CLAIRE, N., MS.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5100 JOHN D RYAN
 522
 City SAN ANTONIO State TX Zip Code 78245-3527
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 2129.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 31 / 2016
Transaction ID : SA11A.463976
 Amount of Each Receipt this Period
 25.00
 Memo Item
 CONTRIBUTION

C. BEERS, CLAIRE, N., MS.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5100 JOHN D RYAN
 522
 City SAN ANTONIO State TX Zip Code 78245-3527
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 2129.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 02 / 2016
Transaction ID : SA11A.466230
 Amount of Each Receipt this Period
 25.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	80.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 248 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. BEERS, CLAIRE, N., MS.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5100 JOHN D RYAN
 522
 City SAN ANTONIO State TX Zip Code 78245-3527
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 2129.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 07 / 2016
Transaction ID : SA11A.467902
 Amount of Each Receipt this Period
 50.00
 Memo Item
 CONTRIBUTION

B. BEERS, CLAIRE, N., MS.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5100 JOHN D RYAN
 522
 City SAN ANTONIO State TX Zip Code 78245-3527
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 2129.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 08 / 2016
Transaction ID : SA11A.468022
 Amount of Each Receipt this Period
 50.00
 Memo Item
 CONTRIBUTION

C. BEERS, CLAIRE, N., MS.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5100 JOHN D RYAN
 522
 City SAN ANTONIO State TX Zip Code 78245-3527
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 2129.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 04 / 2016
Transaction ID : SA11A.471203
 Amount of Each Receipt this Period
 25.00
 Memo Item
 CONTRIBUTION

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 249 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. BEERS, CLAIRE, N., MS.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5100 JOHN D RYAN
 522
 City SAN ANTONIO State TX Zip Code 78245-3527
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 2129.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 04 / 2016
Transaction ID : SA11A.473160
 Amount of Each Receipt this Period
 25.00
 Memo Item
 CONTRIBUTION

B. BEERS, CLAIRE, N., MS.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5100 JOHN D RYAN
 522
 City SAN ANTONIO State TX Zip Code 78245-3527
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 2129.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 07 / 2016
Transaction ID : SA11A.474767
 Amount of Each Receipt this Period
 25.00
 Memo Item
 CONTRIBUTION

C. BEERS, CLAIRE, N., MS.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5100 JOHN D RYAN
 522
 City SAN ANTONIO State TX Zip Code 78245-3527
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 2129.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 08 / 2016
Transaction ID : SA11A.479697
 Amount of Each Receipt this Period
 25.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	75.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 250 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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

A. BEERS, ROYCE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2122 S LAKE LEELANAU DR
 City LAKE LEELANAU State MI Zip Code 49653-9453
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 350.00

Date of Receipt 10 / 26 / 2016
Transaction ID : SA11A.449982
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

B. BEGEMANN, FRANK, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2572 WATERCREST DR.
 City CARSON CITY State NV Zip Code 89703-8434
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 430.00

Date of Receipt 10 / 24 / 2016
Transaction ID : SA11A.445906
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

C. BEGEMANN, FRANK, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2572 WATERCREST DR.
 City CARSON CITY State NV Zip Code 89703-8434
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 430.00

Date of Receipt 11 / 01 / 2016
Transaction ID : SA11A.463021
 Amount of Each Receipt this Period 30.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	180.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 251 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. BEGEMANN, FRANK, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2572 WATERCREST DR.
 City CARSON CITY State NV Zip Code 89703-8434
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 430.00

Date of Receipt 11 / 04 / 2016
Transaction ID : SA11A.473178
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

B. BEHM, LINDA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 650 ARBOR AVE
 City WHEATON State IL Zip Code 60189-6323
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 10 / 26 / 2016
Transaction ID : SA11A.454458
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

C. BEHM, LINDA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 650 ARBOR AVE
 City WHEATON State IL Zip Code 60189-6323
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 11 / 02 / 2016
Transaction ID : SA11A.469875
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 252 OF 4311		
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14	<input type="checkbox"/> 11c <input type="checkbox"/> 15	<input type="checkbox"/> 12 <input type="checkbox"/> 16

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NAME OF COMMITTEE (In Full)
Team Ryan

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
A. BEHM, LINDA, , ,

Mailing Address **650 ARBOR AVE**

City WHEATON	State IL	Zip Code 60189-6323
------------------------	--------------------	-------------------------------

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

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
--	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **300.00**

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	02	/	2016

Transaction ID : SA11A.469878

Amount of Each Receipt this Period

100.00

Memo Item
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
B. BELL, CATHERINE, , MS.,

Mailing Address **11812 N. 110TH ST.**

City SCOTTSDALE	State AZ	Zip Code 85259-3045
---------------------------	--------------------	-------------------------------

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

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
--	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **400.00**

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	28	/	2016

Transaction ID : SA11A.455879

Amount of Each Receipt this Period

100.00

Memo Item
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
C. BELL, CATHERINE, , MS.,

Mailing Address **11812 N. 110TH ST.**

City SCOTTSDALE	State AZ	Zip Code 85259-3045
---------------------------	--------------------	-------------------------------

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

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
--	---

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼ **400.00**

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	02	/	2016

Transaction ID : SA11A.465876

Amount of Each Receipt this Period

100.00

Memo Item
CONTRIBUTION

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 253 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. BELL, COLIN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3833 CARUTH BLVD.
 City DALLAS State TX Zip Code 75225-5216
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) OSANT Occupation (for Individual) ORAL SURGEON
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 10 / 30 / 2016
Transaction ID : SA11A.459610
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

B. BELL, MARTHA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 113 LEXINGTON DRIVE
 City SILVER SPRING State MD Zip Code 20901-2546
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 750.00

Date of Receipt 10 / 23 / 2016
Transaction ID : SA11A.446595
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

C. BELL, MARTHA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 113 LEXINGTON DRIVE
 City SILVER SPRING State MD Zip Code 20901-2546
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 750.00

Date of Receipt 11 / 07 / 2016
Transaction ID : SA11A.476148
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 254 OF 4311
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	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. BELL, MARTHA, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 113 LEXINGTON DRIVE

City SILVER SPRING	State MD	Zip Code 20901-2546
-----------------------	-------------	------------------------

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

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
750.00

Date of Receipt
MM / DD / YYYY
11 / 07 / 2016

Transaction ID : SA11A.476161

Amount of Each Receipt this Period
100.00

Memo Item CONTRIBUTION

B. BELLER, RICHARD, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 2001 RAVENSTONE LOOP

City COLLEGE STATION	State TX	Zip Code 77845-4871
-------------------------	-------------	------------------------

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

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
275.00

Date of Receipt
MM / DD / YYYY
11 / 04 / 2016

Transaction ID : SA11A.470424

Amount of Each Receipt this Period
25.00

Memo Item CONTRIBUTION

C. BELLER, RICHARD, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 2001 RAVENSTONE LOOP

City COLLEGE STATION	State TX	Zip Code 77845-4871
-------------------------	-------------	------------------------

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

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
275.00

Date of Receipt
MM / DD / YYYY
11 / 04 / 2016

Transaction ID : SA11A.470431

Amount of Each Receipt this Period
25.00

Memo Item CONTRIBUTION

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 255 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. BELT, EDWARD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 116 ALPINE DRIVE
 City AMHERST State MA Zip Code 01002-1617
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 750.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 01 / 2016
Transaction ID : SA11A.462317
 Amount of Each Receipt this Period
 250.00
 Memo Item
 CONTRIBUTION

B. BELT, EDWARD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 116 ALPINE DRIVE
 City AMHERST State MA Zip Code 01002-1617
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 750.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 01 / 2016
Transaction ID : SA11A.462322
 Amount of Each Receipt this Period
 250.00
 Memo Item
 CONTRIBUTION

C. BELT, EDWARD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 116 ALPINE DRIVE
 City AMHERST State MA Zip Code 01002-1617
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 750.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 02 / 2016
Transaction ID : SA11A.470216
 Amount of Each Receipt this Period
 250.00
 Memo Item
 CONTRIBUTION

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 256 OF 4311
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	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. BELT, JOHN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 43 TOWN PATH
 City GLEN COVE State NY Zip Code 11542-2728
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) REAL ESTATE
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1100.00

Date of Receipt 10 / 29 / 2016
Transaction ID : SA11A.460570
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

B. BEMIS, ROYCE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4501 BAINVIEW DR.
 City MINT HILL State NC Zip Code 28227-7659
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 350.00

Date of Receipt 10 / 30 / 2016
Transaction ID : SA11A.460266
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

C. BEMIS, ROYCE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4501 BAINVIEW DR.
 City MINT HILL State NC Zip Code 28227-7659
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 350.00

Date of Receipt 11 / 04 / 2016
Transaction ID : SA11A.471057
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	350.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 257 OF 4311
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	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
BENDER, ORRIS, , ,

Mailing Address **115 E FLAMINGO DRIVE**

City CLARKSVILLE	State IN	Zip Code 47129-1750
----------------------------	--------------------	-------------------------------

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

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
--	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **285.00**

Date of Receipt
10 / 25 / 2016

Transaction ID : SA11A.452012

Amount of Each Receipt this Period
30.00

Memo Item CONTRIBUTION

B. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
BENDER, ORRIS, , ,

Mailing Address **115 E FLAMINGO DRIVE**

City CLARKSVILLE	State IN	Zip Code 47129-1750
----------------------------	--------------------	-------------------------------

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

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
--	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **285.00**

Date of Receipt
11 / 04 / 2016

Transaction ID : SA11A.470888

Amount of Each Receipt this Period
30.00

Memo Item CONTRIBUTION

C. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
BENEDUM , MICHAEL, , ,

Mailing Address **P O BOX 6278**

City SAN ANTONIO	State TX	Zip Code 78209-0278
----------------------------	--------------------	-------------------------------

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

Name of Employer (for Individual) MIKE BENEDUM OIL AND GAS	Occupation (for Individual) OIL AND GAS PRODUCTION
--	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼ **475.00**

Date of Receipt
10 / 22 / 2016

Transaction ID : SA11A.446619

Amount of Each Receipt this Period
175.00

Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	235.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 258 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. BENGARD, TERRY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address P.O. BOX 80090
 City SALINAS State CA Zip Code 93912-0090
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 10 / 31 / 2016
Transaction ID : SA11A.458201
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

B. BENGDS, ERIK, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 9274 E. SHONTO LN
 City TUCSON State AZ Zip Code 85749-9628
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 275.00

Date of Receipt 10 / 26 / 2016
Transaction ID : SA11A.451048
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

C. BENGDS, ERIK, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 9274 E. SHONTO LN
 City TUCSON State AZ Zip Code 85749-9628
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 275.00

Date of Receipt 11 / 04 / 2016
Transaction ID : SA11A.470788
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 259 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. BENGTON, BRUCE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2 GAELSONG LANE
 City WYOMISSING State PA Zip Code 19610-3120
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 950.00

Date of Receipt 10 / 24 / 2016
Transaction ID : SA11A.445709
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

B. BENGTON, BRUCE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2 GAELSONG LANE
 City WYOMISSING State PA Zip Code 19610-3120
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 950.00

Date of Receipt 10 / 24 / 2016
Transaction ID : SA11A.445714
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

C. BENGTON, BRUCE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2 GAELSONG LANE
 City WYOMISSING State PA Zip Code 19610-3120
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 950.00

Date of Receipt 10 / 23 / 2016
Transaction ID : SA11A.446427
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 260 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. BENGTON, BRUCE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2 GAELSONG LANE
 City WYOMISSING State PA Zip Code 19610-3120
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 950.00

Date of Receipt 10 / 26 / 2016
Transaction ID : SA11A.450537
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

B. BENGTON, BRUCE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2 GAELSONG LANE
 City WYOMISSING State PA Zip Code 19610-3120
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 950.00

Date of Receipt 10 / 26 / 2016
Transaction ID : SA11A.450548
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

C. BENGTON, BRUCE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2 GAELSONG LANE
 City WYOMISSING State PA Zip Code 19610-3120
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 950.00

Date of Receipt 11 / 01 / 2016
Transaction ID : SA11A.462435
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 261 OF 4311
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NAME OF COMMITTEE (In Full)
Team Ryan

A. BENGTON, BRUCE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2 GAELSONG LANE
 City WYOMISSING State PA Zip Code 19610-3120
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 950.00

Date of Receipt 10 / 31 / 2016
Transaction ID : SA11A.464301
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

B. BENGTON, BRUCE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2 GAELSONG LANE
 City WYOMISSING State PA Zip Code 19610-3120
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 950.00

Date of Receipt 11 / 02 / 2016
Transaction ID : SA11A.469873
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

C. BENGTON, BRUCE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2 GAELSONG LANE
 City WYOMISSING State PA Zip Code 19610-3120
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 950.00

Date of Receipt 11 / 04 / 2016
Transaction ID : SA11A.470402
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 262 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. BENGTON, BRUCE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2 GAELSONG LANE
 City WYOMISSING State PA Zip Code 19610-3120
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 950.00

Date of Receipt 11 / 07 / 2016
Transaction ID : SA11A.476113
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

B. BENGTON, BRUCE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2 GAELSONG LANE
 City WYOMISSING State PA Zip Code 19610-3120
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 950.00

Date of Receipt 11 / 05 / 2016
Transaction ID : SA11A.478804
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

C. BENNETT, ONDINA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 605 OCEAN DRIVE
 City KEY BISCAVNE State FL Zip Code 33149-2323
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 11 / 04 / 2016
Transaction ID : SA11A.471596
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 263 OF 4311
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. BENNETT, ONDINA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 605 OCEAN DRIVE
 City KEY BISCAWAYNE State FL Zip Code 33149-2323
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 07 / 2016
Transaction ID : SA11A.480575
 Amount of Each Receipt this Period
 50.00
 Memo Item
 CONTRIBUTION

B. BENNETT, REED, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5188 AVENIDA DE LA PLATA
 City OCEANSIDE State CA Zip Code 92057-8022
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 315.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 05 / 2016
Transaction ID : SA11A.478992
 Amount of Each Receipt this Period
 25.00
 Memo Item
 CONTRIBUTION

C. BENNETT, ROBERT, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 7705 MEADOWLARK LANE
 1
 City WILMINGTON State NC Zip Code 28411-7559
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 700.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 25 / 2016
Transaction ID : SA11A.448526
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 175.00
TOTAL This Period (last page this line number only)..... ▶

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 264 OF 4311
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. BENNISON, WILLIAM, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 68 PEREGRINE CROSSING
 City SAVANNAH State GA Zip Code 31411-2897
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 10 / 29 / 2016
Transaction ID : SA11A.460763
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

B. BENNISON, WILLIAM, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 68 PEREGRINE CROSSING
 City SAVANNAH State GA Zip Code 31411-2897
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 10 / 29 / 2016
Transaction ID : SA11A.460764
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

C. BENNY, BENOY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1010 WAVECREST COURT
 City RICHMOND State TX Zip Code 77469-4298
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) THE SPINE AND SPORTS CENTER Occupation (for Individual) PHYSICIAN
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 11 / 04 / 2016
Transaction ID : SA11A.479386
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 265 OF 4311
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. BENNY, BENYO, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1010 WAVECREST COURT

City RICHMOND	State TX	Zip Code 77469-4298
------------------	-------------	------------------------

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

Name of Employer (for Individual) THE SPINE AND SPORTS CENTER	Occupation (for Individual) PHYSICIAN
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
300.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	04	/	2016

Transaction ID : SA11A.479389

Amount of Each Receipt this Period
100.00

Memo Item CONTRIBUTION

B. BENSON, BRIEN, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 11485 HERITAGE COMMONS WAY

City RESTON	State VA	Zip Code 20194-1029
----------------	-------------	------------------------

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

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
400.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	20	/	2016

Transaction ID : SA11A.442091

Amount of Each Receipt this Period
250.00

Memo Item CONTRIBUTION

C. BENSON, DALE, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 6416 SW LOOP DR

City PORTLAND	State OR	Zip Code 97221-3385
------------------	-------------	------------------------

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

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
1984.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	25	/	2016

Transaction ID : SA11A.449102

Amount of Each Receipt this Period
50.00

Memo Item CONTRIBUTION

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 266 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. BENSON, DALE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 6416 SW LOOP DR
 City PORTLAND State OR Zip Code 97221-3385
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1984.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 26 / 2016
Transaction ID : SA11A.451403
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION

B. BENSON, DALE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 6416 SW LOOP DR
 City PORTLAND State OR Zip Code 97221-3385
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1984.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 30 / 2016
Transaction ID : SA11A.459386
 Amount of Each Receipt this Period
 50.00
 Memo Item
 CONTRIBUTION

C. BENSON, DALE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 6416 SW LOOP DR
 City PORTLAND State OR Zip Code 97221-3385
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1984.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 29 / 2016
Transaction ID : SA11A.460922
 Amount of Each Receipt this Period
 50.00
 Memo Item
 CONTRIBUTION

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 267 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. BENSON, DALE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 6416 SW LOOP DR
 City PORTLAND State OR Zip Code 97221-3385
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1984.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 29 / 2016
Transaction ID : SA11A.460923
 Amount of Each Receipt this Period
 50.00
 Memo Item
 CONTRIBUTION

B. BENSON, DALE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 6416 SW LOOP DR
 City PORTLAND State OR Zip Code 97221-3385
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1984.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 30 / 2016
Transaction ID : SA11A.464843
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION

C. BENSON, DALE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 6416 SW LOOP DR
 City PORTLAND State OR Zip Code 97221-3385
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1984.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 02 / 2016
Transaction ID : SA11A.466111
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 268 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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

A. BENSON, DALE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 6416 SW LOOP DR
 City PORTLAND State OR Zip Code 97221-3385
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1984.00

Date of Receipt
 11 / 02 / 2016
Transaction ID : SA11A.469441
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

B. BENSON, DALE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 6416 SW LOOP DR
 City PORTLAND State OR Zip Code 97221-3385
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1984.00

Date of Receipt
 11 / 02 / 2016
Transaction ID : SA11A.469443
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

C. BENSON, DALE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 6416 SW LOOP DR
 City PORTLAND State OR Zip Code 97221-3385
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1984.00

Date of Receipt
 11 / 04 / 2016
Transaction ID : SA11A.471353
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 269 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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

A. BENSON, DALE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 6416 SW LOOP DR
 City PORTLAND State OR Zip Code 97221-3385
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1984.00

Date of Receipt
 11 / 04 / 2016
Transaction ID : SA11A.471680
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

B. BENSON, FREDERICK, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3902 HOMESTEAD RD.
 City LANEXA State VA Zip Code 23089-5646
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 205.00

Date of Receipt
 10 / 26 / 2016
Transaction ID : SA11A.451143
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

C. BENSON, JOHN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 60 MILL ROAD
 City RED HOOK State NY Zip Code 12571-2109
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 937.00

Date of Receipt
 10 / 29 / 2016
Transaction ID : SA11A.460834
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	175.00
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 270 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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

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NAME OF COMMITTEE (In Full)
Team Ryan

A. BENSON, JOHN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 60 MILL ROAD
 City RED HOOK State NY Zip Code 12571-2109
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 937.00

Date of Receipt **10 / 29 / 2016**
Transaction ID : SA11A.461135
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

B. BENSON, JOHN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 60 MILL ROAD
 City RED HOOK State NY Zip Code 12571-2109
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 937.00

Date of Receipt **11 / 04 / 2016**
Transaction ID : SA11A.473543
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

C. BENSON, JOHN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 756 CAJON STREET
 City REDLANDS State CA Zip Code 92373-5940
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 550.00

Date of Receipt **11 / 04 / 2016**
Transaction ID : SA11A.473952
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 271 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. BENSON, ROY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4331 COPPERFIELD RIDGE LANE
 City WINSTON SALEM State NC Zip Code 27106-3589
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 350.00

Date of Receipt 10 / 22 / 2016
Transaction ID : SA11A.446893
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

B. BENSON, ROY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4331 COPPERFIELD RIDGE LANE
 City WINSTON SALEM State NC Zip Code 27106-3589
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 350.00

Date of Receipt 10 / 30 / 2016
Transaction ID : SA11A.459962
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

C. BENSON, ROY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4331 COPPERFIELD RIDGE LANE
 City WINSTON SALEM State NC Zip Code 27106-3589
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 350.00

Date of Receipt 10 / 30 / 2016
Transaction ID : SA11A.459963
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 272 OF 4311
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. BENSON, ROY, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 4331 COPPERFIELD RIDGE LANE

City WINSTON SALEM	State NC	Zip Code 27106-3589
-----------------------	-------------	------------------------

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

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
350.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	04	/	2016

Transaction ID : SA11A.472375

Amount of Each Receipt this Period
50.00

Memo Item CONTRIBUTION

B. BENSON, ROY, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 4331 COPPERFIELD RIDGE LANE

City WINSTON SALEM	State NC	Zip Code 27106-3589
-----------------------	-------------	------------------------

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

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
350.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	04	/	2016

Transaction ID : SA11A.474112

Amount of Each Receipt this Period
50.00

Memo Item CONTRIBUTION

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

Mailing Address 11 RITZ COVE DR

City MONARCH BEACH	State CA	Zip Code 92629-4225
-----------------------	-------------	------------------------

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

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
1325.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	30	/	2016

Transaction ID : SA11A.464952

Amount of Each Receipt this Period
250.00

Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	350.00
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 273 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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

A. BENSYL, WILLIAM, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 11 RITZ COVE DR
 City MONARCH BEACH State CA Zip Code 92629-4225
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1325.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 04 / 2016
Transaction ID : SA11A.474128
 Amount of Each Receipt this Period
 250.00
 Memo Item
 CONTRIBUTION

B. BENTON, DIANE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1401 SYCAMORE DRIVE SE
 City ISSAQUAH State WA Zip Code 98027-4826
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 600.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 27 / 2016
Transaction ID : SA11A.456632
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION

C. BENTON, DIANE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1401 SYCAMORE DRIVE SE
 City ISSAQUAH State WA Zip Code 98027-4826
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 600.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 27 / 2016
Transaction ID : SA11A.456656
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 274 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. BENTON, DIANE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1401 SYCAMORE DRIVE SE
 City ISSAQUAH State WA Zip Code 98027-4826
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 600.00

Date of Receipt 11 / 04 / 2016
Transaction ID : SA11A.472950
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

B. BENTON, JOYCE, LI, MISS,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 678 BEND DRIVE
 City SUNNYVALE State CA Zip Code 94087-4224
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NEXYN CORP Occupation (for Individual) QA
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 437.00

Date of Receipt 11 / 03 / 2016
Transaction ID : SA11A.468817
 Amount of Each Receipt this Period 15.00
 Memo Item CONTRIBUTION

C. BENTON, JOYCE, LI, MISS,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 678 BEND DRIVE
 City SUNNYVALE State CA Zip Code 94087-4224
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NEXYN CORP Occupation (for Individual) QA
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 437.00

Date of Receipt 11 / 03 / 2016
Transaction ID : SA11A.468818
 Amount of Each Receipt this Period 15.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶ 130.00
TOTAL This Period (last page this line number only).....▶

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 275 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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

A. BENTON, JOYCE, LI, MISS,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 678 BEND DRIVE

City SUNNYVALE	State CA	Zip Code 94087-4224
-------------------	-------------	------------------------

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

Name of Employer (for Individual) NEXYN CORP	Occupation (for Individual) QA
---	-----------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
437.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 11 / 03 / 2016
Transaction ID : SA11A.468832

Amount of Each Receipt this Period
 25.00

Memo Item
 CONTRIBUTION

B. BENTON, JOYCE, LI, MISS,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 678 BEND DRIVE

City SUNNYVALE	State CA	Zip Code 94087-4224
-------------------	-------------	------------------------

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

Name of Employer (for Individual) NEXYN CORP	Occupation (for Individual) QA
---	-----------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
437.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 11 / 03 / 2016
Transaction ID : SA11A.469269

Amount of Each Receipt this Period
 25.00

Memo Item
 CONTRIBUTION

C. BENTON, JOYCE, LI, MISS,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 678 BEND DRIVE

City SUNNYVALE	State CA	Zip Code 94087-4224
-------------------	-------------	------------------------

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

Name of Employer (for Individual) NEXYN CORP	Occupation (for Individual) QA
---	-----------------------------------

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
437.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 11 / 03 / 2016
Transaction ID : SA11A.469275

Amount of Each Receipt this Period
 25.00

Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	75.00
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 276 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. BENTON, JOYCE, LI, MISS,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 678 BEND DRIVE
 City SUNNYVALE State CA Zip Code 94087-4224
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NEXYN CORP Occupation (for Individual) QA
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 437.00

Date of Receipt 11 / 07 / 2016
Transaction ID : SA11A.479966
 Amount of Each Receipt this Period 25.00
 Memo Item
CONTRIBUTION

B. BENTZ, MARK, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 10824 N. 53RD ST.
 City SCOTTSDALE State AZ Zip Code 85254-4771
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RED MOUNTAIN Occupation (for Individual) BUSINESS OWNER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 10 / 27 / 2016
Transaction ID : SA11A.452742
 Amount of Each Receipt this Period 500.00
 Memo Item
CONTRIBUTION

C. BENTZ, VERNON, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 13190 FOLSOM ST
 City CHICO State CA Zip Code 95973-9798
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NVAS Occupation (for Individual) WAREHOUSE MGR.
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 625.00

Date of Receipt 10 / 31 / 2016
Transaction ID : SA11A.464784
 Amount of Each Receipt this Period 100.00
 Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	625.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 277 OF 4311
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. BERCUTT, HENRY, , MR.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 266 SUGARBERRY CIRCLE

City HOUSTON	State TX	Zip Code 77024-7211
FEC ID number of contributing federal political committee. C		
Name of Employer (for Individual) NONE		Occupation (for Individual) RETIRED
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 275.00

Date of Receipt
10 / 24 / 2016
Transaction ID : **SA11A.445827**

Amount of Each Receipt this Period
25.00

Memo Item CONTRIBUTION

B. BERENS, ROBERT, C., MR.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 24120 PLYMOUTH HOLLOW CIR.

City SORRENTO	State FL	Zip Code 32776-9504
FEC ID number of contributing federal political committee. C		
Name of Employer (for Individual) NONE		Occupation (for Individual) RETIRED
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 307.00

Date of Receipt
10 / 20 / 2016
Transaction ID : **SA11A.441958**

Amount of Each Receipt this Period
25.00

Memo Item CONTRIBUTION

C. BERENS, ROBERT, C., MR.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 24120 PLYMOUTH HOLLOW CIR.

City SORRENTO	State FL	Zip Code 32776-9504
FEC ID number of contributing federal political committee. C		
Name of Employer (for Individual) NONE		Occupation (for Individual) RETIRED
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		Aggregate Year-to-Date ▼ 307.00

Date of Receipt
10 / 27 / 2016
Transaction ID : **SA11A.453029**

Amount of Each Receipt this Period
25.00

Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	75.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 278 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. BERENS, ROBERT, C., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 24120 PLYMOUTH HOLLOW CIR.
 City SORRENTO State FL Zip Code 32776-9504
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 307.00

Date of Receipt 10 / 27 / 2016
Transaction ID : SA11A.453378
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

B. BERENS, ROBERT, C., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 24120 PLYMOUTH HOLLOW CIR.
 City SORRENTO State FL Zip Code 32776-9504
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 307.00

Date of Receipt 10 / 27 / 2016
Transaction ID : SA11A.453406
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

C. BERENS, ROBERT, C., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 24120 PLYMOUTH HOLLOW CIR.
 City SORRENTO State FL Zip Code 32776-9504
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 307.00

Date of Receipt 11 / 01 / 2016
Transaction ID : SA11A.462586
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 279 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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

A. BERENS, ROBERT, C., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 24120 PLYMOUTH HOLLOW CIR.
 City SORRENTO State FL Zip Code 32776-9504
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 307.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 03 / 2016
Transaction ID : SA11A.468530
 Amount of Each Receipt this Period
 25.00
 Memo Item
 CONTRIBUTION

B. BERENS, ROBERT, C., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 24120 PLYMOUTH HOLLOW CIR.
 City SORRENTO State FL Zip Code 32776-9504
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 307.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 07 / 2016
Transaction ID : SA11A.476599
 Amount of Each Receipt this Period
 25.00
 Memo Item
 CONTRIBUTION

C. BERENS, ROBERT, C., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 24120 PLYMOUTH HOLLOW CIR.
 City SORRENTO State FL Zip Code 32776-9504
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 307.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 06 / 2016
Transaction ID : SA11A.477394
 Amount of Each Receipt this Period
 25.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	75.00
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 280 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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

A. BERG, JEFF, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 603 N. INDIAN RIVER DR
 STE 300
 City FT PIERCE State FL Zip Code 34950-3057
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) JABAM Occupation (for Individual) MR.
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 2000.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 20 / 2016
Transaction ID : SA11A.441924
 Amount of Each Receipt this Period
 500.00
 Memo Item
 CONTRIBUTION

B. BERG, JEFF, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 603 N. INDIAN RIVER DR
 STE 300
 City FT PIERCE State FL Zip Code 34950-3057
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) JABAM Occupation (for Individual) MR.
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 2000.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 31 / 2016
Transaction ID : SA11A.463681
 Amount of Each Receipt this Period
 1000.00
 Memo Item
 CONTRIBUTION

C. BERG, NANCY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address BOX 201
 City ROUND TOP State TX Zip Code 78954-0201
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 225.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 06 / 2016
Transaction ID : SA11A.477974
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	1600.00
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 281 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. BERGERON, JOSIAH, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 85 A WEST ST
 City WINOOSKI State VT Zip Code 05404-1926
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) BERGERON DESIGN- BUILD, INC Occupation (for Individual) OWNER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 11 / 05 / 2016
Transaction ID : SA11A.479159
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

B. BERGERON, JOSIAH, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 85 A WEST ST
 City WINOOSKI State VT Zip Code 05404-1926
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) BERGERON DESIGN- BUILD, INC Occupation (for Individual) OWNER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 11 / 05 / 2016
Transaction ID : SA11A.479184
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

C. BERGER, PETER, E., MR,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 15 HICKORY LN
 City WESTON State CT Zip Code 06883-3007
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SIRIS CAPITAL GROUP, LLC Occupation (for Individual) MANAGING DIRECTOR & CFO
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 25000.00

Date of Receipt 11 / 08 / 2016
Transaction ID : SA11A.467910
 Amount of Each Receipt this Period 25000.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	25150.00
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 282 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. BERGMANN , FREDERICK , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3146 S. WAVERLY PARK
 City TAMPA State FL Zip Code 33629-8928
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt 10 / 28 / 2016
Transaction ID : SA11A.455692
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

B. BERGMANN , FREDERICK , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3146 S. WAVERLY PARK
 City TAMPA State FL Zip Code 33629-8928
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt 10 / 28 / 2016
Transaction ID : SA11A.455716
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

C. BERGMANN , FREDERICK , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3146 S. WAVERLY PARK
 City TAMPA State FL Zip Code 33629-8928
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt 10 / 28 / 2016
Transaction ID : SA11A.455720
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

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

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 283 OF 4311
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. BERGMAN, JOHN, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 2201 WINFIELD

City MIDLAND	State TX	Zip Code 79705-8672
-----------------	-------------	------------------------

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

Name of Employer (for Individual) SELF EMPLOYED	Occupation (for Individual) OIL AND GAS
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
300.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	29	/	2016

Transaction ID : SA11A.461162

Amount of Each Receipt this Period
100.00

Memo Item
CONTRIBUTION

B. BERGMAN, JOHN, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 2201 WINFIELD

City MIDLAND	State TX	Zip Code 79705-8672
-----------------	-------------	------------------------

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

Name of Employer (for Individual) SELF EMPLOYED	Occupation (for Individual) OIL AND GAS
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
300.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	04	/	2016

Transaction ID : SA11A.472514

Amount of Each Receipt this Period
100.00

Memo Item
CONTRIBUTION

C. BERGMANN, PEGGY, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 8879 PROMONTORY RANCH ROAD, PO BOX

City PARK CITY	State UT	Zip Code 84060-0381
-------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) DELTA PEGASUS MTG LLC	Occupation (for Individual) INVESTMENTS
--	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
375.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	02	/	2016

Transaction ID : SA11A.469699

Amount of Each Receipt this Period
50.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	250.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 284 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. BERGUM, STEVEN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2016 BAY POINT LN
 City HARTLAND State WI Zip Code 53029-9343
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 700.00

Date of Receipt 10 / 24 / 2016
Transaction ID : SA11A.445758
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

B. BERKNER, KLAUS, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 6680 ALHAMBRA AVE. #118 118
 City MARTINEZ State CA Zip Code 94553-6105
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 225.00

Date of Receipt 11 / 01 / 2016
Transaction ID : SA11A.462403
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

C. BERMAN, RUSSELL, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 505 COLE STREET
 City SAN FRANCISCO State CA Zip Code 94117-2805
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) STANFORD UNIVERSITY Occupation (for Individual) PROFESSOR
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 850.00

Date of Receipt 10 / 25 / 2016
Transaction ID : SA11A.451533
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	550.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 285 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
-----------------------------	-----------------------------	-----------------------------

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NAME OF COMMITTEE (In Full)
Team Ryan

A. BERMAN, RUSSELL, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 505 COLE STREET
 City SAN FRANCISCO State CA Zip Code 94117-2805
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) STANFORD UNIVERSITY Occupation (for Individual) PROFESSOR
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 850.00

Date of Receipt **10 / 30 / 2016**
Transaction ID : SA11A.459422
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

B. BERMAN, RUSSELL, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 505 COLE STREET
 City SAN FRANCISCO State CA Zip Code 94117-2805
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) STANFORD UNIVERSITY Occupation (for Individual) PROFESSOR
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 850.00

Date of Receipt **11 / 01 / 2016**
Transaction ID : SA11A.462314
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

C. BERNARD, JACQUELYN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 109 PACKER ROAD
 City OAK RIDGE State TN Zip Code 37830-5113
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt **10 / 31 / 2016**
Transaction ID : SA11A.458882
 Amount of Each Receipt this Period 200.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	550.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 286 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
Team Ryan

A. BERNALVEGA, MELISSA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 7 WINNEBAGO ROAD
 City SEA RANCH LAKES State FL Zip Code 33308-2305
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) REALTY WORLD SOUTH FLORIDA Occupation (for Individual) REALTOR
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 10 / 24 / 2016
Transaction ID : SA11A.446105
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

B. BERNALVEGA, MELISSA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 7 WINNEBAGO ROAD
 City SEA RANCH LAKES State FL Zip Code 33308-2305
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) REALTY WORLD SOUTH FLORIDA Occupation (for Individual) REALTOR
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 10 / 31 / 2016
Transaction ID : SA11A.458818
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

C. BERNALVEGA, MELISSA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 7 WINNEBAGO ROAD
 City SEA RANCH LAKES State FL Zip Code 33308-2305
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) REALTY WORLD SOUTH FLORIDA Occupation (for Individual) REALTOR
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 10 / 31 / 2016
Transaction ID : SA11A.458820
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	300.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 287 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. BERNARD, RALPH, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 7718 72ND STREET NE
 City MARYSVILLE State WA Zip Code 98270-6548
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) AIRLINE INSPECTION SERVICE Occupation (for Individual) AIRCRAFT INSPECTOR
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 525.00

Date of Receipt **10 / 31 / 2016**
Transaction ID : SA11A.463876
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

B. BERNARD, RALPH, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 7718 72ND STREET NE
 City MARYSVILLE State WA Zip Code 98270-6548
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) AIRLINE INSPECTION SERVICE Occupation (for Individual) AIRCRAFT INSPECTOR
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 525.00

Date of Receipt **11 / 06 / 2016**
Transaction ID : SA11A.477210
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

C. BERNARD, RALPH, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 7718 72ND STREET NE
 City MARYSVILLE State WA Zip Code 98270-6548
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) AIRLINE INSPECTION SERVICE Occupation (for Individual) AIRCRAFT INSPECTOR
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 525.00

Date of Receipt **11 / 06 / 2016**
Transaction ID : SA11A.477227
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	125.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 288 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. BERNSON, JANE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 27 NORWOOD ST
 263
 City EVERETT State MA Zip Code 02149-2709
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1395.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 21 / 2016
Transaction ID : SA11A.444204
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION

B. BERNSON, JANE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 27 NORWOOD ST
 263
 City EVERETT State MA Zip Code 02149-2709
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1395.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 24 / 2016
Transaction ID : SA11A.445564
 Amount of Each Receipt this Period
 50.00
 Memo Item
 CONTRIBUTION

C. BERNSON, JANE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 27 NORWOOD ST
 263
 City EVERETT State MA Zip Code 02149-2709
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1395.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 22 / 2016
Transaction ID : SA11A.446729
 Amount of Each Receipt this Period
 20.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	170.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 289 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
Team Ryan

A. BERNSON, JANE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 27 NORWOOD ST
 263
 City EVERETT State MA Zip Code 02149-2709
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1395.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 25 / 2016
Transaction ID : SA11A.447796
 Amount of Each Receipt this Period
 25.00
 Memo Item
 CONTRIBUTION

B. BERNSON, JANE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 27 NORWOOD ST
 263
 City EVERETT State MA Zip Code 02149-2709
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1395.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 25 / 2016
Transaction ID : SA11A.447797
 Amount of Each Receipt this Period
 25.00
 Memo Item
 CONTRIBUTION

C. BERNSON, JANE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 27 NORWOOD ST
 263
 City EVERETT State MA Zip Code 02149-2709
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1395.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 25 / 2016
Transaction ID : SA11A.448983
 Amount of Each Receipt this Period
 30.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	80.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 290 OF 4311
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. BERNSON, JANE, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 27 NORWOOD ST
263

City EVERETT State MA Zip Code 02149-2709

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1395.00

Date of Receipt
10 / 26 / 2016
Transaction ID : SA11A.450847

Amount of Each Receipt this Period
25.00

Memo Item CONTRIBUTION

B. BERNSON, JANE, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 27 NORWOOD ST
263

City EVERETT State MA Zip Code 02149-2709

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1395.00

Date of Receipt
10 / 25 / 2016
Transaction ID : SA11A.451752

Amount of Each Receipt this Period
30.00

Memo Item CONTRIBUTION

C. BERNSON, JANE, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 27 NORWOOD ST
263

City EVERETT State MA Zip Code 02149-2709

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
1395.00

Date of Receipt
10 / 27 / 2016
Transaction ID : SA11A.453345

Amount of Each Receipt this Period
25.00

Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶ 80.00

TOTAL This Period (last page this line number only).....▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 291 OF 4311
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. BERNSON, JANE, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 27 NORWOOD ST
263

City EVERETT State MA Zip Code 02149-2709

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1395.00

Date of Receipt
10 / 27 / 2016
Transaction ID : SA11A.453348

Amount of Each Receipt this Period
25.00

Memo Item CONTRIBUTION

B. BERNSON, JANE, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 27 NORWOOD ST
263

City EVERETT State MA Zip Code 02149-2709

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1395.00

Date of Receipt
10 / 28 / 2016
Transaction ID : SA11A.455630

Amount of Each Receipt this Period
25.00

Memo Item CONTRIBUTION

C. BERNSON, JANE, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 27 NORWOOD ST
263

City EVERETT State MA Zip Code 02149-2709

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
1395.00

Date of Receipt
10 / 31 / 2016
Transaction ID : SA11A.457472

Amount of Each Receipt this Period
25.00

Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 75.00

TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 292 OF 4311
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. BERNSON, JANE, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 27 NORWOOD ST
263

City EVERETT State MA Zip Code 02149-2709

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 1395.00

Date of Receipt 10 / 28 / 2016
Transaction ID : SA11A.461467

Amount of Each Receipt this Period 30.00

Memo Item CONTRIBUTION

B. BERNSON, JANE, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 27 NORWOOD ST
263

City EVERETT State MA Zip Code 02149-2709

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 1395.00

Date of Receipt 11 / 01 / 2016
Transaction ID : SA11A.462761

Amount of Each Receipt this Period 10.00

Memo Item CONTRIBUTION

C. BERNSON, JANE, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 27 NORWOOD ST
263

City EVERETT State MA Zip Code 02149-2709

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 1395.00

Date of Receipt 10 / 31 / 2016
Transaction ID : SA11A.464793

Amount of Each Receipt this Period 15.00

Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 55.00

TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 293 OF 4311
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name A. BERNSON, JANE, , ,		Date of Receipt M M M / D D D / Y Y Y Y Y Y 10 / 31 / 2016
Mailing Address 27 NORWOOD ST 263		Transaction ID : SA11A.464794
City EVERETT	State MA	Zip Code 02149-2709
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 15.00
Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED	<input type="checkbox"/> Memo Item CONTRIBUTION
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1395.00	

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name B. BERNSON, JANE, , ,		Date of Receipt M M M / D D D / Y Y Y Y Y Y 11 / 02 / 2016
Mailing Address 27 NORWOOD ST 263		Transaction ID : SA11A.465827
City EVERETT	State MA	Zip Code 02149-2709
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 20.00
Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED	<input type="checkbox"/> Memo Item CONTRIBUTION
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1395.00	

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name C. BERNSON, JANE, , ,		Date of Receipt M M M / D D D / Y Y Y Y Y Y 11 / 07 / 2016
Mailing Address 27 NORWOOD ST 263		Transaction ID : SA11A.475028
City EVERETT	State MA	Zip Code 02149-2709
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 20.00
Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED	<input type="checkbox"/> Memo Item CONTRIBUTION
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Aggregate Year-to-Date ▼ 1395.00	

SUBTOTAL of Receipts This Page (optional).....	55.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 294 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
Team Ryan

A. BERNSON, JANE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 27 NORWOOD ST
 263
 City EVERETT State MA Zip Code 02149-2709
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1395.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 06 / 2016
Transaction ID : SA11A.476994
 Amount of Each Receipt this Period
 25.00
 Memo Item
 CONTRIBUTION

B. BERNSON, JANE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 27 NORWOOD ST
 263
 City EVERETT State MA Zip Code 02149-2709
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1395.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 05 / 2016
Transaction ID : SA11A.479258
 Amount of Each Receipt this Period
 20.00
 Memo Item
 CONTRIBUTION

C. BERNSON, JANE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 27 NORWOOD ST
 263
 City EVERETT State MA Zip Code 02149-2709
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1395.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 07 / 2016
Transaction ID : SA11A.480232
 Amount of Each Receipt this Period
 25.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	70.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 295 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. BERQUIST, LAURA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 836 MONTE VISTA DRIVE
 City SANTA PAULA State CA Zip Code 93060-1650
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) MOTHER OF DIVINE GRACE SCHOOL Occupation (for Individual) TEACHER/DIRECTOR
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 550.00

Date of Receipt 10 / 31 / 2016
Transaction ID : SA11A.464109
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

B. BERQUIST, LAURA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 836 MONTE VISTA DRIVE
 City SANTA PAULA State CA Zip Code 93060-1650
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) MOTHER OF DIVINE GRACE SCHOOL Occupation (for Individual) TEACHER/DIRECTOR
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 550.00

Date of Receipt 10 / 31 / 2016
Transaction ID : SA11A.464111
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

C. BERRIEN, WILLARD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5569 N LAKE DR
 City MILWAUKEE State WI Zip Code 53217-5236
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) ARTISAN PARTNERS L.P. Occupation (for Individual) PARTNER
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 2500.00

Date of Receipt 11 / 03 / 2016
Transaction ID : SA11A.465237
 Amount of Each Receipt this Period 2500.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	2550.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 296 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. BERRY, BRYAN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 354 N RAYNOR AVE
 City JOLIET State IL Zip Code 60435-6946
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) INFORMATION REQUESTED PER BEST EFFORTS Occupation (for Individual) INFORMATION REQUESTED PER BE
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 450.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 24 / 2016
Transaction ID : SA11A.445660
 Amount of Each Receipt this Period
 150.00
 Memo Item
 CONTRIBUTION

B. BERRY, BRYAN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 354 N RAYNOR AVE
 City JOLIET State IL Zip Code 60435-6946
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) INFORMATION REQUESTED PER BEST EFFORTS Occupation (for Individual) INFORMATION REQUESTED PER BE
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 450.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 05 / 2016
Transaction ID : SA11A.479149
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION

C. BERRY, EDWARD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 508 CLOVER LANE
 City EAGLE State WI Zip Code 53119-2051
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 725.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 29 / 2016
Transaction ID : SA11A.461159
 Amount of Each Receipt this Period
 25.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	275.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 297 OF 4311
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. BERRY, EDWARD, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 508 CLOVER LANE

City EAGLE State WI Zip Code 53119-2051

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **725.00**

Date of Receipt
11 / 04 / 2016
Transaction ID : SA11A.472672

Amount of Each Receipt this Period
25.00

Memo Item CONTRIBUTION

B. BERRY, JOE, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address PO BOX 826

City N. CONWAY State NH Zip Code 03860-0826

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) REAL ESTATE

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **500.00**

Date of Receipt
10 / 31 / 2016
Transaction ID : SA11A.459041

Amount of Each Receipt this Period
250.00

Memo Item CONTRIBUTION

C. BERRY, JOE, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address PO BOX 826

City N. CONWAY State NH Zip Code 03860-0826

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) REAL ESTATE

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **500.00**

Date of Receipt
10 / 31 / 2016
Transaction ID : SA11A.459042

Amount of Each Receipt this Period
250.00

Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... **525.00**

TOTAL This Period (last page this line number only).....

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 298 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
Team Ryan

A. BERRY, MONICA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 709 S REMINGTON
 City ANGLETON State TX Zip Code 77515-3378
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) HAGEMEYER NORTH AMERICA Occupation (for Individual) INDUSTRIAL SALES
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 430.00

Date of Receipt 10 / 27 / 2016
Transaction ID : SA11A.454018
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

B. BERRY, TIMOTHY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 8311 NORTH MAIN STREET
 City DAYTON State OH Zip Code 45415-1602
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) PRESIDENT
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 375.00

Date of Receipt 10 / 27 / 2016
Transaction ID : SA11A.454190
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

C. BERRY, TIMOTHY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 8311 NORTH MAIN STREET
 City DAYTON State OH Zip Code 45415-1602
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) PRESIDENT
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 375.00

Date of Receipt 10 / 28 / 2016
Transaction ID : SA11A.455294
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 200.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 299 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
Team Ryan

A. BERRY, TIMOTHY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 8311 NORTH MAIN STREET
 City DAYTON State OH Zip Code 45415-1602
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) PRESIDENT
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 375.00

Date of Receipt 10 / 31 / 2016
Transaction ID : SA11A.458393
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

B. BERRY, TIMOTHY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 8311 NORTH MAIN STREET
 City DAYTON State OH Zip Code 45415-1602
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) PRESIDENT
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 375.00

Date of Receipt 11 / 03 / 2016
Transaction ID : SA11A.469206
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

C. BERRY, TIMOTHY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 8311 NORTH MAIN STREET
 City DAYTON State OH Zip Code 45415-1602
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) PRESIDENT
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 375.00

Date of Receipt 11 / 03 / 2016
Transaction ID : SA11A.469207
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	125.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 300 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. BERRY, TIMOTHY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 8311 NORTH MAIN STREET
 City DAYTON State OH Zip Code 45415-1602
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) PRESIDENT
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 375.00

Date of Receipt 11 / 05 / 2016
Transaction ID : SA11A.479032
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

B. BERRY, WILLIAM, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 416 OAK HOLLOW LN
 City FORT WORTH State TX Zip Code 76112-1022
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1450.00

Date of Receipt 10 / 27 / 2016
Transaction ID : SA11A.457137
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

C. BERRY, WILLIAM, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 416 OAK HOLLOW LN
 City FORT WORTH State TX Zip Code 76112-1022
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1450.00

Date of Receipt 10 / 27 / 2016
Transaction ID : SA11A.457138
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	550.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 301 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. BERRY, WILLIAM, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 416 OAK HOLLOW LN
 City FORT WORTH State TX Zip Code 76112-1022
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1450.00

Date of Receipt 11 / 02 / 2016
Transaction ID : SA11A.467058
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

B. BERRY, WILLIAM, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 416 OAK HOLLOW LN
 City FORT WORTH State TX Zip Code 76112-1022
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1450.00

Date of Receipt 11 / 04 / 2016
Transaction ID : SA11A.473975
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

C. BERRY, WILBUR, G., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1104 SEVENTH AVENUE, NE
 City JACKSONVILLE State AL Zip Code 36265-1165
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 450.00

Date of Receipt 10 / 27 / 2016
Transaction ID : SA11A.454218
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	450.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 302 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
Team Ryan

A. BERS, ROYCE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2122 S LAKE LELANAU
 City LAKE LELANAU State MI Zip Code 49653-9453
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 26 / 2016
Transaction ID : SA11A.449993
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION

B. BERS, ROYCE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2122 S LAKE LELANAU
 City LAKE LELANAU State MI Zip Code 49653-9453
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 26 / 2016
Transaction ID : SA11A.449997
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION

C. BERTANI, CHARLIE, L., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 14146 BERTANI LANE
 City CYPRESS State TX Zip Code 77429-5895
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 24 / 2016
Transaction ID : SA11A.443841
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	300.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 303 OF 4311
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. BERTINI, GLEN, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 323 ISLAND BOULEVARD FI

City FOX ISLAND	State WA	Zip Code 98333-9712
--------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) GLEN J BERTINI	Occupation (for Individual) ENGINEER
---	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
350.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	25	/	2016

Transaction ID : SA11A.448780

Amount of Each Receipt this Period
250.00

Memo Item CONTRIBUTION

B. BERTOCH, DAVID, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 3406 ROLLING TERRACE DR

City SPRING	State TX	Zip Code 77388-5159
----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) EXXONMOBIL	Occupation (for Individual) ATTORNEY
---	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
400.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	04	/	2016

Transaction ID : SA11A.472824

Amount of Each Receipt this Period
100.00

Memo Item CONTRIBUTION

C. BERTZ, JOHN, , MR.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 3432 VALLEY WOODS DR

City VERONA	State WI	Zip Code 53593-9748
----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
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Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
480.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	27	/	2016

Transaction ID : SA11A.453849

Amount of Each Receipt this Period
75.00

Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	425.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 304 OF 4311
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. BERTZ, JOHN, , MR.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 3432 VALLEY WOODS DR

City VERONA	State WI	Zip Code 53593-9748
----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
480.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	04	/	2016

Transaction ID : SA11A.472732

Amount of Each Receipt this Period
75.00

Memo Item CONTRIBUTION

B. BERWANGER, ADELE, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 323 APOLENA AVENUE

City NEWPORT BEACH	State CA	Zip Code 92662-1217
-----------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) CANTERBURY CONSULTING INC.	Occupation (for Individual) INVESTMENT CONSULTANT
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
450.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	20	/	2016

Transaction ID : SA11A.442195

Amount of Each Receipt this Period
250.00

Memo Item CONTRIBUTION

C. BESSE, ROBERT, A., ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 18 MOTT DRIVE

City ALAMO	State CA	Zip Code 94507-1714
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	03	/	2016

Transaction ID : SA11A.465451

Amount of Each Receipt this Period
150.00

Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	475.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 305 OF 4311
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. BESTHOFF, WALDA, , MS.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 3 POYDRAS ST APT 10F

City NEW ORLEANS	State LA	Zip Code 70130-1620
---------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) INFORMATION REQUESTED PER BEST EFFORTS	Occupation (for Individual) INFORMATION REQUESTED PER BE
---	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
500.00

Date of Receipt
11 / 01 / 2016
Transaction ID : SA11A.461687

Amount of Each Receipt this Period
500.00

Memo Item
CONTRIBUTION

B. BETTENDORF, IRMENGARD, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 2315 LAKE AVENUE SUNET ISLAND NO 3

City MIAMI BEACH	State FL	Zip Code 33140-
---------------------	-------------	--------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) INFORMATION REQUESTED PER BEST EFFORTS	Occupation (for Individual) INFORMATION REQUESTED PER BE
---	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
500.00

Date of Receipt
11 / 03 / 2016
Transaction ID : SA11A.465414

Amount of Each Receipt this Period
500.00

Memo Item
CONTRIBUTION

C. BETTIN, ROGER, , MR.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 300 FAIRWAY COURT

City ATLANTIS	State FL	Zip Code 33462-1212
------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
450.00

Date of Receipt
10 / 24 / 2016
Transaction ID : SA11A.446124

Amount of Each Receipt this Period
50.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	1050.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 306 OF 4311
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. BETTIN, ROGER, , MR.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 300 FAIRWAY COURT

City ATLANTIS	State FL	Zip Code 33462-1212
------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
450.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		24		2016

Transaction ID : SA11A.446127

Amount of Each Receipt this Period
50.00

Memo Item
CONTRIBUTION

B. BETTIN, ROGER, , MR.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 300 FAIRWAY COURT

City ATLANTIS	State FL	Zip Code 33462-1212
------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
450.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		25		2016

Transaction ID : SA11A.448068

Amount of Each Receipt this Period
50.00

Memo Item
CONTRIBUTION

C. BETTIN, ROGER, , MR.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 300 FAIRWAY COURT

City ATLANTIS	State FL	Zip Code 33462-1212
------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
450.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11		02		2016

Transaction ID : SA11A.466185

Amount of Each Receipt this Period
50.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	150.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 307 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
Team Ryan

A. BETTIN, STAN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 318 SUNFLOWER DR
 City LYONS State KS Zip Code 67554-3713
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 212.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 25 / 2016
Transaction ID : SA11A.448194
 Amount of Each Receipt this Period
 25.00
 Memo Item
 CONTRIBUTION

B. BETTIN, STAN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 318 SUNFLOWER DR
 City LYONS State KS Zip Code 67554-3713
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 212.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 29 / 2016
Transaction ID : SA11A.461041
 Amount of Each Receipt this Period
 25.00
 Memo Item
 CONTRIBUTION

C. BETTIN, STAN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 318 SUNFLOWER DR
 City LYONS State KS Zip Code 67554-3713
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 212.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 04 / 2016
Transaction ID : SA11A.471935
 Amount of Each Receipt this Period
 25.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	75.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 308 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
Team Ryan

A. BEULIGMANN, STEVEN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2311 DANA COURT
 City CARLSBAD State CA Zip Code 92008-2076
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) DENTIST
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 350.00

Date of Receipt 11 / 04 / 2016
Transaction ID : SA11A.473317
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

B. BEVER, SHIRLEY, A., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4785 HODGSON RD #103
 City SHOREVIEW State MN Zip Code 55126-6077
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt 10 / 24 / 2016
Transaction ID : SA11A.445945
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

C. BEVER, SHIRLEY, A., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4785 HODGSON RD #103
 City SHOREVIEW State MN Zip Code 55126-6077
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt 10 / 24 / 2016
Transaction ID : SA11A.445955
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	250.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 309 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
-----------------------------	-----------------------------	-----------------------------

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NAME OF COMMITTEE (In Full)
Team Ryan

A. BEYER, SANDRA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address P O BOX 1315
 City BROWNFIELD State TX Zip Code 79316-1315
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) LAHEY FARMS Occupation (for Individual) OFFICE MANAGER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 11 / 04 / 2016
Transaction ID : SA11A.473372
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

B. BEZDIKIAN, LEON, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3552 LAKEWAY DRIVE
 City ELLICOTT CITY State MD Zip Code 21042-1226
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) LEON BEZDIKIAN Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 10 / 22 / 2016
Transaction ID : SA11A.446966
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

C. BEZDIKIAN, LEON, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3552 LAKEWAY DRIVE
 City ELLICOTT CITY State MD Zip Code 21042-1226
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) LEON BEZDIKIAN Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 11 / 04 / 2016
Transaction ID : SA11A.471442
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	200.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 310 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. BHAGWAN, SUDHIR, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 13940 NW HARVEST LANE
 City PORTLAND State OR Zip Code 97229-3653
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 650.00

Date of Receipt 10 / 31 / 2016
Transaction ID : SA11A.463916
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

B. BICKEL, DANIEL, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 22801 91ST ST CT E
 City BUCKLEY State WA Zip Code 98321-9749
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 11 / 05 / 2016
Transaction ID : SA11A.478516
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

C. BICKEL, DANIEL, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 22801 91ST ST CT E
 City BUCKLEY State WA Zip Code 98321-9749
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 11 / 05 / 2016
Transaction ID : SA11A.478524
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 750.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 311 OF 4311
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. BIDDLE, SALLY, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address PO BOX 423

City NEW CASTLE	State NH	Zip Code 03854-0423
FEC ID number of contributing federal political committee. C		
Name of Employer (for Individual) CAREY AND GIAMPA REALTORS		Occupation (for Individual) REALTOR
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 250.00

Date of Receipt
MM / DD / YYYY
11 / 04 / 2016

Transaction ID : SA11A.472679

Amount of Each Receipt this Period
25.00

Memo Item
CONTRIBUTION

B. BIEBIGHAUSER, VICTOR, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 2424 CHEROKEE DRIVE

City MONTGOMERY	State AL	Zip Code 36111-1609
FEC ID number of contributing federal political committee. C		
Name of Employer (for Individual) SOUTH UNIVERSITY OF ALABAMA, INC.		Occupation (for Individual) PRESIDENT
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 2000.00

Date of Receipt
MM / DD / YYYY
10 / 27 / 2016

Transaction ID : SA11A.453377

Amount of Each Receipt this Period
500.00

Memo Item
CONTRIBUTION

C. BIENFANG, DON, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 2 TABOR HILL RD.

City LINCOLN	State MA	Zip Code 01773-2906
FEC ID number of contributing federal political committee. C		
Name of Employer (for Individual) BWHPO		Occupation (for Individual) PHYSICIAN
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		Aggregate Year-to-Date ▼ 300.00

Date of Receipt
MM / DD / YYYY
11 / 02 / 2016

Transaction ID : SA11A.466678

Amount of Each Receipt this Period
100.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	625.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 312 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. BIGLER, BENNY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4417 NO. MONTGALL
 City KANSAS CITY State MO Zip Code 64117-1156
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 223.00

Date of Receipt **10 / 24 / 2016**
Transaction ID : SA11A.449504
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

B. BIGLER, BENNY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4417 NO. MONTGALL
 City KANSAS CITY State MO Zip Code 64117-1156
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 223.00

Date of Receipt **11 / 04 / 2016**
Transaction ID : SA11A.471143
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

C. BIJUR, KJESTINE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 10855 CHARLESTON DRIVE
 City VERO BEACH State FL Zip Code 32963-4797
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 555.00

Date of Receipt **11 / 01 / 2016**
Transaction ID : SA11A.462754
 Amount of Each Receipt this Period 30.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶ 80.00
TOTAL This Period (last page this line number only).....▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 313 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. BIJUR, KJESTINE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 10855 CHARLESTON DRIVE
 City VERO BEACH State FL Zip Code 32963-4797
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 555.00

Date of Receipt 11 / 04 / 2016
Transaction ID : SA11A.472217
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

B. BILLERBECK, TIM, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 14816 WILDEN DRIVE
 City URBANDALE State IA Zip Code 50323-2068
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) WELLS FARGO Occupation (for Individual) BANKER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 650.00

Date of Receipt 11 / 02 / 2016
Transaction ID : SA11A.470076
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

C. BILLERBECK, TIM, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 14816 WILDEN DRIVE
 City URBANDALE State IA Zip Code 50323-2068
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) WELLS FARGO Occupation (for Individual) BANKER
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 650.00

Date of Receipt 11 / 02 / 2016
Transaction ID : SA11A.470077
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	250.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 314 OF 4311
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/>	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. BILLINGSLEY, ROBERT, L.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 5 RAMPART PASS

City WACCABUC	State NY	Zip Code 10597-1018
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) INFORMATION REQUESTED PER BEST EFFORTS	Occupation (for Individual) INFORMATION REQUESTED PER BE
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Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		31		2016

Transaction ID : SA11A.457344

Amount of Each Receipt this Period
500.00

Memo Item
CONTRIBUTION

B. BINGHAM, ANNE, E., MRS.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 149 WEAVER STREET

City GREENWICH	State CT	Zip Code 06831-4300
-------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		28		2016

Transaction ID : SA11A.455551

Amount of Each Receipt this Period
100.00

Memo Item
CONTRIBUTION

C. BINGHAM, ANNE, E., MRS.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 149 WEAVER STREET

City GREENWICH	State CT	Zip Code 06831-4300
-------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		29		2016

Transaction ID : SA11A.460953

Amount of Each Receipt this Period
100.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	700.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 315 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. BINGHAM, ANNE, E., MRS.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 149 WEAVER STREET
 City GREENWICH State CT Zip Code 06831-4300
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 11 / 04 / 2016
Transaction ID : SA11A.472254
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

B. BINKLEY, DENNIS, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1546 NW WOODBINE WAY
 City SEATTLE State WA Zip Code 98177-5339
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) DENNIS BINKLEY Occupation (for Individual) BUSINESSMAN
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 345.00

Date of Receipt 10 / 21 / 2016
Transaction ID : SA11A.444650
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

C. BINKLEY, DENNIS, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1546 NW WOODBINE WAY
 City SEATTLE State WA Zip Code 98177-5339
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) DENNIS BINKLEY Occupation (for Individual) BUSINESSMAN
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 345.00

Date of Receipt 10 / 26 / 2016
Transaction ID : SA11A.451064
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	225.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 316 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. BINKLEY, DENNIS, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1546 NW WOODBINE WAY
 City SEATTLE State WA Zip Code 98177-5339
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) DENNIS BINKLEY Occupation (for Individual) BUSINESSMAN
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 345.00

Date of Receipt 11 / 04 / 2016
Transaction ID : SA11A.473153
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

B. BIOLCHINI, ROBERT, F., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1744 E 29TH STREET
 City TULSA State OK Zip Code 74114-5402
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) PENNWELL Occupation (for Individual) ATTORNEY
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 3500.00

Date of Receipt 10 / 31 / 2016
Transaction ID : SA11A.457353
 Amount of Each Receipt this Period 1000.00
 Memo Item CONTRIBUTION

C. BIRD, LARRY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 6401 WINDING RIDGE CIR.
 City LINCOLN State NE Zip Code 68512-2417
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 10 / 25 / 2016
Transaction ID : SA11A.448575
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶ 1275.00
TOTAL This Period (last page this line number only).....▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 317 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. BIRD, LARRY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 6401 WINDING RIDGE CIR.
 City LINCOLN State NE Zip Code 68512-2417
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt
 11 / 01 / 2016
Transaction ID : SA11A.462898
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

B. BIRKBY, PAUL, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 220 TERRACE RD.
 City LINCOLN State NE Zip Code 68505-2649
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 215.00

Date of Receipt
 10 / 26 / 2016
Transaction ID : SA11A.449812
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

C. BIRKBY, PAUL, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 220 TERRACE RD.
 City LINCOLN State NE Zip Code 68505-2649
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 215.00

Date of Receipt
 11 / 01 / 2016
Transaction ID : SA11A.462369
 Amount of Each Receipt this Period 15.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	90.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 318 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. BIRKBY, PAUL, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 220 TERRACE RD.
 City LINCOLN State NE Zip Code 68505-2649
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 215.00

Date of Receipt: 10 / 31 / 2016
Transaction ID : SA11A.464380
 Amount of Each Receipt this Period: 25.00
 Memo Item CONTRIBUTION

B. BIRKBY, PAUL, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 220 TERRACE RD.
 City LINCOLN State NE Zip Code 68505-2649
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 215.00

Date of Receipt: 11 / 07 / 2016
Transaction ID : SA11A.480367
 Amount of Each Receipt this Period: 5.00
 Memo Item CONTRIBUTION

C. BIRKEMEIER, MARGARET, D., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1589 S IVY STREET APT 116
 City CANBY State OR Zip Code 97013-4342
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt: 10 / 25 / 2016
Transaction ID : SA11A.447530
 Amount of Each Receipt this Period: 150.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶ 180.00
TOTAL This Period (last page this line number only).....▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 319 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. BIRNBAUM, JEROME, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 8148 COLLINGWOOD CT.
 City UNIVERSITY PARK State FL Zip Code 34201-2349
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 210.00

Date of Receipt 10 / 26 / 2016
Transaction ID : SA11A.450340
 Amount of Each Receipt this Period 30.00
 Memo Item CONTRIBUTION

B. BISBEE, FREDERICK, W., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 915 WALNUT STREET
 City STATE COLLEGE State PA Zip Code 16801-6015
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt 10 / 25 / 2016
Transaction ID : SA11A.447344
 Amount of Each Receipt this Period 200.00
 Memo Item CONTRIBUTION

C. BISCHOFF, RONALD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3365 W SALTO DRIVE
 City EAGLE State ID Zip Code 83616-4155
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt 10 / 26 / 2016
Transaction ID : SA11A.451413
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	280.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 320 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. BISCHOFF, RONALD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3365 W SALTO DRIVE
 City EAGLE State ID Zip Code 83616-4155
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 26 / 2016
Transaction ID : SA11A.451416
 Amount of Each Receipt this Period
 50.00
 Memo Item
 CONTRIBUTION

B. BISHOP, GEORGE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1217 MONTICELLO ROAD
 City LAFAYETTE State CA Zip Code 94549-3025
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 2000.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 01 / 2016
Transaction ID : SA11A.461656
 Amount of Each Receipt this Period
 1000.00
 Memo Item
 CONTRIBUTION

C. BISHOP, GEORGE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1217 MONTICELLO ROAD
 City LAFAYETTE State CA Zip Code 94549-3025
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 2000.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 02 / 2016
Transaction ID : SA11A.465065
 Amount of Each Receipt this Period
 1000.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	2050.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 321 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. BISHOP, LUTHER, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1102 CENTER ST
 City MILFORD State OH Zip Code 45150-1327
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 380.00

Date of Receipt 10 / 25 / 2016
Transaction ID : SA11A.449050
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

B. BISSELL, G WILLIAM, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 119 GRANDVIEW DRIVE
 City VERONA State PA Zip Code 15147-3894
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 10 / 20 / 2016
Transaction ID : SA11A.433431
 Amount of Each Receipt this Period 300.00
 Memo Item CONTRIBUTION

C. BISSO MOORE, JOANNE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3601 UNIVERSITY BOULEVARD
 City DALLAS State TX Zip Code 75205-1837
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) HOMEMAKER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt 10 / 26 / 2016
Transaction ID : SA11A.447709
 Amount of Each Receipt this Period 1000.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	1350.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 322 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. BITTER, DALE, H., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 133 INDIAN COVE LANE
 City PONTE VEDRA BEACH State FL Zip Code 32082-2165
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt
 11 / 01 / 2016
Transaction ID : SA11A.462323
 Amount of Each Receipt this Period
 100.00
 Memo Item CONTRIBUTION

B. BITTER, DALE, H., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 133 INDIAN COVE LANE
 City PONTE VEDRA BEACH State FL Zip Code 32082-2165
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt
 11 / 01 / 2016
Transaction ID : SA11A.462324
 Amount of Each Receipt this Period
 100.00
 Memo Item CONTRIBUTION

C. BITTER, DALE, H., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 133 INDIAN COVE LANE
 City PONTE VEDRA BEACH State FL Zip Code 32082-2165
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt
 11 / 01 / 2016
Transaction ID : SA11A.462329
 Amount of Each Receipt this Period
 100.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	300.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 323 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. BITTER, DALE, H., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 133 INDIAN COVE LANE
 City PONTE VEDRA BEACH State FL Zip Code 32082-2165
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 11 / 01 / 2016
Transaction ID : SA11A.462332
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

B. BITTINGER, FRANK, L., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 15568 LACUNA DRIVE
 City MONUMENT State CO Zip Code 80132-6100
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 11 / 07 / 2016
Transaction ID : SA11A.467695
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

C. BIVENS, NANCY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2824 WISCONSIN AVE
 City DAVENPORT State IA Zip Code 52806-6797
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 414.00

Date of Receipt 10 / 27 / 2016
Transaction ID : SA11A.452765
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 225.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 324 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
Team Ryan

A. BIVENS, NANCY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2824 WISCONSIN AVE
 City DAVENPORT State IA Zip Code 52806-6797
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 414.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 27 / 2016
Transaction ID : SA11A.452767
 Amount of Each Receipt this Period
 25.00
 Memo Item
 CONTRIBUTION

B. BIVENS, NANCY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2824 WISCONSIN AVE
 City DAVENPORT State IA Zip Code 52806-6797
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 414.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 02 / 2016
Transaction ID : SA11A.469768
 Amount of Each Receipt this Period
 25.00
 Memo Item
 CONTRIBUTION

C. BIVENS, NANCY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2824 WISCONSIN AVE
 City DAVENPORT State IA Zip Code 52806-6797
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 414.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 02 / 2016
Transaction ID : SA11A.469770
 Amount of Each Receipt this Period
 25.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	75.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 325 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. BIVENS, NANCY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2824 WISCONSIN AVE
 City DAVENPORT State IA Zip Code 52806-6797
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 414.00

Date of Receipt
 11 / 04 / 2016
Transaction ID : SA11A.479528
 Amount of Each Receipt this Period 38.00
 Memo Item CONTRIBUTION

B. BIVENS, NANCY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2824 WISCONSIN AVE
 City DAVENPORT State IA Zip Code 52806-6797
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 414.00

Date of Receipt
 11 / 07 / 2016
Transaction ID : SA11A.480687
 Amount of Each Receipt this Period 38.00
 Memo Item CONTRIBUTION

C. BLACKSTOCK, CLIFF, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1281 VINEYARD RD
 City GUNTER State TX Zip Code 75058-3142
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 230.00

Date of Receipt
 10 / 25 / 2016
Transaction ID : SA11A.448632
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	101.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 326 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. BLACKSTOCK, CLIFF, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1281 VINEYARD RD
 City GUNTER State TX Zip Code 75058-3142
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 230.00

Date of Receipt **10 / 28 / 2016**
Transaction ID : SA11A.455756
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

B. BLACKSTOCK, CLIFF, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1281 VINEYARD RD
 City GUNTER State TX Zip Code 75058-3142
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 230.00

Date of Receipt **11 / 01 / 2016**
Transaction ID : SA11A.462695
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

C. BLACKSTOCK, CLIFF, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1281 VINEYARD RD
 City GUNTER State TX Zip Code 75058-3142
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 230.00

Date of Receipt **11 / 02 / 2016**
Transaction ID : SA11A.466832
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 175.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 327 OF 4311
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. BLACKADAR, DONALD, B., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 174 VARSITY CIRCLE
 City ATLAMONTE SPRINGS State FL Zip Code 32714-2833
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) BLACKADAR INSURANCE AGENCY Occupation (for Individual) INSURANCE
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 10 / 25 / 2016
Transaction ID : SA11A.447583
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

B. BLACK, DOROTHY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 13101 DULANEY VALLEY ROAD
 City GLEN ARM State MD Zip Code 21057-9601
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) LAW OFFICE PETER G. ANGELOS, P.A. Occupation (for Individual) PARALEGAL
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 210.00

Date of Receipt 10 / 29 / 2016
Transaction ID : SA11A.461161
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

C. BLACK, DOROTHY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 13101 DULANEY VALLEY ROAD
 City GLEN ARM State MD Zip Code 21057-9601
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) LAW OFFICE PETER G. ANGELOS, P.A. Occupation (for Individual) PARALEGAL
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 210.00

Date of Receipt 11 / 04 / 2016
Transaction ID : SA11A.471087
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	300.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 328 OF 4311
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. BLACK, JAMES, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 923 LANEY RD
City LOCUST GROVE State GA Zip Code 30248-2266
FEC ID number of contributing federal political committee. **C**
Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 220.00

Date of Receipt 10 / 28 / 2016
Transaction ID : SA11A.455153
Amount of Each Receipt this Period 5.00
 Memo Item CONTRIBUTION

B. BLACK, JAMES, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 923 LANEY RD
City LOCUST GROVE State GA Zip Code 30248-2266
FEC ID number of contributing federal political committee. **C**
Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 220.00

Date of Receipt 11 / 02 / 2016
Transaction ID : SA11A.469767
Amount of Each Receipt this Period 5.00
 Memo Item CONTRIBUTION

C. BLACK, JEFFREY, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 4829 RUSTIC LANE
City DECATUR State IL Zip Code 62521-6507
FEC ID number of contributing federal political committee. **C**
Name of Employer (for Individual) BLACK& COMPANY Occupation (for Individual) MANAGMENT
Receipt For: Primary General Other (specify)
Aggregate Year-to-Date ▼ 1450.00

Date of Receipt 11 / 01 / 2016
Transaction ID : SA11A.462319
Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶ 110.00
TOTAL This Period (last page this line number only).....▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 329 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
Team Ryan

A. BLACK, JEFFREY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4829 RUSTIC LANE
 City DECATUR State IL Zip Code 62521-6507
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) BLACK& COMPANY Occupation (for Individual) MANAGMENT
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1450.00

Date of Receipt
 11 / 05 / 2016
Transaction ID : SA11A.480964
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION

B. BLACK, JEFFREY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4829 RUSTIC LANE
 City DECATUR State IL Zip Code 62521-6507
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) BLACK& COMPANY Occupation (for Individual) MANAGMENT
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1450.00

Date of Receipt
 11 / 05 / 2016
Transaction ID : SA11A.480965
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION

C. BLACKSHEAR, JOSEPH, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 519 BAY POINT DR
 City GALLATIN State TN Zip Code 37066-4486
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 525.00

Date of Receipt
 10 / 27 / 2016
Transaction ID : SA11A.453360
 Amount of Each Receipt this Period
 50.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	250.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 330 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
Team Ryan

A. BLACKSHEAR, JOSEPH, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 519 BAY POINT DR
 City GALLATIN State TN Zip Code 37066-4486
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 525.00

Date of Receipt 10 / 27 / 2016
Transaction ID : SA11A.453361
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

B. BLACKSHEAR, JOSEPH, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 519 BAY POINT DR
 City GALLATIN State TN Zip Code 37066-4486
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 525.00

Date of Receipt 11 / 02 / 2016
Transaction ID : SA11A.466887
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

C. BLACK, JOYCE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 601 ANDERSON ST
 City GREENCASTLE State IN Zip Code 46135-1833
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 330.00

Date of Receipt 10 / 23 / 2016
Transaction ID : SA11A.449629
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶ 150.00
TOTAL This Period (last page this line number only).....▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 331 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. BLACK, JOYCE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 601 ANDERSON ST
 City GREENCASTLE State IN Zip Code 46135-1833
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 330.00

Date of Receipt 10 / 27 / 2016
Transaction ID : SA11A.457079
 Amount of Each Receipt this Period 30.00
 Memo Item CONTRIBUTION

B. BLACK, JOYCE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 601 ANDERSON ST
 City GREENCASTLE State IN Zip Code 46135-1833
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 330.00

Date of Receipt 11 / 02 / 2016
Transaction ID : SA11A.466165
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

C. BLACKBURN, LAURA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3163 BAIRDS CREEK ROAD
 City VILAS State NC Zip Code 28692-9250
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) HOMEMAKER
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt 10 / 25 / 2016
Transaction ID : SA11A.447277
 Amount of Each Receipt this Period 1000.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 1080.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 332 OF 4311
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. BLACK, MARY, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 4 LAZYWOOD LANE

City MIDLAND	State TX	Zip Code 79705-2701
-----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) INFORMATION REQUESTED PER BEST EFFORTS	Occupation (for Individual) INFORMATION REQUESTED PER BE
---	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	28	/	2016

Transaction ID : SA11A.454796

Amount of Each Receipt this Period
1000.00

Memo Item
CONTRIBUTION

B. BLACKWELL, PATRICIA, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 3864 MARIETTA WAY

City SAINT CLOUD	State FL	Zip Code 34772-8711
---------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) CORNERSTONE FAMILY CHURCH	Occupation (for Individual) GRAPHIC DESIGNER
--	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	26	/	2016

Transaction ID : SA11A.451040

Amount of Each Receipt this Period
100.00

Memo Item
CONTRIBUTION

C. BLACKWELL, PATRICIA, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 3864 MARIETTA WAY

City SAINT CLOUD	State FL	Zip Code 34772-8711
---------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) CORNERSTONE FAMILY CHURCH	Occupation (for Individual) GRAPHIC DESIGNER
--	---

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	04	/	2016

Transaction ID : SA11A.472372

Amount of Each Receipt this Period
100.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	1200.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 333 OF 4311
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. BLACK, ROBERT, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address **65 S BATTERY STREET**

City CHARLESTON	State SC	Zip Code 29401-2325
---------------------------	--------------------	-------------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
--	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
7000.00

Date of Receipt
11 / 17 / 2016

Transaction ID : SA11A.468404

Amount of Each Receipt this Period
500.00

Memo Item
CONTRIBUTION

B. BLACKMON, SUSAN, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address **3017 ALTON ROAD**

City FORT WORTH	State TX	Zip Code 76109-2143
---------------------------	--------------------	-------------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
--	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
300.00

Date of Receipt
10 / 26 / 2016

Transaction ID : SA11A.454365

Amount of Each Receipt this Period
100.00

Memo Item
CONTRIBUTION

C. BLACKMON, SUSAN, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address **3017 ALTON ROAD**

City FORT WORTH	State TX	Zip Code 76109-2143
---------------------------	--------------------	-------------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
--	---

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
300.00

Date of Receipt
10 / 26 / 2016

Transaction ID : SA11A.454370

Amount of Each Receipt this Period
100.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	700.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 334 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. BLACKBURN III, TOM, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO BOX 999

City BROOKSHIRE	State TX	Zip Code 77423-0999
--------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
500.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 27 / 2016
Transaction ID : SA11A.452722

Amount of Each Receipt this Period
250.00

Memo Item
CONTRIBUTION

B. BLACKBURN III, TOM, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO BOX 999

City BROOKSHIRE	State TX	Zip Code 77423-0999
--------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
500.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 04 / 2016
Transaction ID : SA11A.470680

Amount of Each Receipt this Period
250.00

Memo Item
CONTRIBUTION

C. BLACKMAN, VERNON, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 13591 NOGALES DR

City DEL MAR	State CA	Zip Code 92014-3349
-----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
400.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 21 / 2016
Transaction ID : SA11A.444173

Amount of Each Receipt this Period
25.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	525.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 335 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. BLACKMAN, VERNON, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 13591 NOGALES DR
 City DEL MAR State CA Zip Code 92014-3349
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt **10 / 21 / 2016**
Transaction ID : SA11A.444174
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

B. BLACKMAN, VERNON, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 13591 NOGALES DR
 City DEL MAR State CA Zip Code 92014-3349
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt **11 / 05 / 2016**
Transaction ID : SA11A.478883
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

C. BLAIR, JEAN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 707 SOUTH GULFSTREAM AVE 903
 City SARASOTA State FL Zip Code 34236-7710
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt **10 / 21 / 2016**
Transaction ID : SA11A.444489
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶ 150.00
TOTAL This Period (last page this line number only).....▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 336 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
Team Ryan

A. BLAIR, JEAN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 707 SOUTH GULFSTREAM AVE
 903
 City SARASOTA State FL Zip Code 34236-7710
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 04 / 2016
Transaction ID : SA11A.472265
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION

B. BLAKE, HELEN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 6799 S MARINA WAY
 City STUART State FL Zip Code 34996-1947
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1006.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 04 / 2016
Transaction ID : SA11A.473654
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION

C. BLAKE, KRISTI, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 101 SPRY ISLAND RD
 City JOPPA State MD Zip Code 21085-5440
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) BLAKES CRABS Occupation (for Individual) MNGR
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 350.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 26 / 2016
Transaction ID : SA11A.450368
 Amount of Each Receipt this Period
 50.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	250.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 337 OF 4311
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. BLAKE, MARY, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 3004 REBA DRIVE

City HOUSTON	State TX	Zip Code 77019-6204
-----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NOT APPLICABLE	Occupation (for Individual) HOMEMAKER & INVESTOR
---	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		25		2016

Transaction ID : SA11A.448926

Amount of Each Receipt this Period
250.00

Memo Item CONTRIBUTION

B. BLAKE, MARY, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 3004 REBA DRIVE

City HOUSTON	State TX	Zip Code 77019-6204
-----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NOT APPLICABLE	Occupation (for Individual) HOMEMAKER & INVESTOR
---	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11		04		2016

Transaction ID : SA11A.472919

Amount of Each Receipt this Period
250.00

Memo Item CONTRIBUTION

C. BLAKEMORE, PHILIP, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 102 3RD ST
PO BOX 7116

City HOLLIDAY	State MO	Zip Code 65258-7116
------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
323.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11		02		2016

Transaction ID : SA11A.466039

Amount of Each Receipt this Period
100.00

Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	600.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 338 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. BLAMEY, RICHARD, L., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 7603 FOUR MIKE CREEK RD
 City THREE LAKES State WI Zip Code 54562-
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 936.00

Date of Receipt 10 / 25 / 2016
Transaction ID : SA11A.448726
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

B. BLANTON, JUDITH, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 8822 FREDERICK PIKE
 City DAYTON State OH Zip Code 45414-1235
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 375.00

Date of Receipt 10 / 28 / 2016
Transaction ID : SA11A.455822
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

C. BLECHA, HENRY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO BOX 1744
 City RIDGECREST State CA Zip Code 93556-1744
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 414.00

Date of Receipt 11 / 01 / 2016
Transaction ID : SA11A.462810
 Amount of Each Receipt this Period 32.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	232.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 339 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. BLECKER, MARVIN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 12824 SILVER ACACIA PL
 City SAN DIEGO State CA Zip Code 92130-4899
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt 10 / 27 / 2016
Transaction ID : SA11A.456967
 Amount of Each Receipt this Period 1000.00
 Memo Item CONTRIBUTION

B. BLEIER, STEVEN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 223 GLENWOOD ROAD
 City ENGLEWOOD State NJ Zip Code 07631-1910
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) BRIGADE CAPITAL MGMT Occupation (for Individual) ASSET MANAGEMENT
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt 10 / 23 / 2016
Transaction ID : SA11A.446504
 Amount of Each Receipt this Period 1000.00
 Memo Item CONTRIBUTION

C. BLISS, DONALD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 34 TRUMAN
 City PALMYRA State PA Zip Code 17078-2955
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 459.00

Date of Receipt 10 / 26 / 2016
Transaction ID : SA11A.449717
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	2100.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 340 OF 4311
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. BLISS, DONALD, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 34 TRUMAN

City PALMYRA	State PA	Zip Code 17078-2955
-----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
459.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		26		2016

Transaction ID : SA11A.449718

Amount of Each Receipt this Period
100.00

Memo Item CONTRIBUTION

B. BLISS, DONALD, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 34 TRUMAN

City PALMYRA	State PA	Zip Code 17078-2955
-----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
459.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		26		2016

Transaction ID : SA11A.449723

Amount of Each Receipt this Period
100.00

Memo Item CONTRIBUTION

C. BLISS, DONALD, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 34 TRUMAN

City PALMYRA	State PA	Zip Code 17078-2955
-----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
459.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		31		2016

Transaction ID : SA11A.464104

Amount of Each Receipt this Period
50.00

Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	250.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 341 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. BLISS, WILLIAM, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3156 N 34TH ST
 City HOLLYWOOD State FL Zip Code 33021-2626
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) CONSULTING
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 522.00

Date of Receipt 10 / 31 / 2016
Transaction ID : SA11A.464425
 Amount of Each Receipt this Period 50.00
 Memo Item
CONTRIBUTION

B. BLISS, WILLIAM, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3156 N 34TH ST
 City HOLLYWOOD State FL Zip Code 33021-2626
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) CONSULTING
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 522.00

Date of Receipt 10 / 31 / 2016
Transaction ID : SA11A.464434
 Amount of Each Receipt this Period 50.00
 Memo Item
CONTRIBUTION

C. BLISS, WILLIAM, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3156 N 34TH ST
 City HOLLYWOOD State FL Zip Code 33021-2626
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) CONSULTING
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 522.00

Date of Receipt 11 / 07 / 2016
Transaction ID : SA11A.474899
 Amount of Each Receipt this Period 100.00
 Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	200.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 342 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
-----------------------------	-----------------------------	-----------------------------

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NAME OF COMMITTEE (In Full)
Team Ryan

A. BLOCK, CAROLEE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 62559 E BORDER ROCK ROAD
 City TUCSON State AZ Zip Code 85739-2460
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) INFORMATION REQUESTED PER BEST EFFORTS Occupation (for Individual) INFORMATION REQUESTED PER BE
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 300.00

Date of Receipt 11 / 07 / 2016
Transaction ID : SA11A.467883
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

B. BLOCK, MARK, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 318 WESTSHIRE RD
 City BALTIMORE State MD Zip Code 21229-2234
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SSA Occupation (for Individual) CLERK
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 625.00

Date of Receipt 10 / 21 / 2016
Transaction ID : SA11A.444306
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

C. BLOCK, MARK, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 318 WESTSHIRE RD
 City BALTIMORE State MD Zip Code 21229-2234
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SSA Occupation (for Individual) CLERK
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 625.00

Date of Receipt 10 / 21 / 2016
Transaction ID : SA11A.444320
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	225.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 343 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. BLOCK, MARK, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 318 WESTSHIRE RD
 City BALTIMORE State MD Zip Code 21229-2234
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SSA Occupation (for Individual) CLERK
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 625.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 07 / 2016
Transaction ID : SA11A.476285
 Amount of Each Receipt this Period
 100.00
 Memo Item
CONTRIBUTION

B. BLOCK, MARK, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 318 WESTSHIRE RD
 City BALTIMORE State MD Zip Code 21229-2234
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SSA Occupation (for Individual) CLERK
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 625.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 07 / 2016
Transaction ID : SA11A.476323
 Amount of Each Receipt this Period
 100.00
 Memo Item
CONTRIBUTION

C. BLOMSNESS, JEFFRTEY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 15 WILLOW BAY DRIVE
 City SOUTH BARRINGTON State IL Zip Code 60010-7116
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NORTH AMERICAN MIDWAY ENTERTAINMENT Occupation (for Individual) CEO
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 07 / 2016
Transaction ID : SA11A.476080
 Amount of Each Receipt this Period
 250.00
 Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	450.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 344 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. BLOMSNESS, JEFFRTEY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 15 WILLOW BAY DRIVE

City SOUTH BARRINGTON	State IL	Zip Code 60010-7116
--------------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NORTH AMERICAN MIDWAY ENTERTAINMENT	Occupation (for Individual) CEO
--	------------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
500.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 07 / 2016

Transaction ID : SA11A.476081

Amount of Each Receipt this Period
250.00

Memo Item
CONTRIBUTION

B. BLOOM, ROBERT, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address P. O. BOX 647

City GLEN ARBOR	State MI	Zip Code 49636-0647
--------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
235.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 23 / 2016

Transaction ID : SA11A.449585

Amount of Each Receipt this Period
25.00

Memo Item
CONTRIBUTION

C. BLOOM, ROBERT, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address P. O. BOX 647

City GLEN ARBOR	State MI	Zip Code 49636-0647
--------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
235.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 26 / 2016

Transaction ID : SA11A.450567

Amount of Each Receipt this Period
30.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	305.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 345 OF 4311
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. BLOOM, ROBERT, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address P. O. BOX 647

City GLEN ARBOR	State MI	Zip Code 49636-0647
FEC ID number of contributing federal political committee. C		
Name of Employer (for Individual) NONE		Occupation (for Individual) RETIRED
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 235.00	

Date of Receipt
MM / DD / YYYY
10 / 27 / 2016
Transaction ID : SA11A.453086

Amount of Each Receipt this Period
30.00

Memo Item CONTRIBUTION

B. BLOOM, ROBERT, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address P. O. BOX 647

City GLEN ARBOR	State MI	Zip Code 49636-0647
FEC ID number of contributing federal political committee. C		
Name of Employer (for Individual) NONE		Occupation (for Individual) RETIRED
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 235.00	

Date of Receipt
MM / DD / YYYY
11 / 07 / 2016
Transaction ID : SA11A.475704

Amount of Each Receipt this Period
25.00

Memo Item CONTRIBUTION

C. BLOOM, SEYMOUR, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 195 BURNHAM ROAD

City AVON	State CT	Zip Code 06001-2535
FEC ID number of contributing federal political committee. C		
Name of Employer (for Individual) NONE		Occupation (for Individual) RETIRED
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Aggregate Year-to-Date ▼ 350.00	

Date of Receipt
MM / DD / YYYY
10 / 23 / 2016
Transaction ID : SA11A.446374

Amount of Each Receipt this Period
50.00

Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	105.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 346 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. BLOOM, SEYMOUR, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 195 BURNHAM ROAD
 City AVON State CT Zip Code 06001-2535
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 350.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 05 / 2016
Transaction ID : SA11A.479215
 Amount of Each Receipt this Period
 25.00
 Memo Item
 CONTRIBUTION

B. BLOOM, SUE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3151 COWPER ST.
 City PALO ALTO State CA Zip Code 94306-3002
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 354.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 30 / 2016
Transaction ID : SA11A.460090
 Amount of Each Receipt this Period
 59.00
 Memo Item
 CONTRIBUTION

C. BLOOM, SUE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3151 COWPER ST.
 City PALO ALTO State CA Zip Code 94306-3002
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 354.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 04 / 2016
Transaction ID : SA11A.472039
 Amount of Each Receipt this Period
 59.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	143.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 347 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
Team Ryan

A. BLYTH, ROBERT, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1208 ATLANTIC
 City IDAHO FALLS State ID Zip Code 83404-7053
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) DOE IDAHO Occupation (for Individual) ENGINEER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 425.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 28 / 2016
Transaction ID : SA11A.461507
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION

B. BLYTH, ROBERT, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1208 ATLANTIC
 City IDAHO FALLS State ID Zip Code 83404-7053
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) DOE IDAHO Occupation (for Individual) ENGINEER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 425.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 02 / 2016
Transaction ID : SA11A.469628
 Amount of Each Receipt this Period
 50.00
 Memo Item
 CONTRIBUTION

C. BOAL, ROBERT, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 264 BROOKSHIRE PLACE
 City OCEAN ISLE BEACH State NC Zip Code 28469-5559
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 20 / 2016
Transaction ID : SA11A.442403
 Amount of Each Receipt this Period
 50.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	200.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 348 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. BOAL, ROBERT, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 264 BROOKSHIRE PLACE
 City OCEAN ISLE BEACH State NC Zip Code 28469-5559
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 11 / 04 / 2016
Transaction ID : SA11A.471786
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

B. BOCK, DAVID, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 8705 MENDOCINO DRIVE
 City AUSTIN State TX Zip Code 78735-1421
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 10 / 24 / 2016
Transaction ID : SA11A.445922
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

C. BOCK, JOHN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 6308. WILDWOOD CT
 City EL PASO State TX Zip Code 79912-3213
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 11 / 02 / 2016
Transaction ID : SA11A.465855
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	400.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 349 OF 4311
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name A. BODARY, KIRK, , ,		Date of Receipt
Mailing Address 2070 RISSER RD.		<input type="text" value="10"/> / <input type="text" value="27"/> / <input type="text" value="2016"/>
City CANANDAIGUA	State NY	Zip Code 14424-8087
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		Transaction ID : SA11A.452546
Name of Employer (for Individual) SELF EMPLOYED		Amount of Each Receipt this Period <input type="text" value="500.00"/>
Occupation (for Individual) PHYSICIAN		<input type="checkbox"/> Memo Item CONTRIBUTION
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ <input type="text" value="750.00"/>	

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name B. BODARY, KIRK, , ,		Date of Receipt
Mailing Address 2070 RISSER RD.		<input type="text" value="11"/> / <input type="text" value="02"/> / <input type="text" value="2016"/>
City CANANDAIGUA	State NY	Zip Code 14424-8087
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		Transaction ID : SA11A.469998
Name of Employer (for Individual) SELF EMPLOYED		Amount of Each Receipt this Period <input type="text" value="250.00"/>
Occupation (for Individual) PHYSICIAN		<input type="checkbox"/> Memo Item CONTRIBUTION
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ <input type="text" value="750.00"/>	

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name C. BODE, JOHN, W., MR,		Date of Receipt
Mailing Address 1701 PENNSYLVANIA AVE NW STE 950		<input type="text" value="11"/> / <input type="text" value="24"/> / <input type="text" value="2016"/>
City WASHINGTON	State DC	Zip Code 20006-5806
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		Transaction ID : SA11A.481120
Name of Employer (for Individual) CORN REFINERS ASSOCIATION		Amount of Each Receipt this Period <input type="text" value="2500.00"/>
Occupation (for Individual) PRESIDENT		<input type="checkbox"/> Memo Item CONTRIBUTION
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Aggregate Year-to-Date ▼ <input type="text" value="10000.00"/>	

SUBTOTAL of Receipts This Page (optional).....	<input type="text" value="3250.00"/>
TOTAL This Period (last page this line number only).....	<input type="text"/>

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 350 OF 4311
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. BODINE, ROBERT, J., MR.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 4351 GULF SHORE BOULEVARD N
APT 9S

City NAPLES State FL Zip Code 34103-2697

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1000.00

Date of Receipt
MM / DD / YYYY
10 / 27 / 2016

Transaction ID : SA11A.452306

Amount of Each Receipt this Period
1000.00

Memo Item CONTRIBUTION

B. BODORFF, RICHARD, J., MR.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1777 K ST NW

City WASHINGTON State DC Zip Code 20006-

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) WILEY REIN LLP Occupation (for Individual) PARTNER

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
6000.00

Date of Receipt
MM / DD / YYYY
11 / 03 / 2016

Transaction ID : SA11A.465191

Amount of Each Receipt this Period
5000.00

Memo Item CONTRIBUTION

C. BOEDIGHEIMER, ALEX, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1332 G ST SE

City WASHINGTON State DC Zip Code 20003-3021

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NRCC Occupation (for Individual) DIGITAL

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
385.00

Date of Receipt
MM / DD / YYYY
10 / 21 / 2016

Transaction ID : SA11A.444367

Amount of Each Receipt this Period
25.00

Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	6025.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 351 OF 4311
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. BOEDIGHEIMER, ALEX, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1332 G ST SE

City WASHINGTON	State DC	Zip Code 20003-3021
--------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NRCC	Occupation (for Individual) DIGITAL
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
385.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		24		2016

Transaction ID : SA11A.445880

Amount of Each Receipt this Period
25.00

Memo Item CONTRIBUTION

B. BOEDIGHEIMER, ALEX, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1332 G ST SE

City WASHINGTON	State DC	Zip Code 20003-3021
--------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NRCC	Occupation (for Individual) DIGITAL
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
385.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		28		2016

Transaction ID : SA11A.455930

Amount of Each Receipt this Period
25.00

Memo Item CONTRIBUTION

C. BOEDIGHEIMER, ALEX, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1332 G ST SE

City WASHINGTON	State DC	Zip Code 20003-3021
--------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NRCC	Occupation (for Individual) DIGITAL
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
385.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11		05		2016

Transaction ID : SA11A.478814

Amount of Each Receipt this Period
25.00

Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	75.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 352 OF 4311
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. BOESCHENSTEIN, MICHAEL, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 19923 CHAGRIN BOULEVARD
 City SHAKER HEIGHTS State OH Zip Code 44122-4915
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) INFORMATION REQUESTED PER BEST EFFORTS Occupation (for Individual) INFORMATION REQUESTED PER BE
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 400.00

Date of Receipt **10 / 27 / 2016**
Transaction ID : SA11A.452330
 Amount of Each Receipt this Period 200.00
 Memo Item CONTRIBUTION

B. BOGART, KAREN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5548 CAMINO CERRALVO
 City SANTA BARBARA State CA Zip Code 93111-1056
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SMITH BOGART CONSULTING Occupation (for Individual) CONSULTANT
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 1400.00

Date of Receipt **11 / 07 / 2016**
Transaction ID : SA11A.476115
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

C. BOGER, ALLEN, , MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 404 LOMAX COVE
 City AUSTIN State TX Zip Code 78732-2482
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 1000.00

Date of Receipt **10 / 26 / 2016**
Transaction ID : SA11A.454336
 Amount of Each Receipt this Period 1000.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 1300.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 353 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
Team Ryan

A. BOGGESS, JERRY'S, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 671 S OCEAN BLVD
 City BOCA RATON State FL Zip Code 33432-6220
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 11 / 06 / 2016
Transaction ID : SA11A.478287
 Amount of Each Receipt this Period
 250.00
 Memo Item
 CONTRIBUTION

B. BOGGS, JOHN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 6622 ST. RT. 361
 City KINGSTON State OH Zip Code 45644-9637
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 286.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 11 / 02 / 2016
Transaction ID : SA11A.466293
 Amount of Each Receipt this Period
 21.00
 Memo Item
 CONTRIBUTION

C. BOISVERT, STEPHANIE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2642 SHADOW COVE
 City ANNAPOLIS State MD Zip Code 21401-6820
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 275.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 10 / 25 / 2016
Transaction ID : SA11A.448093
 Amount of Each Receipt this Period
 50.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	321.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 354 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. BOISVERT, STEPHANIE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2642 SHADOW COVE
 City ANNAPOLIS State MD Zip Code 21401-6820
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 275.00

Date of Receipt 10 / 25 / 2016
Transaction ID : SA11A.448094
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

B. BOISVERT, STEPHANIE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2642 SHADOW COVE
 City ANNAPOLIS State MD Zip Code 21401-6820
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 275.00

Date of Receipt 10 / 31 / 2016
Transaction ID : SA11A.458060
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

C. BOISVERT, STEPHANIE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2642 SHADOW COVE
 City ANNAPOLIS State MD Zip Code 21401-6820
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 275.00

Date of Receipt 11 / 07 / 2016
Transaction ID : SA11A.480472
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	100.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 355 OF 4311
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. BOISVERT, STEPHANIE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2642 SHADOW COVE
 City ANNAPOLIS State MD Zip Code 21401-6820
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 275.00

Date of Receipt
 11 / 07 / 2016
Transaction ID : SA11A.480474
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

B. BOLAND, JOE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2525 POTOMAC AVE NE
 City ATLANTA State GA Zip Code 30305-3741
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt
 10 / 26 / 2016
Transaction ID : SA11A.450500
 Amount of Each Receipt this Period 1000.00
 Memo Item CONTRIBUTION

C. BOLING, HERMAN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4206 CENTRAL RIVER PARK
 City BERKELEY LAKE State GA Zip Code 30096-4030
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) ED VOYLES AUTOMOTIVE GROUP Occupation (for Individual) CFO
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt
 11 / 01 / 2016
Transaction ID : SA11A.462916
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 1275.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 356 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. BOLITHO, JAMES, H., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3711 SEQUOIA TRAIL
 City VERONA State WI Zip Code 53593-9639
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) WISCONSIN DOT Occupation (for Individual) LTE
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 993.00

Date of Receipt 10 / 28 / 2016
Transaction ID : SA11A.456065
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

B. BOLITHO, JAMES, H., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3711 SEQUOIA TRAIL
 City VERONA State WI Zip Code 53593-9639
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) WISCONSIN DOT Occupation (for Individual) LTE
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 993.00

Date of Receipt 11 / 04 / 2016
Transaction ID : SA11A.471492
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

C. BOLL, THEODORE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO BOX 874
 City MCLEAN State VA Zip Code 22101-0874
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) US SENATE Occupation (for Individual) ECONOMIST
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt 10 / 24 / 2016
Transaction ID : SA11A.443707
 Amount of Each Receipt this Period 1000.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 1200.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 357 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. BOLLING, DEBRA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1635 HEMINGWAY CT. NW
 City LAWRENCEVILLE State GA Zip Code 30043-3562
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 375.00

Date of Receipt **10 / 30 / 2016**
Transaction ID : SA11A.460122
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

B. BOLLING, DEBRA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1635 HEMINGWAY CT. NW
 City LAWRENCEVILLE State GA Zip Code 30043-3562
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 375.00

Date of Receipt **11 / 04 / 2016**
Transaction ID : SA11A.472585
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

C. BOLLINGER, JAN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5152 PICCADILLY CIRCLE
 City WESTMINSTER State CA Zip Code 92683-4837
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt **10 / 28 / 2016**
Transaction ID : SA11A.456011
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	200.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 358 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. BOLLINGER, JAN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5152 PICCADILLY CIRCLE

City WESTMINSTER	State CA	Zip Code 92683-4837
---------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
400.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 11 / 04 / 2016
Transaction ID : SA11A.473053

Amount of Each Receipt this Period
100.00

Memo Item CONTRIBUTION

B. BOLT, LELAND, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5155 CANTERBURY DRIVE

City SAN DIEGO	State CA	Zip Code 92116-2005
-------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1050.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 10 / 20 / 2016
Transaction ID : SA11A.442299

Amount of Each Receipt this Period
50.00

Memo Item CONTRIBUTION

C. BOLT, LELAND, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5155 CANTERBURY DRIVE

City SAN DIEGO	State CA	Zip Code 92116-2005
-------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
1050.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 11 / 04 / 2016
Transaction ID : SA11A.473613

Amount of Each Receipt this Period
100.00

Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	250.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 359 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. BOLTON, PAT, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 800 FLYING R RANCH RD W
 City SPRING BRANCH State TX Zip Code 78070-6106
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SAF-T-BOX, LP Occupation (for Individual) MANAGER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 475.00

Date of Receipt 10 / 21 / 2016
Transaction ID : SA11A.444290
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

B. BOMAN, RONALD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 355 NORTH 400 EAST
 City LOGAN State UT Zip Code 84321-4114
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 10 / 30 / 2016
Transaction ID : SA11A.460039
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

C. BOMAN, RONALD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 355 NORTH 400 EAST
 City LOGAN State UT Zip Code 84321-4114
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 11 / 01 / 2016
Transaction ID : SA11A.462412
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	200.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 360 OF 4311
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NAME OF COMMITTEE (In Full)
Team Ryan

A. BOMAN, RONALD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 355 NORTH 400 EAST
 City LOGAN State UT Zip Code 84321-4114
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 11 / 04 / 2016
Transaction ID : SA11A.471675
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

B. BOND, THOMAS, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 11391 WILSON MILLS ROAD
 City CHARDON State OH Zip Code 44024-9408
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 380.00

Date of Receipt 11 / 05 / 2016
Transaction ID : SA11A.479009
 Amount of Each Receipt this Period 30.00
 Memo Item CONTRIBUTION

C. BOND, THOMAS, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 11391 WILSON MILLS ROAD
 City CHARDON State OH Zip Code 44024-9408
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 380.00

Date of Receipt 11 / 05 / 2016
Transaction ID : SA11A.479012
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶ 105.00
TOTAL This Period (last page this line number only).....▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 361 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. BONE, TIMOTHY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2002 ANTELOPE DR.
 City ALPINE State TX Zip Code 79830-2104
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 270.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 29 / 2016
Transaction ID : SA11A.461119
 Amount of Each Receipt this Period
 25.00
 Memo Item
 CONTRIBUTION

B. BONE, TIMOTHY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2002 ANTELOPE DR.
 City ALPINE State TX Zip Code 79830-2104
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 270.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 04 / 2016
Transaction ID : SA11A.473512
 Amount of Each Receipt this Period
 25.00
 Memo Item
 CONTRIBUTION

C. BONE, TIMOTHY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2002 ANTELOPE DR.
 City ALPINE State TX Zip Code 79830-2104
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 270.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 05 / 2016
Transaction ID : SA11A.478686
 Amount of Each Receipt this Period
 25.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	75.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 362 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
Team Ryan

A. BONIN, JUDY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 187 EDGEFIELD LANE
 City STAUNTON State VA Zip Code 24401-6287
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) HORSE BOARDING BUSINESS
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 480.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 20 / 2016
Transaction ID : SA11A.442081
 Amount of Each Receipt this Period
 25.00
 Memo Item
 CONTRIBUTION

B. BONIN, JUDY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 187 EDGEFIELD LANE
 City STAUNTON State VA Zip Code 24401-6287
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) HORSE BOARDING BUSINESS
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 480.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 28 / 2016
Transaction ID : SA11A.455571
 Amount of Each Receipt this Period
 25.00
 Memo Item
 CONTRIBUTION

C. BONIN, JUDY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 187 EDGEFIELD LANE
 City STAUNTON State VA Zip Code 24401-6287
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) HORSE BOARDING BUSINESS
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 480.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 03 / 2016
Transaction ID : SA11A.468592
 Amount of Each Receipt this Period
 25.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	75.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 363 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. BONIN, JUDY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 187 EDGEFIELD LANE
 City STAUNTON State VA Zip Code 24401-6287
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) HORSE BOARDING BUSINESS
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 480.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 07 / 2016
Transaction ID : SA11A.475116
 Amount of Each Receipt this Period
 10.00
 Memo Item
 CONTRIBUTION

B. BONIN, JUDY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 187 EDGEFIELD LANE
 City STAUNTON State VA Zip Code 24401-6287
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) HORSE BOARDING BUSINESS
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 480.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 06 / 2016
Transaction ID : SA11A.478111
 Amount of Each Receipt this Period
 25.00
 Memo Item
 CONTRIBUTION

C. BONNETT, DAVID, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 15916 NE 7TH ST
 City VANCOUVER State WA Zip Code 98684-8747
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) ASML Occupation (for Individual) LITHO ENGINEER
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 280.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 04 / 2016
Transaction ID : SA11A.473127
 Amount of Each Receipt this Period
 25.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	60.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 364 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
Team Ryan

A. BONOMO, JOHN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 17025 SHERIDANS TRL
 City ORLAND PARK State IL Zip Code 60467-5405
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 340.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 23 / 2016
Transaction ID : SA11A.446284
 Amount of Each Receipt this Period
 25.00
 Memo Item
 CONTRIBUTION

B. BONOMO, JOHN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 17025 SHERIDANS TRL
 City ORLAND PARK State IL Zip Code 60467-5405
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 340.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 23 / 2016
Transaction ID : SA11A.446290
 Amount of Each Receipt this Period
 25.00
 Memo Item
 CONTRIBUTION

C. BONOMO, JOHN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 17025 SHERIDANS TRL
 City ORLAND PARK State IL Zip Code 60467-5405
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 340.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 26 / 2016
Transaction ID : SA11A.450830
 Amount of Each Receipt this Period
 25.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	75.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 365 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. BONOMO, JOHN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 17025 SHERIDANS TRL
 City ORLAND PARK State IL Zip Code 60467-5405
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 340.00

Date of Receipt 11 / 01 / 2016
Transaction ID : SA11A.462221
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

B. BONOMO, JOHN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 17025 SHERIDANS TRL
 City ORLAND PARK State IL Zip Code 60467-5405
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 340.00

Date of Receipt 11 / 01 / 2016
Transaction ID : SA11A.462223
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

C. BONOMO, JOHN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 17025 SHERIDANS TRL
 City ORLAND PARK State IL Zip Code 60467-5405
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 340.00

Date of Receipt 11 / 03 / 2016
Transaction ID : SA11A.468861
 Amount of Each Receipt this Period 30.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	80.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 366 OF 4311
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. BONOMO, JOHN, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 17025 SHERIDANS TRL

City ORLAND PARK	State IL	Zip Code 60467-5405
---------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
340.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	06	/	2016

Transaction ID : SA11A.477429

Amount of Each Receipt this Period
30.00

Memo Item CONTRIBUTION

B. BONSETT, DOTTY, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 3286 E CR 900 S

City WALTON	State IN	Zip Code 46994-9228
----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
437.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	24	/	2016

Transaction ID : SA11A.449470

Amount of Each Receipt this Period
25.00

Memo Item CONTRIBUTION

C. BONSETT, DOTTY, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 3286 E CR 900 S

City WALTON	State IN	Zip Code 46994-9228
----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
437.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	24	/	2016

Transaction ID : SA11A.449472

Amount of Each Receipt this Period
25.00

Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	80.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 367 OF 4311
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. BONSETT, DOTTY, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 3286 E CR 900 S

City WALTON	State IN	Zip Code 46994-9228
----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
437.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		31		2016

Transaction ID : SA11A.464475

Amount of Each Receipt this Period
25.00

Memo Item
CONTRIBUTION

B. BONSETT, DOTTY, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 3286 E CR 900 S

City WALTON	State IN	Zip Code 46994-9228
----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
437.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11		05		2016

Transaction ID : SA11A.478502

Amount of Each Receipt this Period
25.00

Memo Item
CONTRIBUTION

C. BONSETT, DOTTY, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 3286 E CR 900 S

City WALTON	State IN	Zip Code 46994-9228
----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
437.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11		07		2016

Transaction ID : SA11A.480320

Amount of Each Receipt this Period
25.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	75.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 368 OF 4311
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. BONSETT, DOTTY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3286 E CR 900 S
 City WALTON State IN Zip Code 46994-9228
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 437.00

Date of Receipt 11 / 07 / 2016
Transaction ID : SA11A.480322
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

B. BONYADI, DONNA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2856 W. LINCOLN AVENUE APT A4
 City ANAHEIM State CA Zip Code 92801-6223
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) HYUNDAI MOTOR AMERICA Occupation (for Individual) SALES TRAINING ASSOCIATE
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 11 / 04 / 2016
Transaction ID : SA11A.471514
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

C. BOOMERSHINE, WALTER, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4959 HABERSHAM WALK
 City GAINESVILLE State GA Zip Code 30504-5145
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 350.00

Date of Receipt 10 / 27 / 2016
Transaction ID : SA11A.452955
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶ 175.00
TOTAL This Period (last page this line number only).....▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 369 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. BOOMERSHINE, WALTER, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4959 HABERSHAM WALK
 City GAINESVILLE State GA Zip Code 30504-5145
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 350.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 10 / 28 / 2016
Transaction ID : SA11A.461300
 Amount of Each Receipt this Period
 50.00
 Memo Item
 CONTRIBUTION

B. BOOMERSHINE, WALTER, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4959 HABERSHAM WALK
 City GAINESVILLE State GA Zip Code 30504-5145
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 350.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 11 / 04 / 2016
Transaction ID : SA11A.470835
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION

C. BOONE, PRISCILLA, S., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4163 OAK PLACE DRIVE
 City WESTLAKE VILLAGE State CA Zip Code 91362-5129
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 1250.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 10 / 28 / 2016
Transaction ID : SA11A.455278
 Amount of Each Receipt this Period
 500.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	650.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 370 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. BOONE, PRISCILLA, S., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4163 OAK PLACE DRIVE
 City WESTLAKE VILLAGE State CA Zip Code 91362-5129
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1250.00

Date of Receipt 10 / 31 / 2016
Transaction ID : SA11A.464259
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

B. BOONE, PRISCILLA, S., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4163 OAK PLACE DRIVE
 City WESTLAKE VILLAGE State CA Zip Code 91362-5129
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1250.00

Date of Receipt 10 / 31 / 2016
Transaction ID : SA11A.464267
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

C. BOOTH, CLAUDIA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 7585 BRIDGEGATE COURT
 City ATLANTA State GA Zip Code 30350-4604
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) REGENCY HOME CARE Occupation (for Individual) DIRECTOR OF NURSING
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 480.00

Date of Receipt 11 / 04 / 2016
Transaction ID : SA11A.471981
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 525.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 371 OF 4311
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. BOOTHE, KENNETH, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1001 EAST FM 700
 City BIG SPRING State TX Zip Code 79720-5720
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) BOOTHE VASSAR AND CO Occupation (for Individual) CPA
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 380.00

Date of Receipt 10 / 21 / 2016
Transaction ID : SA11A.444274
 Amount of Each Receipt this Period 50.00
 Memo Item
CONTRIBUTION

B. BOOTHE, KENNETH, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1001 EAST FM 700
 City BIG SPRING State TX Zip Code 79720-5720
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) BOOTHE VASSAR AND CO Occupation (for Individual) CPA
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 380.00

Date of Receipt 10 / 28 / 2016
Transaction ID : SA11A.455925
 Amount of Each Receipt this Period 50.00
 Memo Item
CONTRIBUTION

C. BOOTHE, KENNETH, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1001 EAST FM 700
 City BIG SPRING State TX Zip Code 79720-5720
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) BOOTHE VASSAR AND CO Occupation (for Individual) CPA
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 380.00

Date of Receipt 11 / 03 / 2016
Transaction ID : SA11A.468993
 Amount of Each Receipt this Period 30.00
 Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	130.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 372 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name A. BOOTHE, KENNETH, , ,		Date of Receipt MM / DD / YYYY 11 / 03 / 2016 Transaction ID : SA11A.469001
Mailing Address 1001 EAST FM 700		Amount of Each Receipt this Period 100.00
City BIG SPRING	State TX	Zip Code 79720-5720
FEC ID number of contributing federal political committee. C		<input type="checkbox"/> Memo Item CONTRIBUTION
Name of Employer (for Individual) BOOTHE VASSAR AND CO	Occupation (for Individual) CPA	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 380.00	

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name B. BOOTHE, KENNETH, , ,		Date of Receipt MM / DD / YYYY 11 / 07 / 2016 Transaction ID : SA11A.476375
Mailing Address 1001 EAST FM 700		Amount of Each Receipt this Period 25.00
City BIG SPRING	State TX	Zip Code 79720-5720
FEC ID number of contributing federal political committee. C		<input type="checkbox"/> Memo Item CONTRIBUTION
Name of Employer (for Individual) BOOTHE VASSAR AND CO	Occupation (for Individual) CPA	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 380.00	

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name C. BOOTHE, KENNETH, , ,		Date of Receipt MM / DD / YYYY 11 / 07 / 2016 Transaction ID : SA11A.476384
Mailing Address 1001 EAST FM 700		Amount of Each Receipt this Period 25.00
City BIG SPRING	State TX	Zip Code 79720-5720
FEC ID number of contributing federal political committee. C		<input type="checkbox"/> Memo Item CONTRIBUTION
Name of Employer (for Individual) BOOTHE VASSAR AND CO	Occupation (for Individual) CPA	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Aggregate Year-to-Date ▼ 380.00	

SUBTOTAL of Receipts This Page (optional).....▶	150.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 373 OF 4311
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. BORKEY, JOHN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 7 HANNA COURT
 City CLEVELAND State OH Zip Code 44108-1162
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) PEPCO Occupation (for Individual) C.E.O.
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 600.00

Date of Receipt **10 / 28 / 2016**
Transaction ID : SA11A.456198
 Amount of Each Receipt this Period 300.00
 Memo Item
CONTRIBUTION

B. BORKEY, JOHN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 7 HANNA COURT
 City CLEVELAND State OH Zip Code 44108-1162
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) PEPCO Occupation (for Individual) C.E.O.
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 600.00

Date of Receipt **11 / 04 / 2016**
Transaction ID : SA11A.471279
 Amount of Each Receipt this Period 300.00
 Memo Item
CONTRIBUTION

C. BORNE, EDWIN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 69 CHATEAU LATOUR DR.
 City KENNER State LA Zip Code 70065-2020
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) TCS Occupation (for Individual) SALES
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt **10 / 26 / 2016**
Transaction ID : SA11A.454655
 Amount of Each Receipt this Period 200.00
 Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶ 800.00
TOTAL This Period (last page this line number only).....▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 374 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
Team Ryan

A. BORNE, EDWIN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 69 CHATEAU LATOUR DR.
 City KENNER State LA Zip Code 70065-2020
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) TCS Occupation (for Individual) SALES
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt 11 / 04 / 2016
Transaction ID : SA11A.470831
 Amount of Each Receipt this Period 200.00
 Memo Item
 CONTRIBUTION

B. BORSOS, CATHY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 28324 KNICKERBOCKER RD.
 City BAY VILLAGE State OH Zip Code 44140-2159
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 209.00

Date of Receipt 10 / 29 / 2016
Transaction ID : SA11A.460602
 Amount of Each Receipt this Period 50.00
 Memo Item
 CONTRIBUTION

C. BORTZ, NEIL, K., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1055 ST. PAUL PL NA
 City CINCINNATI State OH Zip Code 45202-6042
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) TOWNE PROPERTIES Occupation (for Individual) REAL ESTATE
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 5500.00

Date of Receipt 10 / 25 / 2016
Transaction ID : SA11A.447846
 Amount of Each Receipt this Period 1000.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	1250.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 375 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
Team Ryan

A. BORTZ, NEIL, K., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1055 ST. PAUL PL
 NA
 City CINCINNATI State OH Zip Code 45202-6042
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) TOWNE PROPERTIES Occupation (for Individual) REAL ESTATE
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 5500.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 04 / 2016
Transaction ID : SA11A.474249
 Amount of Each Receipt this Period
 1000.00
 Memo Item
 CONTRIBUTION

B. BOSANKO, THOMAS, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 13224 PIEDMONT VISTA DRIVE
 City HAYMARKET State VA Zip Code 20169-2645
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) ICAROS, INC. Occupation (for Individual) CEO
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 700.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 21 / 2016
Transaction ID : SA11A.444601
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION

C. BOSANKO, THOMAS, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 13224 PIEDMONT VISTA DRIVE
 City HAYMARKET State VA Zip Code 20169-2645
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) ICAROS, INC. Occupation (for Individual) CEO
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 700.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 04 / 2016
Transaction ID : SA11A.472721
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	1200.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 376 OF 4311
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. BOSTWICK, JULIE, M., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5819 N VISTA LANE
 City SPOKANE State WA Zip Code 99212-1680
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 240.00

Date of Receipt 10 / 24 / 2016
Transaction ID : SA11A.443771
 Amount of Each Receipt this Period 35.00
 Memo Item CONTRIBUTION

B. BOTHE, KENT, , MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 7410 1ST AVW.
 City KENOSHA State WI Zip Code 53143-5562
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) BOTHE ASSOC. ,INC. Occupation (for Individual) CONSULTANT
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1200.00

Date of Receipt 11 / 02 / 2016
Transaction ID : SA11A.466331
 Amount of Each Receipt this Period 500.00
 Memo Item CONTRIBUTION

C. BOUDREAUX, BOYD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO BOX 499
 City HACKBERRY State LA Zip Code 70645-0499
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) JD BANK Occupation (for Individual) BANKER
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 11 / 02 / 2016
Transaction ID : SA11A.466448
 Amount of Each Receipt this Period 300.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	835.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 377 OF 4311
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. BOUDREAU, DEYAUN, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 825 BEACH BLVD.

City LAGUNA VISTA	State TX	Zip Code 78578-2621
----------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) SAN BENITO CISD	Occupation (for Individual) EDUCATOR
--	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
287.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	27	/	2016

Transaction ID : SA11A.453079

Amount of Each Receipt this Period
25.00

Memo Item
CONTRIBUTION

B. BOUDREAU, DEYAUN, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 825 BEACH BLVD.

City LAGUNA VISTA	State TX	Zip Code 78578-2621
----------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) SAN BENITO CISD	Occupation (for Individual) EDUCATOR
--	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
287.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	31	/	2016

Transaction ID : SA11A.464186

Amount of Each Receipt this Period
25.00

Memo Item
CONTRIBUTION

C. BOUDREAU, DEYAUN, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 825 BEACH BLVD.

City LAGUNA VISTA	State TX	Zip Code 78578-2621
----------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) SAN BENITO CISD	Occupation (for Individual) EDUCATOR
--	---

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
287.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	04	/	2016

Transaction ID : SA11A.473935

Amount of Each Receipt this Period
25.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	75.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 378 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. BOUDREAUX, DEYAUN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 825 BEACH BLVD.
 City LAGUNA VISTA State TX Zip Code 78578-2621
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SAN BENITO CISD Occupation (for Individual) EDUCATOR
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 287.00

Date of Receipt 11 / 06 / 2016
Transaction ID : SA11A.478164
 Amount of Each Receipt this Period 10.00
 Memo Item CONTRIBUTION

B. BOUDREAUX, DEYAUN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 825 BEACH BLVD.
 City LAGUNA VISTA State TX Zip Code 78578-2621
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SAN BENITO CISD Occupation (for Individual) EDUCATOR
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 287.00

Date of Receipt 11 / 05 / 2016
Transaction ID : SA11A.478519
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

C. BOUDREAU, KEN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 516 PACIFIC DR
 City LAHAINA State HI Zip Code 96761-9000
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt 11 / 04 / 2016
Transaction ID : SA11A.479578
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	135.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 379 OF 4311
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. BOURGEOIS, SUSAN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1191 W I 10 FRONTAGE ROAD
 City SCHULENBURG State TX Zip Code 78956-5637
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 10 / 31 / 2016
Transaction ID : SA11A.459096
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

B. BOURN, WARD, C., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 108 SHERIFFS PLACE
 City WILLIAMSBURG State VA Zip Code 23185-4922
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 332.00

Date of Receipt 10 / 24 / 2016
Transaction ID : SA11A.449259
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

C. BOURN, WARD, C., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 108 SHERIFFS PLACE
 City WILLIAMSBURG State VA Zip Code 23185-4922
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 332.00

Date of Receipt 11 / 02 / 2016
Transaction ID : SA11A.465895
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶ 175.00
TOTAL This Period (last page this line number only).....▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 380 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. BOURN, WARD, C., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 108 SHERIFFS PLACE
 City WILLIAMSBURG State VA Zip Code 23185-4922
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 332.00

Date of Receipt 11 / 06 / 2016
Transaction ID : SA11A.476737
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

B. BOURN, WARD, C., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 108 SHERIFFS PLACE
 City WILLIAMSBURG State VA Zip Code 23185-4922
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 332.00

Date of Receipt 11 / 06 / 2016
Transaction ID : SA11A.476742
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

C. BOUSA, MAUREEN, F., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 11 ARLINGTON ROAD
 City WELLESLEY HILLS State MA Zip Code 02481-6105
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) COMMUNITY VOLUNTEER Occupation (for Individual) COMMUNITY VOLUNTEER
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt 10 / 28 / 2016
Transaction ID : SA11A.454790
 Amount of Each Receipt this Period 1000.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 1050.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 381 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. BOUTAIN, DANA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 400 PALOMARES AVE
 City VENTURA State CA Zip Code 93003-1738
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) CBIZ MHM, LLC Occupation (for Individual) CPA
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 28 / 2016
Transaction ID : SA11A.456080
 Amount of Each Receipt this Period
 50.00
 Memo Item
CONTRIBUTION

B. BOUTAIN, DANA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 400 PALOMARES AVE
 City VENTURA State CA Zip Code 93003-1738
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) CBIZ MHM, LLC Occupation (for Individual) CPA
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 04 / 2016
Transaction ID : SA11A.470822
 Amount of Each Receipt this Period
 50.00
 Memo Item
CONTRIBUTION

C. BOUTON, KARA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 929 ROYAL OAKS DRIVE
 City MONROVIA State CA Zip Code 91016-3755
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) ALLAN COMPANY Occupation (for Individual) REAL ESTATE MANAGER
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 361.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 30 / 2016
Transaction ID : SA11A.459692
 Amount of Each Receipt this Period
 75.00
 Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	175.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 382 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. BOWEN, CHRISTOPHER, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 131 OLD COLONY ROAD
 City EASTFORD State CT Zip Code 06242-9456
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) EASTFORD FIRE & RESCUE SALES, INC. Occupation (for Individual) BUSINESS OWNER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1244.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 31 / 2016
Transaction ID : SA11A.458045
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION

B. BOWEN, CHRISTOPHER, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 131 OLD COLONY ROAD
 City EASTFORD State CT Zip Code 06242-9456
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) EASTFORD FIRE & RESCUE SALES, INC. Occupation (for Individual) BUSINESS OWNER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1244.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 04 / 2016
Transaction ID : SA11A.473854
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION

C. BOWEN, CHRISTOPHER, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 131 OLD COLONY ROAD
 City EASTFORD State CT Zip Code 06242-9456
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) EASTFORD FIRE & RESCUE SALES, INC. Occupation (for Individual) BUSINESS OWNER
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 1244.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 04 / 2016
Transaction ID : SA11A.474324
 Amount of Each Receipt this Period
 50.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	250.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 383 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. BOWEN, CHRISTOPHER, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 131 OLD COLONY ROAD
 City EASTFORD State CT Zip Code 06242-9456
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) EASTFORD FIRE & RESCUE SALES, INC. Occupation (for Individual) BUSINESS OWNER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1244.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 11 / 07 / 2016
Transaction ID : SA11A.475675
 Amount of Each Receipt this Period
 50.00
 Memo Item
 CONTRIBUTION

B. BOWEN, DENNIS, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 69 BIRCH RD
 City SHELBURNE State VT Zip Code 05482-6893
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 445.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 10 / 27 / 2016
Transaction ID : SA11A.453863
 Amount of Each Receipt this Period
 27.00
 Memo Item
 CONTRIBUTION

C. BOWEN, DENNIS, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 69 BIRCH RD
 City SHELBURNE State VT Zip Code 05482-6893
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 445.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 11 / 04 / 2016
Transaction ID : SA11A.472936
 Amount of Each Receipt this Period
 27.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶ 104.00
TOTAL This Period (last page this line number only).....▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 384 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
Team Ryan

A. BOWEN, ROBERT, C., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 6930 E FLAT IRON COURT
 City GOLD CANYON State AZ Zip Code 85118-1873
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) BOWEN & ASSOC. Occupation (for Individual) EXECUTIVE
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 600.00

Date of Receipt 11 / 07 / 2016
Transaction ID : SA11A.467856
 Amount of Each Receipt this Period 400.00
 Memo Item CONTRIBUTION

B. BOWERS, BARBARA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address P.O. BOX 859
 City EAST DENNIS State MA Zip Code 02641-0859
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 409.00

Date of Receipt 10 / 30 / 2016
Transaction ID : SA11A.459505
 Amount of Each Receipt this Period 259.00
 Memo Item CONTRIBUTION

C. BOWER, CHRISTOPHER, M., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO BOX 487
 City BRYN ATHYN State PA Zip Code 19009-0487
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) INFORMATION REQUESTED PER BEST EFFORTS Occupation (for Individual) INFORMATION REQUESTED PER BES
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 1500.00

Date of Receipt 10 / 28 / 2016
Transaction ID : SA11A.449671
 Amount of Each Receipt this Period 1500.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	2159.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 385 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. BOWERS, DANIEL, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 803 DONALD ROSS RD
 City JUNO BEACH State FL Zip Code 33408-1604
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) JBD Occupation (for Individual) OWNER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 359.00

Date of Receipt 10 / 28 / 2016
Transaction ID : SA11A.455375
 Amount of Each Receipt this Period 100.00
 Memo Item
CONTRIBUTION

B. BOWERS, ROBERT, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2446 DURAND DRIVE
 City DOWNERS GROVE State IL Zip Code 60516-1052
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt 10 / 20 / 2016
Transaction ID : SA11A.442246
 Amount of Each Receipt this Period 1000.00
 Memo Item
CONTRIBUTION

C. BOWLAND, MARK, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2861 HILLMAN ST.
 City THOUSAND OAKS State CA Zip Code 91360-6534
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) GREAT WESTERN FOILS, INC. Occupation (for Individual) SMALL BUSINESS OWNER
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 10 / 20 / 2016
Transaction ID : SA11A.442300
 Amount of Each Receipt this Period 250.00
 Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	1350.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 386 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. BOWLER, BARBARA, J., MRS.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 3532 LIME TREE COURT

City WALNUT CREEK	State CA	Zip Code 94598-2724
----------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) HOMEMAKER
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
425.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		25		2016

Transaction ID : SA11A.447275

Amount of Each Receipt this Period
100.00

Memo Item CONTRIBUTION

B. BOWLER, BARBARA, J., MRS.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 3532 LIME TREE COURT

City WALNUT CREEK	State CA	Zip Code 94598-2724
----------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) HOMEMAKER
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
425.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11		08		2016

Transaction ID : SA11A.467937

Amount of Each Receipt this Period
50.00

Memo Item CONTRIBUTION

C. BOWLIN, CATHERINE, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 5237 CLAYSVILLE RD

City CAMBRIDGE	State OH	Zip Code 43725-9767
-------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11		02		2016

Transaction ID : SA11A.466687

Amount of Each Receipt this Period
50.00

Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	200.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 387 OF 4311
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. BOWLIN, CATHERINE, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 5237 CLAYSVILLE RD

City CAMBRIDGE	State OH	Zip Code 43725-9767
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11		05		2016

Transaction ID : SA11A.478799

Amount of Each Receipt this Period
25.00

Memo Item CONTRIBUTION

B. BOWLIN, CATHERINE, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 5237 CLAYSVILLE RD

City CAMBRIDGE	State OH	Zip Code 43725-9767
-------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11		05		2016

Transaction ID : SA11A.478800

Amount of Each Receipt this Period
25.00

Memo Item CONTRIBUTION

C. BOWLIN, MIKE, , MR.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 4800 ZION HILL ROAD

City WEATHERFORD	State TX	Zip Code 76088-7453
---------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) SELF EMPLOYED	Occupation (for Individual) RANCHER
--	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
1500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		24		2016

Transaction ID : SA11A.443734

Amount of Each Receipt this Period
500.00

Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	550.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 388 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
Team Ryan

A. BOWMAN, ANN, H., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 89425 BARK POINT ROAD
 City HERBSTER State WI Zip Code 54844-4450
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 919.00

Date of Receipt 10 / 31 / 2016
Transaction ID : SA11A.463320
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

B. BOWMAN, ANN, H., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 89425 BARK POINT ROAD
 City HERBSTER State WI Zip Code 54844-4450
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 919.00

Date of Receipt 10 / 31 / 2016
Transaction ID : SA11A.463321
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

C. BOWMAN, LARRY, D., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 12426 MEDALIST PKWY
 City CARMEL State IN Zip Code 46033-8933
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 255.00

Date of Receipt 10 / 24 / 2016
Transaction ID : SA11A.443810
 Amount of Each Receipt this Period 70.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	170.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 389 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
Team Ryan

A. BOWMAN, LARRY, D., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 12426 MEDALIST PKWY
 City CARMEL State IN Zip Code 46033-8933
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 255.00

Date of Receipt 10 / 28 / 2016
Transaction ID : SA11A.455367
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

B. BOWMAN, MARY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1260 CREST LANE
 City MCLEAN State VA Zip Code 22101-1839
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1250.00

Date of Receipt 11 / 01 / 2016
Transaction ID : SA11A.461694
 Amount of Each Receipt this Period 1000.00
 Memo Item CONTRIBUTION

C. BOWS, DAVID, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO BOX 3437
 City PONTE VEDRA BEACH State FL Zip Code 32004-3437
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 475.00

Date of Receipt 10 / 31 / 2016
Transaction ID : SA11A.458144
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	1075.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 390 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
Team Ryan

A. BOWS, DAVID, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO BOX 3437
 City PONTE VEDRA BEACH State FL Zip Code 32004-3437
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 475.00

Date of Receipt 11 / 03 / 2016
Transaction ID : SA11A.468452
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

B. BOXER, MICHAEL, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 8451 EAST BROOKWOOD
 City TUCSON State AZ Zip Code 85750-2469
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) ARIZONA ONCOLOGY Occupation (for Individual) PHYSICIAN
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 850.00

Date of Receipt 10 / 25 / 2016
Transaction ID : SA11A.451924
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

C. BOXER, MICHAEL, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 8451 EAST BROOKWOOD
 City TUCSON State AZ Zip Code 85750-2469
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) ARIZONA ONCOLOGY Occupation (for Individual) PHYSICIAN
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 850.00

Date of Receipt 10 / 25 / 2016
Transaction ID : SA11A.451938
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	525.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 391 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
Team Ryan

A. BOXER, MICHAEL, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 8451 EAST BROOKWOOD
 City TUCSON State AZ Zip Code 85750-2469
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) ARIZONA ONCOLOGY Occupation (for Individual) PHYSICIAN
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 850.00

Date of Receipt 11 / 04 / 2016
Transaction ID : SA11A.473035
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

B. BOYCE, FRANCES, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2941 N F STREET
 City SAN BERNARDINO State CA Zip Code 92405-3347
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 10 / 26 / 2016
Transaction ID : SA11A.451099
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

C. BOYCE, FRANCES, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2941 N F STREET
 City SAN BERNARDINO State CA Zip Code 92405-3347
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 11 / 04 / 2016
Transaction ID : SA11A.472874
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	350.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 392 OF 4311
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. BOYD, JAN, M., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1508 WATAUGA STREET
 City KINGSPORT State TN Zip Code 37664-2565
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) INFORMATION REQUESTED PER BEST EFFORTS Occupation (for Individual) INFORMATION REQUESTED PER BE
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 250.00

Date of Receipt **10 / 20 / 2016**
Transaction ID : SA11A.433443
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

B. BOYER, LEROY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2641 NW GRAND BLVD
 City OKLAHOMA CITY State OK Zip Code 73116-4001
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) ATTORNEY
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 600.00

Date of Receipt **11 / 07 / 2016**
Transaction ID : SA11A.475372
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

C. BOYER, LYNDON, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1435 PIONEER ROAD
 City PONCA CITY State OK Zip Code 74604-3924
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) Aggregate Year-to-Date ▼ 250.00

Date of Receipt **10 / 28 / 2016**
Transaction ID : SA11A.454743
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	600.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 393 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
Team Ryan

A. BOYLE, TP, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1775 SHERMAN STREET
 1425
 City DENVER State CO Zip Code 80203-4320
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) B/A,PC Occupation (for Individual) ATTORNEY
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 450.00

Date of Receipt 11 / 05 / 2016
Transaction ID : SA11A.480938
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

B. BOYLE, TP, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1775 SHERMAN STREET
 1425
 City DENVER State CO Zip Code 80203-4320
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) B/A,PC Occupation (for Individual) ATTORNEY
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 450.00

Date of Receipt 11 / 05 / 2016
Transaction ID : SA11A.480939
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

C. BOYSEN, ROBERT, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3585 ASTER AVENUE
 City FEASTERVILLE TREVO State PA Zip Code 19053-4906
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) STATE OF NEW JERSEY Occupation (for Individual) INSTRUCTOR COUNSELOR
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 255.00

Date of Receipt 10 / 31 / 2016
Transaction ID : SA11A.463752
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	225.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 394 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
Team Ryan

A. BOYSEN, ROBERT, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3585 ASTER AVENUE
 City FEASTERVILLE TREVO State PA Zip Code 19053-4906
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) STATE OF NEW JERSEY Occupation (for Individual) INSTRUCTOR COUNSELOR
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 255.00

Date of Receipt **11 / 04 / 2016**
Transaction ID : SA11A.473770
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

B. BRACAMONTES, FRANCISCO, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1200 E. SAVANNAH SUITE 20
 City MCALLEN State TX Zip Code 78503-1728
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) FRANCISCO BRACAMONTES Occupation (for Individual) DOCTORS HOSPITAL AT REINASSAI
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 350.00

Date of Receipt **10 / 30 / 2016**
Transaction ID : SA11A.459348
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

C. BRACKEN, BARTH, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 909 NW 71ST
 City OKC State OK Zip Code 73116-
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) BRACKEN ENERGY Occupation (for Individual) GEOLOGIST
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 1784.00

Date of Receipt **10 / 23 / 2016**
Transaction ID : SA11A.449625
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	325.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 395 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
Team Ryan

A. BRACKEN, JUDITH, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 920 TYNE BLVD
 City NASHVILLE State TN Zip Code 37220-1507
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1550.00

Date of Receipt 10 / 22 / 2016
Transaction ID : SA11A.447049
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

B. BRACKEN, JUDITH, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 920 TYNE BLVD
 City NASHVILLE State TN Zip Code 37220-1507
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1550.00

Date of Receipt 10 / 22 / 2016
Transaction ID : SA11A.447050
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

C. BRACKEN, JUDITH, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 920 TYNE BLVD
 City NASHVILLE State TN Zip Code 37220-1507
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1550.00

Date of Receipt 10 / 29 / 2016
Transaction ID : SA11A.461236
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	250.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 396 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. BRACKEN, JUDITH, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 920 TYNE BLVD
 City NASHVILLE State TN Zip Code 37220-1507
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1550.00

Date of Receipt
 11 / 03 / 2016
Transaction ID : SA11A.468534
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION

B. BRACKEN, JUDITH, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 920 TYNE BLVD
 City NASHVILLE State TN Zip Code 37220-1507
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1550.00

Date of Receipt
 11 / 03 / 2016
Transaction ID : SA11A.468536
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION

C. BRACKEN, JUDITH, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 920 TYNE BLVD
 City NASHVILLE State TN Zip Code 37220-1507
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1550.00

Date of Receipt
 11 / 02 / 2016
Transaction ID : SA11A.469393
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	300.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 397 OF 4311
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 15	<input type="checkbox"/> 12
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. BRACKEN, JUDITH, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 920 TYNE BLVD

City NASHVILLE	State TN	Zip Code 37220-1507
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
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Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1550.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11		07		2016

Transaction ID : SA11A.475892

Amount of Each Receipt this Period
50.00

Memo Item
CONTRIBUTION

B. BRACKEN, JUDITH, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 920 TYNE BLVD

City NASHVILLE	State TN	Zip Code 37220-1507
-------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
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Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1550.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11		05		2016

Transaction ID : SA11A.478324

Amount of Each Receipt this Period
100.00

Memo Item
CONTRIBUTION

C. BRACKEN, JUDITH, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 920 TYNE BLVD

City NASHVILLE	State TN	Zip Code 37220-1507
-------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
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Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
1550.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11		07		2016

Transaction ID : SA11A.479881

Amount of Each Receipt this Period
100.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	250.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 398 OF 4311
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. BRACKER, PAMELA, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 7564 SWEETWATER LANE

City HIGHLAND	State CA	Zip Code 92346-3976
------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) PAM BRACKER	Occupation (for Individual) RN
--	-----------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
425.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		20		2016

Transaction ID : SA11A.442629

Amount of Each Receipt this Period
25.00

Memo Item
CONTRIBUTION

B. BRACKER, PAMELA, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 7564 SWEETWATER LANE

City HIGHLAND	State CA	Zip Code 92346-3976
------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) PAM BRACKER	Occupation (for Individual) RN
--	-----------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
425.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		29		2016

Transaction ID : SA11A.460407

Amount of Each Receipt this Period
50.00

Memo Item
CONTRIBUTION

C. BRACKETT, ROSALYN, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 2102 COLLEGE STREET

City JACKSONVILLE	State FL	Zip Code 32204-3706
----------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
450.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		29		2016

Transaction ID : SA11A.460703

Amount of Each Receipt this Period
250.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	325.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 399 OF 4311
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. BRADFORD, DEBBIE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 414 WEST MAIN ST.
 City CLEVELAND State NC Zip Code 27013-9296
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 225.00

Date of Receipt 10 / 30 / 2016
Transaction ID : SA11A.460207
 Amount of Each Receipt this Period 75.00
 Memo Item CONTRIBUTION

B. BRADFORD, DEBBIE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 414 WEST MAIN ST.
 City CLEVELAND State NC Zip Code 27013-9296
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 225.00

Date of Receipt 11 / 04 / 2016
Transaction ID : SA11A.470900
 Amount of Each Receipt this Period 75.00
 Memo Item CONTRIBUTION

C. BRADFORD, JAMES, A., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2500 ABERDEEN ROAD
 City BIRMINGHAM State AL Zip Code 35223-1010
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) BALCH BINGHAM Occupation (for Individual) ATTORNEY
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 10 / 21 / 2016
Transaction ID : SA11A.444366
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 250.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 400 OF 4311
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. BRADFORD, JAMES, A., MR.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 2500 ABERDEEN ROAD

City BIRMINGHAM	State AL	Zip Code 35223-1010
--------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) BALCH BINGHAM	Occupation (for Individual) ATTORNEY
--	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt
10 / 31 / 2016
Transaction ID : SA11A.458796

Amount of Each Receipt this Period
50.00

Memo Item CONTRIBUTION

B. BRADFORD, JOSEPH, U., MR.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 4946 RIO VERDE DRIVE

City SAN JOSE	State CA	Zip Code 95118-2335
------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
868.00

Date of Receipt
10 / 30 / 2016
Transaction ID : SA11A.460094

Amount of Each Receipt this Period
100.00

Memo Item CONTRIBUTION

C. BRADFORD, JOSEPH, U., MR.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 4946 RIO VERDE DRIVE

City SAN JOSE	State CA	Zip Code 95118-2335
------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
868.00

Date of Receipt
10 / 31 / 2016
Transaction ID : SA11A.464577

Amount of Each Receipt this Period
100.00

Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	250.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 401 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. BRADFORD, JOSEPH, U., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4946 RIO VERDE DRIVE
 City SAN JOSE State CA Zip Code 95118-2335
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 868.00

Date of Receipt 10 / 31 / 2016
Transaction ID : SA11A.464579
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

B. BRADFORD, JOSEPH, U., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4946 RIO VERDE DRIVE
 City SAN JOSE State CA Zip Code 95118-2335
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 868.00

Date of Receipt 11 / 04 / 2016
Transaction ID : SA11A.472401
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

C. BRADFORD, PHILIP, J., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3510 OTTAWA LANE
 City COOPER CITY State FL Zip Code 33026-4617
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 255.00

Date of Receipt 10 / 25 / 2016
Transaction ID : SA11A.448131
 Amount of Each Receipt this Period 10.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	210.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 402 OF 4311
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. BRADFORD, PHILIP, J., ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 3510 OTTAWA LANE

City COOPER CITY	State FL	Zip Code 33026-4617
---------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
255.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		25		2016

Transaction ID : SA11A.448132

Amount of Each Receipt this Period

60.00

Memo Item
CONTRIBUTION

B. BRADFORD, PHILIP, J., ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 3510 OTTAWA LANE

City COOPER CITY	State FL	Zip Code 33026-4617
---------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
255.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		31		2016

Transaction ID : SA11A.458402

Amount of Each Receipt this Period

25.00

Memo Item
CONTRIBUTION

C. BRADFORD, PHILIP, J., ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 3510 OTTAWA LANE

City COOPER CITY	State FL	Zip Code 33026-4617
---------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
255.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11		07		2016

Transaction ID : SA11A.475470

Amount of Each Receipt this Period

25.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	60.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 403 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. BRADLEY, BETTYE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 321 EAST 54TH STREET
 4G
 City NEW YORK State NY Zip Code 10022-4933
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 489.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 26 / 2016
Transaction ID : SA11A.450595
 Amount of Each Receipt this Period
 25.00
 Memo Item
 CONTRIBUTION

B. BRADLEY, BETTYE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 321 EAST 54TH STREET
 4G
 City NEW YORK State NY Zip Code 10022-4933
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 489.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 04 / 2016
Transaction ID : SA11A.473014
 Amount of Each Receipt this Period
 25.00
 Memo Item
 CONTRIBUTION

C. BRADLEY, BETTYE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 321 EAST 54TH STREET
 4G
 City NEW YORK State NY Zip Code 10022-4933
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 489.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 06 / 2016
Transaction ID : SA11A.477052
 Amount of Each Receipt this Period
 25.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	75.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 404 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. BRADLEY, PETER, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 531 E ZERMATT CT

City JANESVILLE	State WI	Zip Code 53545-8345
--------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) VALMET	Occupation (for Individual) SERVICE TECH SPECIALIST
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
 350.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 10 / 26 / 2016

Transaction ID : SA11A.451090

Amount of Each Receipt this Period
 50.00

Memo Item
 CONTRIBUTION

B. BRADLEY, PETER, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 531 E ZERMATT CT

City JANESVILLE	State WI	Zip Code 53545-8345
--------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) VALMET	Occupation (for Individual) SERVICE TECH SPECIALIST
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
 350.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 11 / 04 / 2016

Transaction ID : SA11A.473653

Amount of Each Receipt this Period
 50.00

Memo Item
 CONTRIBUTION

C. BRADLEY, SCHUYLER, L., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2015 RIVERSIDE DRIVE

City WEST RICHLAND	State WA	Zip Code 99353-5240
-----------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) SELF EMPLOYED	Occupation (for Individual) ATTORNEY
--	---

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
 500.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 11 / 04 / 2016

Transaction ID : SA11A.467658

Amount of Each Receipt this Period
 100.00

Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	200.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 405 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
Team Ryan

A. BRADLEY, WILLIAM, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1203 W. 20TH AVE
 City SPOKANE State WA Zip Code 99203-1148
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 900.00

Date of Receipt 10 / 25 / 2016
Transaction ID : SA11A.448130
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

B. BRADOW, RICHARD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 317 EAST RIVER DR
 City PARK RAPIDS State MN Zip Code 56470-9024
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) AVENSON INSURANCE Occupation (for Individual) INSURANCE AGENT
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 275.00

Date of Receipt 11 / 03 / 2016
Transaction ID : SA11A.469104
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

C. BRADSTREET, FRANKLIN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 271 MYRTLE ST
 City ASHLAND State MA Zip Code 01721-1238
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 750.00

Date of Receipt 11 / 02 / 2016
Transaction ID : SA11A.466911
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	450.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 406 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. BRADSTREET, FRANKLIN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 271 MYRTLE ST
 City ASHLAND State MA Zip Code 01721-1238
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 750.00

Date of Receipt 11 / 02 / 2016
Transaction ID : SA11A.466913
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

B. BRADSTREET, FRANKLIN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 271 MYRTLE ST
 City ASHLAND State MA Zip Code 01721-1238
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 750.00

Date of Receipt 11 / 04 / 2016
Transaction ID : SA11A.474364
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

C. BRADSHAW, SAM, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3605 CRESCENT AVE
 City DALLAS State TX Zip Code 75205-3910
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) AMERICAN COLD STORAGE Occupation (for Individual) INVESTMENTS
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 1500.00

Date of Receipt 10 / 20 / 2016
Transaction ID : SA11A.442373
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	750.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 407 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. BRADSHAW, SAM, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3605 CRESCENT AVE
 City DALLAS State TX Zip Code 75205-3910
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) AMERICAN COLD STORAGE Occupation (for Individual) INVESTMENTS
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1500.00

Date of Receipt 11 / 04 / 2016
Transaction ID : SA11A.473111
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

B. BRADSHAW, SAM, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3605 CRESCENT AVE
 City DALLAS State TX Zip Code 75205-3910
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) AMERICAN COLD STORAGE Occupation (for Individual) INVESTMENTS
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1500.00

Date of Receipt 11 / 03 / 2016
Transaction ID : SA11A.474565
 Amount of Each Receipt this Period 1000.00
 Memo Item CONTRIBUTION

C. BRADSHAW, SANDY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1305 E LONE PEAK DRIVE
 City ALPINE State UT Zip Code 84004-1962
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 1100.00

Date of Receipt 10 / 24 / 2016
Transaction ID : SA11A.445871
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶ 1300.00
TOTAL This Period (last page this line number only).....▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 408 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
Team Ryan

A. BRADSHAW, WILLIAM, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 14000 E WADE HAMPTON BLVD
 City GREER State SC Zip Code 29651-1559
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) BRADSHAW AUTOMOTIVE Occupation (for Individual) DEALER PRINCIPAL
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt
 11 / 02 / 2016
Transaction ID : SA11A.465818
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

B. BRADY, ANN, P., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 10026 HAMPSHIRE DR.
 City HUNTSVILLE State AL Zip Code 35803-1668
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 941.00

Date of Receipt
 10 / 23 / 2016
Transaction ID : SA11A.446469
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

C. BRADY, ANN, P., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 10026 HAMPSHIRE DR.
 City HUNTSVILLE State AL Zip Code 35803-1668
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 941.00

Date of Receipt
 10 / 27 / 2016
Transaction ID : SA11A.453271
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶ 125.00
TOTAL This Period (last page this line number only).....▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 409 OF 4311
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. BRADY, ANN, P., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 10026 HAMPSHIRE DR.
 City HUNTSVILLE State AL Zip Code 35803-1668
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 941.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 29 / 2016
Transaction ID : SA11A.460424
 Amount of Each Receipt this Period
 50.00
 Memo Item
 CONTRIBUTION

B. BRADY, ANN, P., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 10026 HAMPSHIRE DR.
 City HUNTSVILLE State AL Zip Code 35803-1668
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 941.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 31 / 2016
Transaction ID : SA11A.463851
 Amount of Each Receipt this Period
 50.00
 Memo Item
 CONTRIBUTION

C. BRADY, KEVIN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 12 MAKATOM DRIVE
 City CRANFORD State NJ Zip Code 07016-1632
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) INFORMATION REQUESTED PER BEST EFFORTS Occupation (for Individual) INFORMATION REQUESTED PER BEST EFFORTS
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 380.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 28 / 2016
Transaction ID : SA11A.454775
 Amount of Each Receipt this Period
 190.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	290.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 410 OF 4311
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. BRADY, WILLIAM, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1904 LONG POINTE DRIVE

City BLOOMFIELD TOWNSHI	State MI	Zip Code 48302-0743
----------------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
290.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	27	/	2016

Transaction ID : SA11A.453221

Amount of Each Receipt this Period
30.00

Memo Item
CONTRIBUTION

B. BRADY, WILLIAM, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1904 LONG POINTE DRIVE

City BLOOMFIELD TOWNSHI	State MI	Zip Code 48302-0743
----------------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
290.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	31	/	2016

Transaction ID : SA11A.463300

Amount of Each Receipt this Period
25.00

Memo Item
CONTRIBUTION

C. BRAHE, DIANE, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 543 YELLOWBIRD STREET

City MARCO ISLAND	State FL	Zip Code 34145-2856
----------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
300.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	28	/	2016

Transaction ID : SA11A.455897

Amount of Each Receipt this Period
100.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	155.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 411 OF 4311
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Team Ryan

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name A. BRAKE, WILLIAM, , ,		Date of Receipt MM / DD / YYYY 11 / 03 / 2016 Transaction ID : SA11A.469100
Mailing Address 901 S. LAKESIDE AVE. APT 353		Amount of Each Receipt this Period 100.00
City LAKELAND	State FL	Zip Code 33803-1048
FEC ID number of contributing federal political committee. C		<input type="checkbox"/> Memo Item CONTRIBUTION
Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 770.00	

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name B. BRAMBLE, THOMAS, , ,		Date of Receipt MM / DD / YYYY 10 / 30 / 2016 Transaction ID : SA11A.459951
Mailing Address PO BOX 1287		Amount of Each Receipt this Period 250.00
City HASTINGS	State NE	Zip Code 68902-1287
FEC ID number of contributing federal political committee. C		<input type="checkbox"/> Memo Item CONTRIBUTION
Name of Employer (for Individual) MID-AMERICA PUMP & SUPPLY INC.	Occupation (for Individual) PRESIDENT	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 950.00	

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name C. BRAMBLE, THOMAS, , ,		Date of Receipt MM / DD / YYYY 11 / 07 / 2016 Transaction ID : SA11A.476592
Mailing Address PO BOX 1287		Amount of Each Receipt this Period 250.00
City HASTINGS	State NE	Zip Code 68902-1287
FEC ID number of contributing federal political committee. C		<input type="checkbox"/> Memo Item CONTRIBUTION
Name of Employer (for Individual) MID-AMERICA PUMP & SUPPLY INC.	Occupation (for Individual) PRESIDENT	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Aggregate Year-to-Date ▼ 950.00	

SUBTOTAL of Receipts This Page (optional).....▶	600.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 412 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. BRAMER, GEORGE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1911 CREEKWOOD DR.
 City SOUTH BEND State IN Zip Code 46635-2055
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 385.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 20 / 2016
Transaction ID : SA11A.444698
 Amount of Each Receipt this Period
 25.00
 Memo Item
 CONTRIBUTION

B. BRAMER, GEORGE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1911 CREEKWOOD DR.
 City SOUTH BEND State IN Zip Code 46635-2055
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 385.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 26 / 2016
Transaction ID : SA11A.451415
 Amount of Each Receipt this Period
 30.00
 Memo Item
 CONTRIBUTION

C. BRAMER, GEORGE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1911 CREEKWOOD DR.
 City SOUTH BEND State IN Zip Code 46635-2055
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 385.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 27 / 2016
Transaction ID : SA11A.452565
 Amount of Each Receipt this Period
 25.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	80.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 413 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. BRAMER, GEORGE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1911 CREEKWOOD DR.
 City SOUTH BEND State IN Zip Code 46635-2055
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 385.00

Date of Receipt **10 / 29 / 2016**
Transaction ID : SA11A.461233
 Amount of Each Receipt this Period 30.00
 Memo Item CONTRIBUTION

B. BRAMER, GEORGE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1911 CREEKWOOD DR.
 City SOUTH BEND State IN Zip Code 46635-2055
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 385.00

Date of Receipt **10 / 31 / 2016**
Transaction ID : SA11A.463854
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

C. BRAMER, GEORGE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1911 CREEKWOOD DR.
 City SOUTH BEND State IN Zip Code 46635-2055
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 385.00

Date of Receipt **10 / 31 / 2016**
Transaction ID : SA11A.463956
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	80.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 414 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
Team Ryan

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
A. BRAMER, LEETA, , ,

Mailing Address 107 WEST STREET
P.O. BOX 244

City PLAINVIEW State NE Zip Code 68769-0244

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
654.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 26 / 2016

Transaction ID : **SA11A.450257**

Amount of Each Receipt this Period
50.00

Memo Item CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
B. BRAMER, LEETA, , ,

Mailing Address 107 WEST STREET
P.O. BOX 244

City PLAINVIEW State NE Zip Code 68769-0244

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
654.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 26 / 2016

Transaction ID : **SA11A.450258**

Amount of Each Receipt this Period
50.00

Memo Item CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
C. BRAMER, LEETA, , ,

Mailing Address 107 WEST STREET
P.O. BOX 244

City PLAINVIEW State NE Zip Code 68769-0244

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
654.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 04 / 2016

Transaction ID : **SA11A.470302**

Amount of Each Receipt this Period
50.00

Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	150.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 415 OF 4311
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. BRAMHALL, JACQUES, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 9644 DEER RUN DRIVE
 City PONTE VEDRA BEACH State FL Zip Code 32082-3501
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt 10 / 29 / 2016
Transaction ID : SA11A.461165
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

B. BRAMHALL, JACQUES, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 9644 DEER RUN DRIVE
 City PONTE VEDRA BEACH State FL Zip Code 32082-3501
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt 11 / 04 / 2016
Transaction ID : SA11A.473252
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

C. BRAMLETT, ROBERT, M., , JR.
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO BOX 369
 City ARDMORE State OK Zip Code 73402-0369
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) CROSS POINTE ADVISORS, LLC Occupation (for Individual) INDEPENDENT INSURANCE AGENT
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 2050.00

Date of Receipt 10 / 31 / 2016
Transaction ID : SA11A.458993
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 350.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 416 OF 4311
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. BRAMLETT, ROBERT, M., , JR.
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address PO BOX 369

City ARDMORE	State OK	Zip Code 73402-0369
-----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) CROSS POINTE ADVISORS, LLC	Occupation (for Individual) INDEPENDENT INSURANCE AGENT
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
2050.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		31		2016

Transaction ID : SA11A.458995

Amount of Each Receipt this Period
250.00

Memo Item
CONTRIBUTION

B. BRANDALEONE, BRUCE, H., MR.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 6040 OLD FIELD DRIVE

City CHAPEL HILL	State NC	Zip Code 27514-8234
---------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1550.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		24		2016

Transaction ID : SA11A.443804

Amount of Each Receipt this Period
200.00

Memo Item
CONTRIBUTION

C. BRANDENBURG, JIMMY, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 14424 AMERICAN KESTREL

City AUSTIN	State TX	Zip Code 78738-6520
----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11		04		2016

Transaction ID : SA11A.473667

Amount of Each Receipt this Period
100.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	550.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 417 OF 4311
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. BRANDOW, JOHN, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 520 EAST 86TH STREET
2A

City NEW YORK State NY Zip Code 10028-7534

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) DAVIS POLK & WARDWELL LLP Occupation (for Individual) LAWYER

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
10500.00

Date of Receipt
10 / 24 / 2016
Transaction ID : SA11A.449176

Amount of Each Receipt this Period
5000.00

Memo Item CONTRIBUTION

B. BRANDOW, JOHN, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 520 EAST 86TH STREET
2A

City NEW YORK State NY Zip Code 10028-7534

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) DAVIS POLK & WARDWELL LLP Occupation (for Individual) LAWYER

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
10500.00

Date of Receipt
10 / 24 / 2016
Transaction ID : SA11A.449177

Amount of Each Receipt this Period
5000.00

Memo Item CONTRIBUTION

C. BRANDLI, WILL, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 26702 COUNTY ROAD 5

City WARROAD State MN Zip Code 56763-9524

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
2550.00

Date of Receipt
10 / 21 / 2016
Transaction ID : SA11A.443636

Amount of Each Receipt this Period
100.00

Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶ 10100.00

TOTAL This Period (last page this line number only).....▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 418 OF 4311
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. BRANDLI, WILL, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 26702 COUNTY ROAD 5

City WARROAD	State MN	Zip Code 56763-9524
-----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
2550.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	04	/	2016

Transaction ID : SA11A.467600

Amount of Each Receipt this Period
1000.00

Memo Item
CONTRIBUTION

B. BRANDLI, WILL, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 26702 COUNTY ROAD 5

City WARROAD	State MN	Zip Code 56763-9524
-----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
2550.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	08	/	2016

Transaction ID : SA11A.467948

Amount of Each Receipt this Period
100.00

Memo Item
CONTRIBUTION

C. BRANNON, CHUCK, , MR.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 115 E 86TH ST #34 #34

City NEW YORK	State NY	Zip Code 10028-1057
------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) PEM-AMERICA, INC.	Occupation (for Individual) COO
--	------------------------------------

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
560.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	24	/	2016

Transaction ID : SA11A.445854

Amount of Each Receipt this Period
50.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	1150.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 419 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. BRANNIN, RICHARD, E., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1314 GRAYNOLD AVE.
 City GLENDALE State CA Zip Code 91202-2041
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 800.00

Date of Receipt **10 / 28 / 2016**
Transaction ID : SA11A.455996
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

B. BRANNIN, RICHARD, E., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1314 GRAYNOLD AVE.
 City GLENDALE State CA Zip Code 91202-2041
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 800.00

Date of Receipt **11 / 04 / 2016**
Transaction ID : SA11A.472913
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

C. BRANT, VALENTINA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 7701 BAYMEADOWS CIR W 1108
 City JACKSONVILLE State FL Zip Code 32256-7794
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) INSURANCE AGENT
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt **10 / 30 / 2016**
Transaction ID : SA11A.459730
 Amount of Each Receipt this Period 150.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	350.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 420 OF 4311
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. BRANT, VALENTINA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 7701 BAYMEADOWS CIR W
 1108
 City JACKSONVILLE State FL Zip Code 32256-7794
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) INSURANCE AGENT
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 10 / 30 / 2016
Transaction ID : SA11A.459733
 Amount of Each Receipt this Period 150.00
 Memo Item CONTRIBUTION

B. BRANUM, MARK, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO DRAWER 10646
 City MIDLAND State TX Zip Code 79702-7646
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) OIL & GAS EXPLORATION AND PROI
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 750.00

Date of Receipt 10 / 28 / 2016
Transaction ID : SA11A.461461
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

C. BRANUM, MARK, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO DRAWER 10646
 City MIDLAND State TX Zip Code 79702-7646
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) OIL & GAS EXPLORATION AND PROC
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 750.00

Date of Receipt 11 / 07 / 2016
Transaction ID : SA11A.480402
 Amount of Each Receipt this Period 500.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 900.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 421 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. BRASFIELD, EVANS, B., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2 AMPHILL ROAD
 City RICHMOND State VA Zip Code 23226-2233
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 10 / 21 / 2016
Transaction ID : SA11A.443600
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

B. BRASFIELD, EVANS, B., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2 AMPHILL ROAD
 City RICHMOND State VA Zip Code 23226-2233
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 11 / 03 / 2016
Transaction ID : SA11A.465413
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

C. BRASHER, JIM, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 315 LAKELAND DRIVE
 City PALOS PARK State IL Zip Code 60464-2538
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) CPA
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 650.00

Date of Receipt 10 / 25 / 2016
Transaction ID : SA11A.448511
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	300.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 422 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
Team Ryan

A. BRASHER, JIM, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 315 LAKELAND DRIVE
 City PALOS PARK State IL Zip Code 60464-2538
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) CPA
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 650.00

Date of Receipt 10 / 25 / 2016
Transaction ID : SA11A.448516
 Amount of Each Receipt this Period 100.00
 Memo Item
CONTRIBUTION

B. BRASIE, DONALD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4860 LONE OAK CT
 City ANN ARBOR State MI Zip Code 48108-8575
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 750.00

Date of Receipt 10 / 31 / 2016
Transaction ID : SA11A.463859
 Amount of Each Receipt this Period 50.00
 Memo Item
CONTRIBUTION

C. BRASIE, DONALD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4860 LONE OAK CT
 City ANN ARBOR State MI Zip Code 48108-8575
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 750.00

Date of Receipt 11 / 02 / 2016
Transaction ID : SA11A.466619
 Amount of Each Receipt this Period 50.00
 Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	200.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 423 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
Team Ryan

A. BRASIE, DONALD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4860 LONE OAK CT
 City ANN ARBOR State MI Zip Code 48108-8575
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 750.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 02 / 2016
Transaction ID : SA11A.469383
 Amount of Each Receipt this Period
 50.00
 Memo Item
 CONTRIBUTION

B. BRATZ, BETSY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4 CUTHBERT LANE
 City SAVANNAH State GA Zip Code 31411-1637
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1300.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 24 / 2016
Transaction ID : SA11A.446110
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION

C. BRATZ, BETSY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4 CUTHBERT LANE
 City SAVANNAH State GA Zip Code 31411-1637
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1300.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 31 / 2016
Transaction ID : SA11A.457886
 Amount of Each Receipt this Period
 250.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	400.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 424 OF 4311
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. BRATZ, BETSY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4 CUTHBERT LANE
 City SAVANNAH State GA Zip Code 31411-1637
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1300.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 31 / 2016
Transaction ID : SA11A.457896
 Amount of Each Receipt this Period
 250.00
 Memo Item
 CONTRIBUTION

B. BRAZILLE, MARSHALL, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 609 S. SHORE
 City AMARILLO State TX Zip Code 79118-8011
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) PAINT CONTRACTOR
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 21 / 2016
Transaction ID : SA11A.444588
 Amount of Each Receipt this Period
 50.00
 Memo Item
 CONTRIBUTION

C. BRAZILLE, MARSHALL, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 609 S. SHORE
 City AMARILLO State TX Zip Code 79118-8011
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) PAINT CONTRACTOR
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 04 / 2016
Transaction ID : SA11A.472421
 Amount of Each Receipt this Period
 50.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	350.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 425 OF 4311
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. BRECHAN, MICHAEL, C., MR.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address P.O. BOX 303

City KODIAK	State AK	Zip Code 99615-0303
----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) LASH CORPORATION	Occupation (for Individual) CORP EXEC
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
300.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		25		2016

Transaction ID : SA11A.451914

Amount of Each Receipt this Period
100.00

Memo Item
CONTRIBUTION

B. BREEN, EDWARD, D., MR.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 180 STREET RD

City NEW HOPE	State PA	Zip Code 18938-9207
------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) DUPONT COMPANY	Occupation (for Individual) CHAIRMAN
---	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
50000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		28		2016

Transaction ID : SA11A.452492

Amount of Each Receipt this Period
50000.00

Memo Item
CONTRIBUTION

C. BREITNER, EDITH, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 22 PINE DR. N.

City ROSLYN	State NY	Zip Code 11576-2037
----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
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Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
412.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		27		2016

Transaction ID : SA11A.453798

Amount of Each Receipt this Period
27.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	50127.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 426 OF 4311		
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14	<input type="checkbox"/> 11c <input type="checkbox"/> 15	<input type="checkbox"/> 12 <input type="checkbox"/> 16

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NAME OF COMMITTEE (In Full)
Team Ryan

A. BREITNER, EDITH, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 22 PINE DR. N.
 City ROSLYN State NY Zip Code 11576-2037
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 412.00

Date of Receipt 11 / 04 / 2016
Transaction ID : SA11A.471953
 Amount of Each Receipt this Period 27.00
 Memo Item CONTRIBUTION

B. BREKKA, RICHARD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 45 EAST 66TH STREET 7W
 City NEW YORK State NY Zip Code 10065-6102
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SECOND ALPHA PARTNERS Occupation (for Individual) PRIVATE EQUITY
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 10 / 31 / 2016
Transaction ID : SA11A.459061
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

C. BRENNAN, CYNTHIA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1646 JEFFERSON AVENUE
 City NEW ORLEANS State LA Zip Code 70115-4949
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) MR. B'S BISTRO Occupation (for Individual) RESTAURANTER
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 10 / 20 / 2016
Transaction ID : SA11A.442159
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	527.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 427 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. BRENNAN, CYNTHIA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1646 JEFFERSON AVENUE
 City NEW ORLEANS State LA Zip Code 70115-4949
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) MR. B'S BISTRO Occupation (for Individual) RESTAURANTER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 10 / 20 / 2016
Transaction ID : SA11A.442160
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

B. BRENNAN, JOHN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4 N ACTON PLACE
 City ANNAPOLIS State MD Zip Code 21401-2714
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) ATTORNEY
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 800.00

Date of Receipt 11 / 07 / 2016
Transaction ID : SA11A.467732
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

C. BRENNAN, ROSEANNE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 106 DUNDEE
 City WILLIAMSBURG State VA Zip Code 23188-9118
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 380.00

Date of Receipt 10 / 23 / 2016
Transaction ID : SA11A.449618
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	400.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 428 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. BRENNAN, ROSEANNE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 106 DUNDEE
 City WILLIAMSBURG State VA Zip Code 23188-9118
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 380.00

Date of Receipt 11 / 04 / 2016
Transaction ID : SA11A.471801
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

B. BRESKY, MURRAY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5190 MAIN STREET
 City SOUTH FALLSBURG State NY Zip Code 12779-
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) MURRAY'S CHICKEN Occupation (for Individual) POULTRY PROCESSOR
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 360.00

Date of Receipt 10 / 25 / 2016
Transaction ID : SA11A.448619
 Amount of Each Receipt this Period 180.00
 Memo Item CONTRIBUTION

C. BRESKY, MURRAY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5190 MAIN STREET
 City SOUTH FALLSBURG State NY Zip Code 12779-
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) MURRAY'S CHICKEN Occupation (for Individual) POULTRY PROCESSOR
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 360.00

Date of Receipt 11 / 01 / 2016
Transaction ID : SA11A.462987
 Amount of Each Receipt this Period 180.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 410.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 429 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
Team Ryan

A. BRETTON, GERALD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 17 EAST PINE STREET
 City PLAISTOW State NH Zip Code 03865-2621
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 245.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 26 / 2016
Transaction ID : SA11A.451274
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

B. BRETTON, GERALD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 17 EAST PINE STREET
 City PLAISTOW State NH Zip Code 03865-2621
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 245.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 04 / 2016
Transaction ID : SA11A.474030
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

C. BREWER, EZMA, K., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1914 122ND AVENUE SE
 City BELLEVUE State WA Zip Code 98005-4626
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 650.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 25 / 2016
Transaction ID : SA11A.447333
 Amount of Each Receipt this Period 400.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	450.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 430 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. BRIANT, THOMAS, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3447 E VAUGHN AVE
 City GILBERT State AZ Zip Code 85234-4246
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 04 / 2016
Transaction ID : SA11A.472729
 Amount of Each Receipt this Period
 250.00
 Memo Item
 CONTRIBUTION

B. BRIDGES, CLIFTON, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 6970 SUNNYSIDE
 City LEESBURG State FL Zip Code 34748-9556
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1950.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 22 / 2016
Transaction ID : SA11A.446986
 Amount of Each Receipt this Period
 200.00
 Memo Item
 CONTRIBUTION

C. BRIDGES, CLIFTON, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 6970 SUNNYSIDE
 City LEESBURG State FL Zip Code 34748-9556
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1950.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 31 / 2016
Transaction ID : SA11A.464492
 Amount of Each Receipt this Period
 250.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	700.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 431 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
A. BRIDGES, CLIFTON, , ,

Mailing Address 6970 SUNNYSIDE

City LEESBURG	State FL	Zip Code 34748-9556
------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1950.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 31 / 2016
Transaction ID : SA11A.464513

Amount of Each Receipt this Period
250.00

Memo Item CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
B. BRIDGES, CLIFTON, , ,

Mailing Address 6970 SUNNYSIDE

City LEESBURG	State FL	Zip Code 34748-9556
------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1950.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 31 / 2016
Transaction ID : SA11A.464516

Amount of Each Receipt this Period
250.00

Memo Item CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
C. BRIDGES, CLIFTON, , ,

Mailing Address 6970 SUNNYSIDE

City LEESBURG	State FL	Zip Code 34748-9556
------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
1950.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 04 / 2016
Transaction ID : SA11A.473480

Amount of Each Receipt this Period
200.00

Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	700.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 432 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
Team Ryan

A. BRIDGES, LEON, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3026 EAGLEK BAY CIRCLE
 City ANCHORAGE State AK Zip Code 99515-2427
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) FNBA Occupation (for Individual) PROPERTY MANAGER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 310.00

Date of Receipt 10 / 24 / 2016
Transaction ID : SA11A.449318
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

B. BRIDGES, LEON, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3026 EAGLEK BAY CIRCLE
 City ANCHORAGE State AK Zip Code 99515-2427
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) FNBA Occupation (for Individual) PROPERTY MANAGER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 310.00

Date of Receipt 10 / 25 / 2016
Transaction ID : SA11A.451764
 Amount of Each Receipt this Period 30.00
 Memo Item CONTRIBUTION

C. BRIDGES, LEON, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3026 EAGLEK BAY CIRCLE
 City ANCHORAGE State AK Zip Code 99515-2427
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) FNBA Occupation (for Individual) PROPERTY MANAGER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 310.00

Date of Receipt 10 / 25 / 2016
Transaction ID : SA11A.451765
 Amount of Each Receipt this Period 30.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	160.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 433 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. BRIDLEMAN, MARY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 9 CLIPPER RD
 City RANCHO PALOS VERDE State CA Zip Code 90275-5923
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1050.00

Date of Receipt 10 / 24 / 2016
Transaction ID : SA11A.446015
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

B. BRIDLEMAN, MARY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 9 CLIPPER RD
 City RANCHO PALOS VERDE State CA Zip Code 90275-5923
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1050.00

Date of Receipt 10 / 24 / 2016
Transaction ID : SA11A.446017
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

C. BRIDLEMAN, MARY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 9 CLIPPER RD
 City RANCHO PALOS VERDE State CA Zip Code 90275-5923
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1050.00

Date of Receipt 11 / 02 / 2016
Transaction ID : SA11A.466701
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 125.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 434 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. BRIDLEMAN, MARY, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 9 CLIPPER RD

City RANCHO PALOS VERDE	State CA	Zip Code 90275-5923
FEC ID number of contributing federal political committee. C		
Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1050.00	

Date of Receipt
MM / DD / YYYY
11 / 02 / 2016
Transaction ID : SA11A.466702

Amount of Each Receipt this Period
25.00

Memo Item
CONTRIBUTION

B. BRIERLEY, HAROLD, M., MR.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 4324 ST JOHNS DR

City DALLAS	State TX	Zip Code 75205-4335
FEC ID number of contributing federal political committee. C		
Name of Employer (for Individual) THE BRIERLEY GROUP	Occupation (for Individual) CHAIRMAN & CEO	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 60000.00	

Date of Receipt
MM / DD / YYYY
10 / 25 / 2016
Transaction ID : SA11A.445023

Amount of Each Receipt this Period
40000.00

Memo Item
CONTRIBUTION

C. BRIESE, KAREN, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 3563 COUNTY ROAD 21

City INTERNATIONAL FALL	State MN	Zip Code 56649-8824
FEC ID number of contributing federal political committee. C		
Name of Employer (for Individual) UNITED HEALTH CARE	Occupation (for Individual) CLAIMS PROCESSOR	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Aggregate Year-to-Date ▼ 282.00	

Date of Receipt
MM / DD / YYYY
11 / 04 / 2016
Transaction ID : SA11A.472327

Amount of Each Receipt this Period
50.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	40075.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 435 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. BRIGGS, BLAINE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1969 LANCEWOOD LANE
 City CARLSBAD State CA Zip Code 92009-6826
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 700.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 02 / 2016
Transaction ID : SA11A.465112
 Amount of Each Receipt this Period
 200.00
 Memo Item
 CONTRIBUTION

B. BRIGGAMAN, IRENE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 524 REDBUD RD
 City CHAPEL HILL State NC Zip Code 27514-1709
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 325.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 01 / 2016
Transaction ID : SA11A.467185
 Amount of Each Receipt this Period
 25.00
 Memo Item
 CONTRIBUTION

C. BRIGGAMAN, IRENE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 524 REDBUD RD
 City CHAPEL HILL State NC Zip Code 27514-1709
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 325.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 06 / 2016
Transaction ID : SA11A.478221
 Amount of Each Receipt this Period
 25.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	250.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 436 OF 4311		
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14	<input type="checkbox"/> 11c <input type="checkbox"/> 15	<input type="checkbox"/> 12 <input type="checkbox"/> 16

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NAME OF COMMITTEE (In Full)
Team Ryan

A. BRIGGS, RONALD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2296 SARANAC AVE.
 City LAKE PLACID State NY Zip Code 12946-3375
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) BRIGGS NORFOLK LLP Occupation (for Individual) ATTORNEY
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 800.00

Date of Receipt 10 / 24 / 2016
Transaction ID : SA11A.446178
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

B. BRIGGS, RONALD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2296 SARANAC AVE.
 City LAKE PLACID State NY Zip Code 12946-3375
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) BRIGGS NORFOLK LLP Occupation (for Individual) ATTORNEY
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 800.00

Date of Receipt 10 / 29 / 2016
Transaction ID : SA11A.460504
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

C. BRIGGS, RONALD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2296 SARANAC AVE.
 City LAKE PLACID State NY Zip Code 12946-3375
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) BRIGGS NORFOLK LLP Occupation (for Individual) ATTORNEY
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 800.00

Date of Receipt 11 / 06 / 2016
Transaction ID : SA11A.478316
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	300.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 437 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. BRIGHTON, CYNTHIA, Z., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 161 LONG NECK POINT RD
 City DARIEN State CT Zip Code 06820-5815
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SWISHER INTERNATIONAL Occupation (for Individual) EXECUTIVE
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 25000.00

Date of Receipt 10 / 24 / 2016
Transaction ID : SA11A.443451
 Amount of Each Receipt this Period 25000.00
 Memo Item CONTRIBUTION

B. BRISBANE, JACK, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO BOX 8825
 City KODIAK State AK Zip Code 99615-8825
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 350.00

Date of Receipt 10 / 29 / 2016
Transaction ID : SA11A.461271
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

C. BRISBANE, JACK, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO BOX 8825
 City KODIAK State AK Zip Code 99615-8825
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 350.00

Date of Receipt 10 / 29 / 2016
Transaction ID : SA11A.461272
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	25200.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 438 OF 4311
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. BRISTOW, JIM, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 191 ELK MILLS ROAD
ELKTON,MD 21921

City ELKTON State MD Zip Code 21921-2702

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
500.00

Date of Receipt
10 / 29 / 2016
Transaction ID : SA11A.460722

Amount of Each Receipt this Period
50.00

Memo Item CONTRIBUTION

B. BRISTOW, JIM, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 191 ELK MILLS ROAD
ELKTON,MD 21921

City ELKTON State MD Zip Code 21921-2702

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
500.00

Date of Receipt
11 / 02 / 2016
Transaction ID : SA11A.466596

Amount of Each Receipt this Period
50.00

Memo Item CONTRIBUTION

C. BRISTOW, JIM, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 191 ELK MILLS ROAD
ELKTON,MD 21921

City ELKTON State MD Zip Code 21921-2702

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
500.00

Date of Receipt
11 / 03 / 2016
Transaction ID : SA11A.468899

Amount of Each Receipt this Period
50.00

Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 150.00

TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 439 OF 4311
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. BRITSCH, HANS, , MR.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address PO BOX 2018

City VISTA	State CA	Zip Code 92085-2018
---------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) SELF	Occupation (for Individual) NURSERY MAN
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
500.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
11		03		2016

Transaction ID : SA11A.465554

Amount of Each Receipt this Period
250.00

Memo Item
CONTRIBUTION

B. BRITTON, C ANN, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1222 INDIAN PAINT TRAIL

City LEWISVILLE	State TX	Zip Code 75067-5536
--------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) SELF EMPLOYED	Occupation (for Individual) MARY KAY CONSULTANT
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
400.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
10		24		2016

Transaction ID : SA11A.443723

Amount of Each Receipt this Period
200.00

Memo Item
CONTRIBUTION

C. BROCK, MICHAEL, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1806 ORCHARD COUNTRY LANE

City HOUSTON	State TX	Zip Code 77062-2357
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
385.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
10		25		2016

Transaction ID : SA11A.449098

Amount of Each Receipt this Period
25.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	475.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 440 OF 4311
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. BROCK, MICHAEL, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1806 ORCHARD COUNTRY LANE

City HOUSTON	State TX	Zip Code 77062-2357
-----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
385.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		26		2016

Transaction ID : SA11A.451405

Amount of Each Receipt this Period
30.00

Memo Item
CONTRIBUTION

B. BROCK, MICHAEL, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1806 ORCHARD COUNTRY LANE

City HOUSTON	State TX	Zip Code 77062-2357
-----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
385.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		31		2016

Transaction ID : SA11A.459306

Amount of Each Receipt this Period
50.00

Memo Item
CONTRIBUTION

C. BROCK, MICHAEL, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1806 ORCHARD COUNTRY LANE

City HOUSTON	State TX	Zip Code 77062-2357
-----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
385.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		31		2016

Transaction ID : SA11A.463989

Amount of Each Receipt this Period
25.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	105.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 441 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. BROCK, MICHAEL, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1806 ORCHARD COUNTRY LANE
 City HOUSTON State TX Zip Code 77062-2357
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 385.00

Date of Receipt 11 / 04 / 2016
Transaction ID : SA11A.474321
 Amount of Each Receipt this Period 30.00
 Memo Item CONTRIBUTION

B. BROCK, MICHAEL, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1806 ORCHARD COUNTRY LANE
 City HOUSTON State TX Zip Code 77062-2357
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 385.00

Date of Receipt 11 / 06 / 2016
Transaction ID : SA11A.477768
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

C. BROCK, WILLIAM, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1590 FIRST ST.
 City SARASOTA State FL Zip Code 34236-8502
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 275.00

Date of Receipt 10 / 22 / 2016
Transaction ID : SA11A.446985
 Amount of Each Receipt this Period 55.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶ 110.00
TOTAL This Period (last page this line number only).....▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 442 OF 4311
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. BROCK, WILLIAM, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1590 FIRST ST.

City SARASOTA	State FL	Zip Code 34236-8502
------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
275.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	04	/	2016

Transaction ID : SA11A.471750

Amount of Each Receipt this Period
55.00

Memo Item
CONTRIBUTION

B. BROD, STUART, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1116 OCEAN AVE

City LONG BRANCH	State NJ	Zip Code 07740-4578
---------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) SELF EMPLOYED	Occupation (for Individual) ATTORNEY
--	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1499.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	31	/	2016

Transaction ID : SA11A.458254

Amount of Each Receipt this Period
999.00

Memo Item
CONTRIBUTION

C. BROD, STUART, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1116 OCEAN AVE

City LONG BRANCH	State NJ	Zip Code 07740-4578
---------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) SELF EMPLOYED	Occupation (for Individual) ATTORNEY
--	---

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
1499.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	31	/	2016

Transaction ID : SA11A.458266

Amount of Each Receipt this Period
250.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	1304.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 443 OF 4311
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. BROD, STUART, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1116 OCEAN AVE

City LONG BRANCH	State NJ	Zip Code 07740-4578
---------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) SELF EMPLOYED	Occupation (for Individual) ATTORNEY
--	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1499.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		31		2016

Transaction ID : SA11A.458268

Amount of Each Receipt this Period
250.00

Memo Item
CONTRIBUTION

B. BROER, PETER, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 12611 LAKE SHORE BOULEVARD

City CLEVELAND	State OH	Zip Code 44108-1136
-------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) LUMITEX	Occupation (for Individual) BUSINESS
--	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
350.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		27		2016

Transaction ID : SA11A.452255

Amount of Each Receipt this Period
250.00

Memo Item
CONTRIBUTION

C. BROLING, JANET, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 655 WOODLAND DRIVE

City CRYSTAL LAKE	State IL	Zip Code 60014-5214
----------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
450.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		31		2016

Transaction ID : SA11A.464629

Amount of Each Receipt this Period
25.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	525.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 444 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
Team Ryan

A. BROLING, JANET, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 655 WOODLAND DRIVE
 City CRYSTAL LAKE State IL Zip Code 60014-5214
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 450.00

Date of Receipt 11 / 07 / 2016
Transaction ID : SA11A.475873
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

B. BROMWICH, DAVID, H., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 6300 POST ROAD
 City DUBLIN State OH Zip Code 43017-1226
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) INFORMATION REQUESTED PER BEST EFFORTS Occupation (for Individual) INFORMATION REQUESTED PER BE
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt 10 / 25 / 2016
Transaction ID : SA11A.447542
 Amount of Each Receipt this Period 500.00
 Memo Item CONTRIBUTION

C. BRONSON, THOMAS, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address P.O. BOX 68
 City BROOKSVILLE State FL Zip Code 34605-0068
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 230.00

Date of Receipt 10 / 27 / 2016
Transaction ID : SA11A.454227
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	550.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 445 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
A. BRONSON, THOMAS, , ,

Mailing Address P.O. BOX 68

City BROOKSVILLE	State FL	Zip Code 34605-0068
---------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
230.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 27 / 2016

Transaction ID : SA11A.454231

Amount of Each Receipt this Period
25.00

Memo Item
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
B. BRONSON, THOMAS, , ,

Mailing Address P.O. BOX 68

City BROOKSVILLE	State FL	Zip Code 34605-0068
---------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
230.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 04 / 2016

Transaction ID : SA11A.470320

Amount of Each Receipt this Period
25.00

Memo Item
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
C. BRONSON, THOMAS, , ,

Mailing Address P.O. BOX 68

City BROOKSVILLE	State FL	Zip Code 34605-0068
---------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
230.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 07 / 2016

Transaction ID : SA11A.475559

Amount of Each Receipt this Period
30.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	80.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 446 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. BRONSON, THOMAS, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address P.O. BOX 68
 City BROOKSVILLE State FL Zip Code 34605-0068
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 230.00

Date of Receipt 11 / 08 / 2016
Transaction ID : SA11A.479710
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

B. BROOKS, CARMAN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1957 BARRINGTON CT
 City AURORA State IL Zip Code 60503-6412
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 310.00

Date of Receipt 10 / 27 / 2016
Transaction ID : SA11A.453095
 Amount of Each Receipt this Period 30.00
 Memo Item CONTRIBUTION

C. BROOKINS, CAROLE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 10275 COLLINS AVENUE 1125
 City BAL HARBOUR State FL Zip Code 33154-1417
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt 10 / 27 / 2016
Transaction ID : SA11A.453719
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	305.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 447 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. BROOKS, CARMAN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1957 BARRINGTON CT
 City AURORA State IL Zip Code 60503-6412
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 310.00

Date of Receipt **10 / 31 / 2016**
Transaction ID : SA11A.464636
 Amount of Each Receipt this Period 30.00
 Memo Item CONTRIBUTION

B. BROOKINS, CAROLE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 10275 COLLINS AVENUE 1125
 City BAL HARBOUR State FL Zip Code 33154-1417
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt **11 / 02 / 2016**
Transaction ID : SA11A.465953
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

C. BROOKS, CARMAN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1957 BARRINGTON CT
 City AURORA State IL Zip Code 60503-6412
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 310.00

Date of Receipt **11 / 04 / 2016**
Transaction ID : SA11A.471944
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	330.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 448 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. BROOKS, DONNA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 7315 CHESTER RD
 City FAIRVIEW State TN Zip Code 37062-7306
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) GUARDIAN HEALTHCARE PROVIDERS Occupation (for Individual) FINANCE
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt 10 / 27 / 2016
Transaction ID : SA11A.452784
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

B. BROOKFIELD JR, DONALD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 55 POKANOKET LANE
 City MARSHFIELD State MA Zip Code 02050-8225
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 11 / 04 / 2016
Transaction ID : SA11A.474060
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

C. BROOKS, ERIK, , MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 183 NEWTON STREET
 City WESTON State MA Zip Code 02493-2338
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) ABRY Occupation (for Individual) INVESTOR
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 50000.00

Date of Receipt 10 / 28 / 2016
Transaction ID : SA11A.452490
 Amount of Each Receipt this Period 50000.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	50200.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 449 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. BROOKS, IRLESS, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO BOX 746
 City PADUCAH State TX Zip Code 79248-0746
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SCHLUMBERGER Occupation (for Individual) INACTIVE EMPLOYEE/DISABLED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 315.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 25 / 2016
Transaction ID : SA11A.449074
 Amount of Each Receipt this Period
 25.00
 Memo Item CONTRIBUTION

B. BROOKS, IRLESS, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO BOX 746
 City PADUCAH State TX Zip Code 79248-0746
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SCHLUMBERGER Occupation (for Individual) INACTIVE EMPLOYEE/DISABLED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 315.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 27 / 2016
Transaction ID : SA11A.454228
 Amount of Each Receipt this Period
 30.00
 Memo Item CONTRIBUTION

C. BROOKS, IRLESS, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO BOX 746
 City PADUCAH State TX Zip Code 79248-0746
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SCHLUMBERGER Occupation (for Individual) INACTIVE EMPLOYEE/DISABLED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 315.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 07 / 2016
Transaction ID : SA11A.474994
 Amount of Each Receipt this Period
 30.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	85.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 450 OF 4311
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. BROOKS, IRLESS, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address **PO BOX 746**

City **PADUCAH** State **TX** Zip Code **79248-0746**

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) **SCHLUMBERGER** Occupation (for Individual) **INACTIVE EMPLOYEE/DISABLED**

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **315.00**

Date of Receipt **11 / 04 / 2016**

Transaction ID : SA11A.479345

Amount of Each Receipt this Period **30.00**

Memo Item CONTRIBUTION

B. BROOKS, MICHELLE, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address **4506 PASEO DE LAS TORTUGAS**

City **TORRANCE** State **CA** Zip Code **90505-6332**

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) **SELF EMPLOYED** Occupation (for Individual) **CONSULTANT**

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **300.00**

Date of Receipt **11 / 07 / 2016**

Transaction ID : SA11A.480308

Amount of Each Receipt this Period **100.00**

Memo Item CONTRIBUTION

C. BROOKSHIRE, WILLIAM, A., ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address **7825 PARK PLACE**

City **HOUSTON** State **TX** Zip Code **77087-4639**

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) **S&B ENGINEERING** Occupation (for Individual) **ENGINEER**

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼ **25400.00**

Date of Receipt **10 / 25 / 2016**

Transaction ID : SA11A.447518

Amount of Each Receipt this Period **10000.00**

Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... **10130.00**

TOTAL This Period (last page this line number only).....

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 451 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
Team Ryan

A. BROSS, RICHARD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO BOX 2405
 City EDWARDS State CO Zip Code 81632-2405
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt
 11 / 02 / 2016
Transaction ID : SA11A.465960
 Amount of Each Receipt this Period
 250.00
 Memo Item CONTRIBUTION

B. BROWN, ALBERT, P., MR., JR.
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1472 CAMP ST
 City NEW ORLEANS State LA Zip Code 70130-4244
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 634.00

Date of Receipt
 10 / 26 / 2016
Transaction ID : SA11A.454514
 Amount of Each Receipt this Period
 200.00
 Memo Item CONTRIBUTION

C. BROWN, ANN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 8799 THUNDERBIRD DR
 City PENSACOLA State FL Zip Code 32514-5694
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt
 10 / 28 / 2016
Transaction ID : SA11A.456158
 Amount of Each Receipt this Period
 50.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	500.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 452 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. BROWN, ANN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 8799 THUNDERBIRD DR
 City PENSACOLA State FL Zip Code 32514-5694
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 11 / 04 / 2016
Transaction ID : SA11A.470690
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

B. BROWN, BARRETT, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5626 CEDAR CREEK DR
 City HOUSTON State TX Zip Code 77056-2310
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) FONDREN ORTHOPEDIC GROUP Occupation (for Individual) ORTHOPEDIC SURGEON
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1375.00

Date of Receipt 10 / 24 / 2016
Transaction ID : SA11A.449212
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

C. BROWN, BARRETT, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5626 CEDAR CREEK DR
 City HOUSTON State TX Zip Code 77056-2310
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) FONDREN ORTHOPEDIC GROUP Occupation (for Individual) ORTHOPEDIC SURGEON
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 1375.00

Date of Receipt 11 / 02 / 2016
Transaction ID : SA11A.469555
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	325.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 453 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
Team Ryan

A. BROWN, BARRETT, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5626 CEDAR CREEK DR
 City HOUSTON State TX Zip Code 77056-2310
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) FONDREN ORTHOPEDIC GROUP Occupation (for Individual) ORTHOPEDIC SURGEON
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1375.00

Date of Receipt 11 / 02 / 2016
Transaction ID : SA11A.469586
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

B. BROWN, BARRETT, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5626 CEDAR CREEK DR
 City HOUSTON State TX Zip Code 77056-2310
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) FONDREN ORTHOPEDIC GROUP Occupation (for Individual) ORTHOPEDIC SURGEON
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1375.00

Date of Receipt 11 / 06 / 2016
Transaction ID : SA11A.476780
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

C. BROWN, CHERYL, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 600 BIG CROSS TRAIL
 City BROOKSIDE State UT Zip Code 84782-6048
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt 10 / 26 / 2016
Transaction ID : SA11A.451148
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	600.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 454 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
Team Ryan

A. BROWN, CHERYL, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 600 BIG CROSS TRAIL
 City BROOKSIDE State UT Zip Code 84782-6048
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 30 / 2016
Transaction ID : SA11A.460013
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION

B. BROWN, CHERYL, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 600 BIG CROSS TRAIL
 City BROOKSIDE State UT Zip Code 84782-6048
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 07 / 2016
Transaction ID : SA11A.474600
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION

C. BROWN, CHESTER, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 230 GAVER RD.
 City HAVANA State FL Zip Code 32333-5823
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) CHESTER CARL BROWN Occupation (for Individual) TRUCK DRIVER
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 225.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 07 / 2016
Transaction ID : SA11A.475532
 Amount of Each Receipt this Period
 25.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	225.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 455 OF 4311
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. BROWN, DAVID, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 2999 38TH STREET NW

City WASHINGTON	State DC	Zip Code 20016-5402
--------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
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Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		26		2016

Transaction ID : SA11A.447655

Amount of Each Receipt this Period
250.00

Memo Item CONTRIBUTION

B. BROWN, DAVID, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 345 PONTE VEDRA BLVD

City PONTE VEDRA BEACH	State FL	Zip Code 32082-1813
---------------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) WEB.COM	Occupation (for Individual) EXECUTIVE
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		25		2016

Transaction ID : SA11A.452189

Amount of Each Receipt this Period
500.00

Memo Item CONTRIBUTION

C. BROWN, DOROTHY, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1401 HACIENDA DRIVE

City EL CAJON	State CA	Zip Code 92020-1325
------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
235.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11		01		2016

Transaction ID : SA11A.461640

Amount of Each Receipt this Period
200.00

Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	950.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 456 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. BROWN, ELIZABETH, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 855 CLIFTONS COVE CT
 City COCOA State FL Zip Code 32926-2354
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt **10 / 26 / 2016**
Transaction ID : SA11A.450739
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

B. BROWN, ELIZABETH, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 855 CLIFTONS COVE CT
 City COCOA State FL Zip Code 32926-2354
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt **10 / 31 / 2016**
Transaction ID : SA11A.464177
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

C. BROWN, ELIZABETH, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 855 CLIFTONS COVE CT
 City COCOA State FL Zip Code 32926-2354
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt **11 / 07 / 2016**
Transaction ID : SA11A.476198
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 75.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 457 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. BROWN, ELLEN, DEE, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 95 MENLOUGH DR
 City WARRENTON State VA Zip Code 20186-3030
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) PONTON SOLUTIONS Occupation (for Individual) RECRUITER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt 10 / 27 / 2016
Transaction ID : SA11A.452992
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

B. BROWN, ELLEN, DEE, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 95 MENLOUGH DR
 City WARRENTON State VA Zip Code 20186-3030
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) PONTON SOLUTIONS Occupation (for Individual) RECRUITER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt 11 / 04 / 2016
Transaction ID : SA11A.472553
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

C. BROWNING, ETHA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 7307 CURLEW DR
 City CYPRESS State TX Zip Code 77433-3258
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 11 / 06 / 2016
Transaction ID : SA11A.477388
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	300.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 458 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. BROWNING, ETHA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 7307 CURLEW DR
 City CYPRESS State TX Zip Code 77433-3258
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 11 / 06 / 2016
Transaction ID : SA11A.477389
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

B. BROWN, GARY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 381 SENIOR DR
 City LAWRENCEVILLE State GA Zip Code 30044-5461
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 350.00

Date of Receipt 11 / 01 / 2016
Transaction ID : SA11A.462394
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

C. BROWN, GEORGE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 26291 MIRA WAY
 City BONITA SPRINGS State FL Zip Code 34134-1638
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 550.00

Date of Receipt 10 / 28 / 2016
Transaction ID : SA11A.455983
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	250.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 459 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. BROWN, GEORGE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 26291 MIRA WAY
 City BONITA SPRINGS State FL Zip Code 34134-1638
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 550.00

Date of Receipt 11 / 04 / 2016
Transaction ID : SA11A.472668
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

B. BROWN, HAROLD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1503WESTERNAVE
 City FARIBAULT State MN Zip Code 55021-9267
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 600.00

Date of Receipt 11 / 04 / 2016
Transaction ID : SA11A.472616
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

C. BROWN, KIM, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4351 NORTH LAKE RD.
 City COLUMBIAVILLE State MI Zip Code 48421-8961
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) MATTINA, KENT & GIBBONS, P.C. Occupation (for Individual) C.P.A.
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 659.00

Date of Receipt 10 / 31 / 2016
Transaction ID : SA11A.458025
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 300.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 460 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. BROWN, KIM, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4351 NORTH LAKE RD.
 City COLUMBIAVILLE State MI Zip Code 48421-8961
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) MATTINA, KENT & GIBBONS, P.C. Occupation (for Individual) C.P.A.
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 659.00

Date of Receipt 10 / 31 / 2016
Transaction ID : SA11A.458041
 Amount of Each Receipt this Period 100.00
 Memo Item
CONTRIBUTION

B. BROWN, L, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 721 W 300 SO
 City LEHI State UT Zip Code 84043-2518
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 325.00

Date of Receipt 10 / 29 / 2016
Transaction ID : SA11A.461111
 Amount of Each Receipt this Period 25.00
 Memo Item
CONTRIBUTION

C. BROWN, L, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 721 W 300 SO
 City LEHI State UT Zip Code 84043-2518
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 325.00

Date of Receipt 11 / 04 / 2016
Transaction ID : SA11A.470853
 Amount of Each Receipt this Period 25.00
 Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	150.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 461 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name A. BROWN, LARRY, , ,		Date of Receipt MM / DD / YYYY 11 / 02 / 2016 Transaction ID : SA11A.469731
Mailing Address 801 BRENTWOOD POINT		Amount of Each Receipt this Period 250.00
City NAPLES	State FL	Zip Code 34110-7915
FEC ID number of contributing federal political committee. C		<input type="checkbox"/> Memo Item CONTRIBUTION
Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name B. BROWN, MARCIA, , ,		Date of Receipt MM / DD / YYYY 10 / 31 / 2016 Transaction ID : SA11A.458579
Mailing Address 469 SMITH RD		Amount of Each Receipt this Period 25.00
City LUGOFF	State SC	Zip Code 29078-9215
FEC ID number of contributing federal political committee. C		<input type="checkbox"/> Memo Item CONTRIBUTION
Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 400.00	

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name C. BROWN, MARCIA, , ,		Date of Receipt MM / DD / YYYY 10 / 29 / 2016 Transaction ID : SA11A.461106
Mailing Address 469 SMITH RD		Amount of Each Receipt this Period 50.00
City LUGOFF	State SC	Zip Code 29078-9215
FEC ID number of contributing federal political committee. C		<input type="checkbox"/> Memo Item CONTRIBUTION
Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Aggregate Year-to-Date ▼ 400.00	

SUBTOTAL of Receipts This Page (optional).....▶	325.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 462 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. BROWN, MARCIA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 469 SMITH RD
 City LUGOFF State SC Zip Code 29078-9215
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt
 11 / 04 / 2016
Transaction ID : SA11A.471162
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

B. BROWN, MARCIA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 469 SMITH RD
 City LUGOFF State SC Zip Code 29078-9215
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt
 11 / 07 / 2016
Transaction ID : SA11A.480530
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

C. BROWN, NANCY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 607 OXFORD ST
 City BELVIDERE State NJ Zip Code 07823-1601
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 800.00

Date of Receipt
 10 / 22 / 2016
Transaction ID : SA11A.447016
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	125.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 463 OF 4311
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name A. BROWN, NANCY, , ,		Date of Receipt
Mailing Address 607 OXFORD ST		<input type="text" value="10"/> / <input type="text" value="22"/> / <input type="text" value="2016"/>
City BELVIDERE	State NJ	Zip Code 07823-1601
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		Transaction ID : SA11A.447019
Name of Employer (for Individual) NONE		Amount of Each Receipt this Period <input type="text" value="50.00"/>
Occupation (for Individual) RETIRED		<input type="checkbox"/> Memo Item CONTRIBUTION
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ <input type="text" value="800.00"/>	

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name B. BROWN, NANCY, , ,		Date of Receipt
Mailing Address 607 OXFORD ST		<input type="text" value="10"/> / <input type="text" value="25"/> / <input type="text" value="2016"/>
City BELVIDERE	State NJ	Zip Code 07823-1601
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		Transaction ID : SA11A.448054
Name of Employer (for Individual) NONE		Amount of Each Receipt this Period <input type="text" value="50.00"/>
Occupation (for Individual) RETIRED		<input type="checkbox"/> Memo Item CONTRIBUTION
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ <input type="text" value="800.00"/>	

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name C. BROWN, NANCY, , ,		Date of Receipt
Mailing Address 607 OXFORD ST		<input type="text" value="10"/> / <input type="text" value="31"/> / <input type="text" value="2016"/>
City BELVIDERE	State NJ	Zip Code 07823-1601
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		Transaction ID : SA11A.457837
Name of Employer (for Individual) NONE		Amount of Each Receipt this Period <input type="text" value="25.00"/>
Occupation (for Individual) RETIRED		<input type="checkbox"/> Memo Item CONTRIBUTION
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Aggregate Year-to-Date ▼ <input type="text" value="800.00"/>	

SUBTOTAL of Receipts This Page (optional).....▶	<input type="text" value="125.00"/>
TOTAL This Period (last page this line number only).....▶	<input type="text"/>

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 464 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
-----------------------------	-----------------------------	-----------------------------

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
Team Ryan

A. BROWN, NANCY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 607 OXFORD ST
 City BELVIDERE State NJ Zip Code 07823-1601
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 800.00

Date of Receipt 10 / 31 / 2016
Transaction ID : SA11A.457845
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

B. BROWN, ROBERT, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 285 HAWTHORNE ROAD
 City GREEN OAKS State IL Zip Code 60048-2437
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) INFORMATION REQUESTED PER BEST EFFORTS Occupation (for Individual) INFORMATION REQUESTED PER BE
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt 10 / 25 / 2016
Transaction ID : SA11A.447584
 Amount of Each Receipt this Period 1000.00
 Memo Item CONTRIBUTION

C. BROWN, ROBERT, J., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2164 HIGHGATE ROAD
 City WESTLAKE VILLAGE State CA Zip Code 91361-3523
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 10 / 26 / 2016
Transaction ID : SA11A.447745
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	1075.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 465 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. BROWN, TREBOR, S., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4580 BISHOP LAKE ROAD
 City MARIETTA State GA Zip Code 30062-6405
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SOUTHEASTERN LAUNDRY EQUIPMENT SALES Occupation (for Individual) OWNER
 Receipt For: Primary General Other (specify) Aggregate Year-to-Date 500.00

Date of Receipt 10 / 21 / 2016
Transaction ID : SA11A.443518
 Amount of Each Receipt this Period 500.00
 Memo Item CONTRIBUTION

B. BROWN, WARREN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 381 SPRING HILL ROAD
 City EASTON State PA Zip Code 18042-9607
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) ASBURY GRAPHITE MILLS Occupation (for Individual) SALES
 Receipt For: Primary General Other (specify) Aggregate Year-to-Date 475.00

Date of Receipt 11 / 06 / 2016
Transaction ID : SA11A.477302
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

C. BROWN JR., WILLIAM, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 17212 WATERLOO RD
 City AMISSVILLE State VA Zip Code 20106-2057
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) Aggregate Year-to-Date 350.00

Date of Receipt 11 / 04 / 2016
Transaction ID : SA11A.473633
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... **700.00**
TOTAL This Period (last page this line number only).....

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 466 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. BROWN, WILLIAM, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3193 FANNIN LN
 City SOUTHLAKE State TX Zip Code 76092-3327
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) FEDERAL AVIATION ADMINISTRATION Occupation (for Individual) AIR TRAFFIC CONTROLLER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 11 / 04 / 2016
Transaction ID : SA11A.479380
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

B. BROWN, WILLIAM, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3193 FANNIN LN
 City SOUTHLAKE State TX Zip Code 76092-3327
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) FEDERAL AVIATION ADMINISTRATION Occupation (for Individual) AIR TRAFFIC CONTROLLER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 11 / 07 / 2016
Transaction ID : SA11A.480352
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

C. BROWN, WILLIAM, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3193 FANNIN LN
 City SOUTHLAKE State TX Zip Code 76092-3327
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) FEDERAL AVIATION ADMINISTRATION Occupation (for Individual) AIR TRAFFIC CONTROLLER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 11 / 07 / 2016
Transaction ID : SA11A.480354
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	300.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 467 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. BROYHILL, KENT, I., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1181 ROWLEY MILE
 City MCKINNEY State TX Zip Code 75069-8845
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 260.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 24 / 2016
Transaction ID : SA11A.443811
 Amount of Each Receipt this Period
 50.00
 Memo Item
 CONTRIBUTION

B. BROYHILL, KENT, I., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1181 ROWLEY MILE
 City MCKINNEY State TX Zip Code 75069-8845
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 260.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 03 / 2016
Transaction ID : SA11A.465318
 Amount of Each Receipt this Period
 75.00
 Memo Item
 CONTRIBUTION

C. BRUCE, ROBERT, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3202E65TH ST
 City TULSA State OK Zip Code 74136-
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) UROLOGIC SPECIALISTS Occupation (for Individual) PHYSICIAN
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 24 / 2016
Transaction ID : SA11A.449373
 Amount of Each Receipt this Period
 50.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	175.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 468 OF 4311
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. BRUCE, ROBERT, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 3202E65TH ST

City TULSA	State OK	Zip Code 74136-
---------------	-------------	--------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) UROLOGIC SPECIALISTS	Occupation (for Individual) PHYSICIAN
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		24		2016

Transaction ID : SA11A.449375

Amount of Each Receipt this Period
50.00

Memo Item
CONTRIBUTION

B. BRUCE, ROBERT, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 3202E65TH ST

City TULSA	State OK	Zip Code 74136-
---------------	-------------	--------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) UROLOGIC SPECIALISTS	Occupation (for Individual) PHYSICIAN
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11		03		2016

Transaction ID : SA11A.469228

Amount of Each Receipt this Period
50.00

Memo Item
CONTRIBUTION

C. BRUCE, ROBERT, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 3202E65TH ST

City TULSA	State OK	Zip Code 74136-
---------------	-------------	--------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) UROLOGIC SPECIALISTS	Occupation (for Individual) PHYSICIAN
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11		03		2016

Transaction ID : SA11A.469229

Amount of Each Receipt this Period
50.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	150.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 469 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
Team Ryan

A. BRUCE, ROBERT, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3202E65TH ST
 City TULSA State OK Zip Code 74136-
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) UROLOGIC SPECIALISTS Occupation (for Individual) PHYSICIAN
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 11 / 04 / 2016
Transaction ID : SA11A.471275
 Amount of Each Receipt this Period 50.00
 Memo Item
 CONTRIBUTION

B. BRUCE, ROBERT, T., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 960 W BUTTERMILK ROAD
 City ASPEN State CO Zip Code 81611-2727
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 670.00

Date of Receipt 11 / 01 / 2016
Transaction ID : SA11A.461880
 Amount of Each Receipt this Period 35.00
 Memo Item
 CONTRIBUTION

C. BRUEN, PATRICIA, , MRS.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 35 CRESCENT VIEW CT
 City THE WOODLANDS State TX Zip Code 77381-3893
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) WEAVER LLC Occupation (for Individual) CPA
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 700.00

Date of Receipt 10 / 25 / 2016
Transaction ID : SA11A.448850
 Amount of Each Receipt this Period 100.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	185.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 470 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. BRUEN, PATRICIA, , MRS.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 35 CRESCENT VIEW CT
 City THE WOODLANDS State TX Zip Code 77381-3893
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) WEAVER LLC Occupation (for Individual) CPA
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 700.00

Date of Receipt 11 / 04 / 2016
Transaction ID : SA11A.473404
 Amount of Each Receipt this Period 100.00
 Memo Item
CONTRIBUTION

B. BRUGGEMAN, RICHARD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1761 HARDIN LANE
 City POWELL State OH Zip Code 43065-9646
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) RE MANAGEMENT
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1300.00

Date of Receipt 10 / 29 / 2016
Transaction ID : SA11A.461056
 Amount of Each Receipt this Period 250.00
 Memo Item
CONTRIBUTION

C. BRUGGEMAN, RICHARD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1761 HARDIN LANE
 City POWELL State OH Zip Code 43065-9646
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) RE MANAGEMENT
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 1300.00

Date of Receipt 11 / 04 / 2016
Transaction ID : SA11A.472144
 Amount of Each Receipt this Period 250.00
 Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	600.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 471 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. BRUICH, DAN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3136 HOLLYBURNE CT
 City GLENDALE State CA Zip Code 91206-4807
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 23 / 2016
Transaction ID : SA11A.449584
 Amount of Each Receipt this Period
 250.00
 Memo Item
 CONTRIBUTION

B. BRUNDAGE, STEPHEN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1125 SHASTA LANE
 City FOREST State VA Zip Code 24551-8001
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 600.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 31 / 2016
Transaction ID : SA11A.458685
 Amount of Each Receipt this Period
 50.00
 Memo Item
 CONTRIBUTION

C. BRUNDAGE, STEPHEN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1125 SHASTA LANE
 City FOREST State VA Zip Code 24551-8001
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 600.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 31 / 2016
Transaction ID : SA11A.458695
 Amount of Each Receipt this Period
 50.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	350.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 472 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
Team Ryan

A. BRUNDAGE, STEPHEN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1125 SHASTA LANE
 City FOREST State VA Zip Code 24551-8001
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 600.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 11 / 04 / 2016
Transaction ID : SA11A.473862
 Amount of Each Receipt this Period
 250.00
 Memo Item
 CONTRIBUTION

B. BRUNETTI, JOHN, J., MR,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 84 BAL BAY DRIVE
 City BAL HARBOUR State FL Zip Code 33154-1309
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) BRUNETTI ORGANIZATION Occupation (for Individual) REAL ESTATE
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 2100.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 11 / 01 / 2016
Transaction ID : SA11A.461846
 Amount of Each Receipt this Period
 1000.00
 Memo Item
 CONTRIBUTION

C. BRUNEAU, MARC, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2016 LAKE SHORE ROAD
 City GRAFTON State WI Zip Code 53024-9743
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 231.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 11 / 04 / 2016
Transaction ID : SA11A.474310
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	1350.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 473 OF 4311
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. BRUNI, FRANK, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 18 TAUNTON ROAD

City SCARSDALE	State NY	Zip Code 10583-5610
-------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
400.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		23		2016

Transaction ID : SA11A.446526

Amount of Each Receipt this Period
100.00

Memo Item CONTRIBUTION

B. BRUNI, FRANK, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 18 TAUNTON ROAD

City SCARSDALE	State NY	Zip Code 10583-5610
-------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
400.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11		04		2016

Transaction ID : SA11A.471530

Amount of Each Receipt this Period
100.00

Memo Item CONTRIBUTION

C. BRUNI, ROBERT, J., MR., II
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 12703 OLD WICK ROAD

City SAN ANTONIO	State TX	Zip Code 78230-1939
---------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) RETIRED	Occupation (for Individual) RETIRED
--	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
4000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11		01		2016

Transaction ID : SA11A.461765

Amount of Each Receipt this Period
2000.00

Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	2200.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 474 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. BRUNNER, ELIZABETH, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1035 BERKSHIRE STREET
 City OAK PARK State IL Zip Code 60302-1369
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt **11 / 03 / 2016**
Transaction ID : SA11A.465322
 Amount of Each Receipt this Period 500.00
 Memo Item CONTRIBUTION

B. BRUNOLLI, MICHAEL, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2470 MONTEREY DRIVE
 City ESCONDIDO State CA Zip Code 92029-5508
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt **11 / 07 / 2016**
Transaction ID : SA11A.474724
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

C. BRUNOFF, SUASN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 334 W CEDAR STREET
 City NEW HOLLAND State PA Zip Code 17557-1202
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 600.00

Date of Receipt **11 / 01 / 2016**
Transaction ID : SA11A.461604
 Amount of Each Receipt this Period 400.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	1000.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 475 OF 4311
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. BRUNOFF, SUASN, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 334 W CEDAR STREET

City NEW HOLLAND	State PA	Zip Code 17557-1202
---------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
600.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
11		01		2016

Transaction ID : SA11A.461605

Amount of Each Receipt this Period
200.00

Memo Item
CONTRIBUTION

B. BRUNOFF, SUSAN, V., MRS.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 334 W CEDAR ST

City NEW HOLLAND	State PA	Zip Code 17557-1202
---------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
2855.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
10		21		2016

Transaction ID : SA11A.443571

Amount of Each Receipt this Period
70.00

Memo Item
CONTRIBUTION

C. BRUNOFF, SUSAN, V., MRS.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 334 W CEDAR ST

City NEW HOLLAND	State PA	Zip Code 17557-1202
---------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
2855.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
10		21		2016

Transaction ID : SA11A.443572

Amount of Each Receipt this Period
400.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	670.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 476 OF 4311
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. BRUNOFF, SUSAN, V., MRS.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 334 W CEDAR ST

City NEW HOLLAND	State PA	Zip Code 17557-1202
---------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
2855.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		24		2016

Transaction ID : SA11A.443856

Amount of Each Receipt this Period
500.00

Memo Item
CONTRIBUTION

B. BRUNOFF, SUSAN, V., MRS.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 334 W CEDAR ST

City NEW HOLLAND	State PA	Zip Code 17557-1202
---------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
2855.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		31		2016

Transaction ID : SA11A.457268

Amount of Each Receipt this Period
200.00

Memo Item
CONTRIBUTION

C. BRUNOFF, SUSAN, V., MRS.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 334 W CEDAR ST

City NEW HOLLAND	State PA	Zip Code 17557-1202
---------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
2855.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11		08		2016

Transaction ID : SA11A.467950

Amount of Each Receipt this Period
100.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	800.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 477 OF 4311
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. BRYAN, FREDERICK, E., MR., III
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 8980 INDIAN RIDGE LN

City CINCINNATI	State OH	Zip Code 45243-3718
--------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
2200.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		31		2016

Transaction ID : SA11A.458027

Amount of Each Receipt this Period
1000.00

Memo Item
CONTRIBUTION

B. BRYAN, FREDERICK, E., MR., III
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 8980 INDIAN RIDGE LN

City CINCINNATI	State OH	Zip Code 45243-3718
--------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
2200.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		30		2016

Transaction ID : SA11A.460310

Amount of Each Receipt this Period
250.00

Memo Item
CONTRIBUTION

C. BRYAN, FREDERICK, E., MR., III
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 8980 INDIAN RIDGE LN

City CINCINNATI	State OH	Zip Code 45243-3718
--------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
2200.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11		04		2016

Transaction ID : SA11A.474025

Amount of Each Receipt this Period
250.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	1500.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 478 OF 4311
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. BRYANT, LAURENCE, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 2214 WATERTOWN CT

City THOUSAND OAKS	State CA	Zip Code 91360-1965
-----------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		25		2016

Transaction ID : SA11A.449085

Amount of Each Receipt this Period
25.00

Memo Item CONTRIBUTION

B. BRYANT, LAURENCE, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 2214 WATERTOWN CT

City THOUSAND OAKS	State CA	Zip Code 91360-1965
-----------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		25		2016

Transaction ID : SA11A.449090

Amount of Each Receipt this Period
50.00

Memo Item CONTRIBUTION

C. BRYANT, LAURENCE, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 2214 WATERTOWN CT

City THOUSAND OAKS	State CA	Zip Code 91360-1965
-----------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		31		2016

Transaction ID : SA11A.458455

Amount of Each Receipt this Period
50.00

Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	125.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 479 OF 4311
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. BRYANT, LAURENCE, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 2214 WATERTOWN CT

City THOUSAND OAKS	State CA	Zip Code 91360-1965
-----------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	07	/	2016

Transaction ID : SA11A.480039

Amount of Each Receipt this Period
50.00

Memo Item CONTRIBUTION

B. BRYANT, THEODORE, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 2263 SOUTH HOLLAND WAY

City LAKEWOOD	State CO	Zip Code 80227-2212
------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) TED BRYANT, INC.	Occupation (for Individual) REALTOR
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	31	/	2016

Transaction ID : SA11A.464294

Amount of Each Receipt this Period
25.00

Memo Item CONTRIBUTION

C. BRYANT, THEODORE, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 2263 SOUTH HOLLAND WAY

City LAKEWOOD	State CO	Zip Code 80227-2212
------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) TED BRYANT, INC.	Occupation (for Individual) REALTOR
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	07	/	2016

Transaction ID : SA11A.476177

Amount of Each Receipt this Period
25.00

Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	100.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 480 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
Team Ryan

A. BRYANT, THEODORE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2263 SOUTH HOLLAND WAY
 City LAKEWOOD State CO Zip Code 80227-2212
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) TED BRYANT, INC. Occupation (for Individual) REALTOR
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 11 / 07 / 2016
Transaction ID : SA11A.476179
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

B. BRYSON, DAVID, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 73456 COUNTRY CLUB DR. SPC 343
 City PALM DESERT State CA Zip Code 92260-8619
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 755.00

Date of Receipt 10 / 25 / 2016
Transaction ID : SA11A.448934
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

C. BRYSON, DAVID, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 73456 COUNTRY CLUB DR. SPC 343
 City PALM DESERT State CA Zip Code 92260-8619
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 755.00

Date of Receipt 10 / 25 / 2016
Transaction ID : SA11A.448945
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	100.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 481 OF 4311
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. BRYSON, DAVID, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 73456 COUNTRY CLUB DR. SPC 343

City PALM DESERT	State CA	Zip Code 92260-8619
---------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
755.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	26	/	2016

Transaction ID : SA11A.450982

Amount of Each Receipt this Period
30.00

Memo Item
CONTRIBUTION

B. BRYSON, DAVID, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 73456 COUNTRY CLUB DR. SPC 343

City PALM DESERT	State CA	Zip Code 92260-8619
---------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
755.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	27	/	2016

Transaction ID : SA11A.453956

Amount of Each Receipt this Period
25.00

Memo Item
CONTRIBUTION

C. BRYSON, DAVID, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 73456 COUNTRY CLUB DR. SPC 343

City PALM DESERT	State CA	Zip Code 92260-8619
---------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
755.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	04	/	2016

Transaction ID : SA11A.473340

Amount of Each Receipt this Period
50.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	105.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 482 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. BUCHANAN, SCOTT, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5 OLD TAVERN ROAD
 City NEWTOWN State CT Zip Code 06470-1781
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 10 / 31 / 2016
Transaction ID : SA11A.457252
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

B. BUCHAN, TAMARA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2005 BATES DRIVE
 City JOHNSTOWN State PA Zip Code 15905-1700
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) EXERCISE INSTRUCTOR
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 750.00

Date of Receipt 10 / 31 / 2016
Transaction ID : SA11A.459101
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

C. BUCHAN, TAMARA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2005 BATES DRIVE
 City JOHNSTOWN State PA Zip Code 15905-1700
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) EXERCISE INSTRUCTOR
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 750.00

Date of Receipt 11 / 04 / 2016
Transaction ID : SA11A.471155
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 250.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 483 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
Team Ryan

A. BUCKEL, HARRY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 524 KETCH LANE
 City LONGBOAT KEY State FL Zip Code 34228-3720
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 575.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 20 / 2016
Transaction ID : SA11A.441927
 Amount of Each Receipt this Period
 25.00
 Memo Item
 CONTRIBUTION

B. BUCKEL, HARRY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 524 KETCH LANE
 City LONGBOAT KEY State FL Zip Code 34228-3720
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 575.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 26 / 2016
Transaction ID : SA11A.454454
 Amount of Each Receipt this Period
 50.00
 Memo Item
 CONTRIBUTION

C. BUCKEL, HARRY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 524 KETCH LANE
 City LONGBOAT KEY State FL Zip Code 34228-3720
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 575.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 26 / 2016
Transaction ID : SA11A.454455
 Amount of Each Receipt this Period
 50.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	125.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 484 OF 4311
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. BUCKEL, HARRY, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 524 KETCH LANE
City LONGBOAT KEY State FL Zip Code 34228-3720
FEC ID number of contributing federal political committee. **C**
Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 575.00

Date of Receipt 11 / 01 / 2016
Transaction ID : SA11A.462645
Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

B. BUCKERT, WALTER, J., MR., JR.
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 20898 ROYAL VILLA TERRACE
City POTOMAC FALLS State VA Zip Code 20165-2499
FEC ID number of contributing federal political committee. **C**
Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 250.00

Date of Receipt 11 / 07 / 2016
Transaction ID : SA11A.475595
Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

C. BUCKHOUT, DIANNE, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 94 GRAEAGLE A MEADOWS RD, #394
City GRAEAGLE State CA Zip Code 96103-
FEC ID number of contributing federal political committee. **C**
Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
Receipt For: Primary General Other (specify)
Aggregate Year-to-Date ▼ 250.00

Date of Receipt 11 / 06 / 2016
Transaction ID : SA11A.478154
Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶ 350.00
TOTAL This Period (last page this line number only).....▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 485 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
Team Ryan

A. BUCKLEY, PATRICK, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 723 VENTURA DRIVE
 City SATELLITE BEACH State FL Zip Code 32937-5756
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt 10 / 20 / 2016
Transaction ID : SA11A.442490
 Amount of Each Receipt this Period 1000.00
 Memo Item CONTRIBUTION

B. BUCKMAN, ALLAN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 341 EMMANUEL CT
 City VALLEY PARK State MO Zip Code 63088-2312
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 255.00

Date of Receipt 11 / 05 / 2016
Transaction ID : SA11A.478766
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

C. BUCKNER, ERNEST, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1100 SOUTH 18TH STREET
 City SAINT LOUIS State MO Zip Code 63104-2912
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt 11 / 04 / 2016
Transaction ID : SA11A.471237
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	1150.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 486 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. BUDERUS, JANET, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 750 47TH AVE SPC 11
 SPC 11
 City CAPITOLA State CA Zip Code 95010-3136
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 370.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 20 / 2016
Transaction ID : SA11A.442591
 Amount of Each Receipt this Period
 25.00
 Memo Item
 CONTRIBUTION

B. BUDERUS, JANET, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 750 47TH AVE SPC 11
 SPC 11
 City CAPITOLA State CA Zip Code 95010-3136
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 370.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 20 / 2016
Transaction ID : SA11A.442593
 Amount of Each Receipt this Period
 25.00
 Memo Item
 CONTRIBUTION

C. BUDERUS, JANET, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 750 47TH AVE SPC 11
 SPC 11
 City CAPITOLA State CA Zip Code 95010-3136
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 370.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 20 / 2016
Transaction ID : SA11A.442594
 Amount of Each Receipt this Period
 25.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	75.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 487 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. BUDERUS, JANET, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 750 47TH AVE SPC 11
 SPC 11
 City CAPITOLA State CA Zip Code 95010-3136
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 370.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 23 / 2016
Transaction ID : SA11A.446607
 Amount of Each Receipt this Period
 25.00
 Memo Item
 CONTRIBUTION

B. BUDERUS, JANET, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 750 47TH AVE SPC 11
 SPC 11
 City CAPITOLA State CA Zip Code 95010-3136
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 370.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 23 / 2016
Transaction ID : SA11A.446608
 Amount of Each Receipt this Period
 25.00
 Memo Item
 CONTRIBUTION

C. BUDERUS, JANET, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 750 47TH AVE SPC 11
 SPC 11
 City CAPITOLA State CA Zip Code 95010-3136
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 370.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 22 / 2016
Transaction ID : SA11A.446846
 Amount of Each Receipt this Period
 25.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	75.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 488 OF 4311
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. BUDERUS, JANET, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 750 47TH AVE SPC 11
SPC 11

City CAPITOLA State CA Zip Code 95010-3136

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
370.00

Date of Receipt
11 / 01 / 2016
Transaction ID : SA11A.463023

Amount of Each Receipt this Period
25.00

Memo Item CONTRIBUTION

B. BUDERUS, JANET, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 750 47TH AVE SPC 11
SPC 11

City CAPITOLA State CA Zip Code 95010-3136

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
370.00

Date of Receipt
11 / 02 / 2016
Transaction ID : SA11A.469461

Amount of Each Receipt this Period
25.00

Memo Item CONTRIBUTION

C. BUDIG, MICHAEL, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 5304 E SILVER SPURS LB

City SPOKANE State WA Zip Code 99217-

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) ARBORIST OF WA Occupation (for Individual) PRESIDENT

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
1000.00

Date of Receipt
10 / 20 / 2016
Transaction ID : SA11A.444772

Amount of Each Receipt this Period
500.00

Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	550.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 489 OF 4311
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. BUDIG, MICHAEL, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 5304 E SILVER SPURS LB

City SPOKANE	State WA	Zip Code 99217-
-----------------	-------------	--------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) ARBORIST OF WA	Occupation (for Individual) PRESIDENT
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		20		2016

Transaction ID : SA11A.444773

Amount of Each Receipt this Period
500.00

Memo Item
CONTRIBUTION

B. BUEHNER, DONNA, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 71 WOODLAND CIRCLE

City HIGHLANDS RANCH	State CO	Zip Code 80126-3114
-------------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
305.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		20		2016

Transaction ID : SA11A.441991

Amount of Each Receipt this Period
25.00

Memo Item
CONTRIBUTION

C. BUEHNER, DONNA, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 71 WOODLAND CIRCLE

City HIGHLANDS RANCH	State CO	Zip Code 80126-3114
-------------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
305.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		29		2016

Transaction ID : SA11A.460964

Amount of Each Receipt this Period
15.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	540.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 490 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. BUEHNER, DONNA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 71 WOODLAND CIRCLE
 City HIGHLANDS RANCH State CO Zip Code 80126-3114
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 305.00

Date of Receipt 11 / 01 / 2016
Transaction ID : SA11A.462560
 Amount of Each Receipt this Period 10.00
 Memo Item CONTRIBUTION

B. BUEHNER, DONNA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 71 WOODLAND CIRCLE
 City HIGHLANDS RANCH State CO Zip Code 80126-3114
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 305.00

Date of Receipt 11 / 03 / 2016
Transaction ID : SA11A.474472
 Amount of Each Receipt this Period 15.00
 Memo Item CONTRIBUTION

C. BUERGER, MARY, M., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 115 STONY RIDGE CT.
 City HILLSDALE State MI Zip Code 49242-1154
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 1100.00

Date of Receipt 10 / 23 / 2016
Transaction ID : SA11A.446347
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 125.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 491 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
Team Ryan

A. BUERGER, MARY, M., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 115 STONY RIDGE CT.
 City HILLSDALE State MI Zip Code 49242-1154
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1100.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 30 / 2016
Transaction ID : SA11A.459557
 Amount of Each Receipt this Period
 250.00
 Memo Item
 CONTRIBUTION

B. BUERGER, MARY, M., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 115 STONY RIDGE CT.
 City HILLSDALE State MI Zip Code 49242-1154
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1100.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 02 / 2016
Transaction ID : SA11A.466474
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION

C. BUERGER, MARY, M., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 115 STONY RIDGE CT.
 City HILLSDALE State MI Zip Code 49242-1154
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1100.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 02 / 2016
Transaction ID : SA11A.466480
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	450.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 492 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
-----------------------------	-----------------------------	-----------------------------

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NAME OF COMMITTEE (In Full)
Team Ryan

A. BUERGER, MARY, M., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 115 STONY RIDGE CT.
 City HILLSDALE State MI Zip Code 49242-1154
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1100.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 02 / 2016
Transaction ID : SA11A.466489
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION

B. BUFFINGTON, GREGORY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1787B GLENWOOD CIRCLE
 City SUGAR GROVE State IL Zip Code 60554-2017
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 875.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 26 / 2016
Transaction ID : SA11A.450711
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION

C. BUFFINGTON, GREGORY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1787B GLENWOOD CIRCLE
 City SUGAR GROVE State IL Zip Code 60554-2017
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 875.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 31 / 2016
Transaction ID : SA11A.457814
 Amount of Each Receipt this Period
 25.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	225.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 493 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. BUFFINGTON, GREGORY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1787B GLENWOOD CIRCLE
 City SUGAR GROVE State IL Zip Code 60554-2017
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 875.00

Date of Receipt 11 / 01 / 2016
Transaction ID : SA11A.462484
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

B. BUFFINGTON, GREGORY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1787B GLENWOOD CIRCLE
 City SUGAR GROVE State IL Zip Code 60554-2017
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 875.00

Date of Receipt 11 / 05 / 2016
Transaction ID : SA11A.479208
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

C. BUFFINGTON, GREGORY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1787B GLENWOOD CIRCLE
 City SUGAR GROVE State IL Zip Code 60554-2017
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 875.00

Date of Receipt 11 / 05 / 2016
Transaction ID : SA11A.479212
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 200.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 494 OF 4311
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. BUGEIA, MARY, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 7 CHERRY HILL CT.

City DEARBORN	State MI	Zip Code 48124-1115
------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
875.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		30		2016

Transaction ID : SA11A.459377

Amount of Each Receipt this Period
50.00

Memo Item
CONTRIBUTION

B. BUGEIA, MARY, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 7 CHERRY HILL CT.

City DEARBORN	State MI	Zip Code 48124-1115
------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
875.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		30		2016

Transaction ID : SA11A.459379

Amount of Each Receipt this Period
50.00

Memo Item
CONTRIBUTION

C. BUGEIA, MARY, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 7 CHERRY HILL CT.

City DEARBORN	State MI	Zip Code 48124-1115
------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
875.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		31		2016

Transaction ID : SA11A.464325

Amount of Each Receipt this Period
50.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	150.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 495 OF 4311
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. BUGEIA, MARY, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 7 CHERRY HILL CT.
City DEARBORN State MI Zip Code 48124-1115
FEC ID number of contributing federal political committee. **C**
Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 875.00

Date of Receipt 10 / 31 / 2016
Transaction ID : SA11A.464414
Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

B. BUGEIA, MARY, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 7 CHERRY HILL CT.
City DEARBORN State MI Zip Code 48124-1115
FEC ID number of contributing federal political committee. **C**
Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 875.00

Date of Receipt 11 / 04 / 2016
Transaction ID : SA11A.471335
Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

C. BULLARD, JOHN, R., ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 1102 SUNNYBROOK
City ENID State OK Zip Code 73703-6509
FEC ID number of contributing federal political committee. **C**
Name of Employer (for Individual) INFORMATION REQUESTED PER BEST EFFORTS Occupation (for Individual) INFORMATION REQUESTED PER BEST EFFORTS
Receipt For: Primary General Other (specify)
Aggregate Year-to-Date ▼ 500.00

Date of Receipt 10 / 25 / 2016
Transaction ID : SA11A.447585
Amount of Each Receipt this Period 500.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶ 600.00
TOTAL This Period (last page this line number only).....▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 496 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
Team Ryan

A. BULLER, LARRY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 841 SAN ANGELO DR.
 City BISMARCK State ND Zip Code 58504-7467
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 600.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 04 / 2016
Transaction ID : SA11A.473079
 Amount of Each Receipt this Period
 50.00
 Memo Item
 CONTRIBUTION

B. BULLOCK, DONALD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2127 BANYAN DRIVE
 City LOS ANGELES State CA Zip Code 90049-1801
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 335.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 27 / 2016
Transaction ID : SA11A.453874
 Amount of Each Receipt this Period
 27.00
 Memo Item
 CONTRIBUTION

C. BUMGARNER, ARLENE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 10377 CLAUDIA AVE
 City BUENA PARK State CA Zip Code 90620-4407
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SAN GABRIEL ROP / TC Occupation (for Individual) REGISTERED NURSE / EDUCATOR
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 225.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 26 / 2016
Transaction ID : SA11A.454345
 Amount of Each Receipt this Period
 25.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	102.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 497 OF 4311
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. BUMGARNER, ARLENE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 10377 CLAUDIA AVE
 City BUENA PARK State CA Zip Code 90620-4407
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SAN GABRIEL ROP / TC Occupation (for Individual) REGISTERED NURSE / EDUCATOR
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 225.00

Date of Receipt 10 / 28 / 2016
Transaction ID : SA11A.455055
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

B. BUNCH, RANDEL, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 810 S MEADOWLARK LN
 City OTHELLO State WA Zip Code 99344-9530
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) CBHA Occupation (for Individual) RURAL FAMILY PHYSICIAN
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 450.00

Date of Receipt 10 / 26 / 2016
Transaction ID : SA11A.451130
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

C. BUNCH, RANDEL, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 810 S MEADOWLARK LN
 City OTHELLO State WA Zip Code 99344-9530
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) CBHA Occupation (for Individual) RURAL FAMILY PHYSICIAN
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 450.00

Date of Receipt 11 / 06 / 2016
Transaction ID : SA11A.478193
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 225.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 498 OF 4311
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. BUNDY, RONALD, M., MR.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 5200 IRVINE BLVD.
347

City IRVINE State CA Zip Code 92620-2013

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) CIVIL ENGINEER

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
292.00

Date of Receipt
10 / 31 / 2016
Transaction ID : SA11A.458413

Amount of Each Receipt this Period
50.00

Memo Item
CONTRIBUTION

B. BUNDY, RONALD, M., MR.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 5200 IRVINE BLVD.
347

City IRVINE State CA Zip Code 92620-2013

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) CIVIL ENGINEER

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
292.00

Date of Receipt
10 / 31 / 2016
Transaction ID : SA11A.458441

Amount of Each Receipt this Period
50.00

Memo Item
CONTRIBUTION

C. BUNDY, RONALD, M., MR.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 5200 IRVINE BLVD.
347

City IRVINE State CA Zip Code 92620-2013

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) CIVIL ENGINEER

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
292.00

Date of Receipt
10 / 31 / 2016
Transaction ID : SA11A.458446

Amount of Each Receipt this Period
50.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶ 150.00

TOTAL This Period (last page this line number only).....▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 499 OF 4311
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. BUNNETT, WILLIAM, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address P..O. BOX 1152

City CANADIAN	State TX	Zip Code 79014-1152
------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
205.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	22	/	2016

Transaction ID : SA11A.446938

Amount of Each Receipt this Period
30.00

Memo Item
CONTRIBUTION

B. BUNNETT, WILLIAM, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address P..O. BOX 1152

City CANADIAN	State TX	Zip Code 79014-1152
------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
205.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	04	/	2016

Transaction ID : SA11A.471907

Amount of Each Receipt this Period
30.00

Memo Item
CONTRIBUTION

C. BUNTING, DAVID, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 114 MLOUNTAIN VIEW DRIVE

City PACKWOOD	State WA	Zip Code 98361-9706
------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) HIGHWAY SHOPPER	Occupation (for Individual) PUBLISHER
--	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	04	/	2016

Transaction ID : SA11A.471705

Amount of Each Receipt this Period
50.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	110.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 500 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
-----------------------------	-----------------------------	-----------------------------

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NAME OF COMMITTEE (In Full)
Team Ryan

A. BURBULES, JOHN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 6902 HWY111
 City **SELLERSBURG** State **IN** Zip Code **47172-9238**
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) **NONE** Occupation (for Individual) **RETIRED**
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ **373.00**

Date of Receipt **10 / 25 / 2016**
Transaction ID : SA11A.448059
 Amount of Each Receipt this Period **50.00**
 Memo Item CONTRIBUTION

B. BURBULES, JOHN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 6902 HWY111
 City **SELLERSBURG** State **IN** Zip Code **47172-9238**
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) **NONE** Occupation (for Individual) **RETIRED**
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ **373.00**

Date of Receipt **10 / 25 / 2016**
Transaction ID : SA11A.451431
 Amount of Each Receipt this Period **30.00**
 Memo Item CONTRIBUTION

C. BURBULES, JOHN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 6902 HWY111
 City **SELLERSBURG** State **IN** Zip Code **47172-9238**
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) **NONE** Occupation (for Individual) **RETIRED**
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ **373.00**

Date of Receipt **10 / 29 / 2016**
Transaction ID : SA11A.460745
 Amount of Each Receipt this Period **25.00**
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	105.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 501 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. BURBULES, JOHN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 6902 HWY111
 City SELLERSBURG State IN Zip Code 47172-9238
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 373.00

Date of Receipt 11 / 02 / 2016
Transaction ID : SA11A.466236
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

B. BURCHILL, NYLE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 835 8TH AVE NW
 City VALLEY CITY State ND Zip Code 58072-2047
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 254.00

Date of Receipt 10 / 24 / 2016
Transaction ID : SA11A.449473
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

C. BURCHILL, NYLE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 835 8TH AVE NW
 City VALLEY CITY State ND Zip Code 58072-2047
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 254.00

Date of Receipt 11 / 07 / 2016
Transaction ID : SA11A.479957
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 75.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 502 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. BURCHFIELD, THOMAS, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1609 W 12TH
 City HOUSTON State TX Zip Code 77008-6446
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) PIPE DISTRIBUTORS INC Occupation (for Individual) CEO
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 450.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 27 / 2016
Transaction ID : SA11A.453834
 Amount of Each Receipt this Period
 75.00
 Memo Item
CONTRIBUTION

B. BURCHFIELD, THOMAS, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1609 W 12TH
 City HOUSTON State TX Zip Code 77008-6446
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) PIPE DISTRIBUTORS INC Occupation (for Individual) CEO
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 450.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 04 / 2016
Transaction ID : SA11A.472731
 Amount of Each Receipt this Period
 75.00
 Memo Item
CONTRIBUTION

C. BURDICK, THOMAS, J., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 31579 VINTNERS POINTE COURT
 City WINCHESTER State CA Zip Code 92596-8318
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 985.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 25 / 2016
Transaction ID : SA11A.447507
 Amount of Each Receipt this Period
 250.00
 Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	400.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 503 OF 4311
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. BURG, DAVID, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 12421 RYE STREET

City STUDIO CITY	State CA	Zip Code 91604-1255
---------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) SCHEPER KIM & HARRIS	Occupation (for Individual) ATTORNEY
---	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
205.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
11		01		2016

Transaction ID : SA11A.462525

Amount of Each Receipt this Period
30.00

Memo Item CONTRIBUTION

B. BURG, DAVID, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 12421 RYE STREET

City STUDIO CITY	State CA	Zip Code 91604-1255
---------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) SCHEPER KIM & HARRIS	Occupation (for Individual) ATTORNEY
---	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
205.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
11		06		2016

Transaction ID : SA11A.478309

Amount of Each Receipt this Period
25.00

Memo Item CONTRIBUTION

C. BURGESS, BRENTON, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 409 N COLLEGE DRIVE

City FRANKLIN	State VA	Zip Code 23851-2401
------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) BURGESS & CO	Occupation (for Individual) CPA
---	------------------------------------

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
250.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
11		03		2016

Transaction ID : SA11A.468661

Amount of Each Receipt this Period
250.00

Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	305.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 504 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. BURGESS, JONATHAN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 31 NATHAN CUTLER DRIVE
 City BEDFORD State NH Zip Code 03110-4811
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) AFLAC Occupation (for Individual) SALES MANAGER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 10 / 28 / 2016
Transaction ID : SA11A.456120
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

B. BURGESS, JONATHAN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 31 NATHAN CUTLER DRIVE
 City BEDFORD State NH Zip Code 03110-4811
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) AFLAC Occupation (for Individual) SALES MANAGER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 11 / 04 / 2016
Transaction ID : SA11A.471191
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

C. BURGESS, STANLEY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 32323 122ND STREET EAST
 City PEARBLOSSOM State CA Zip Code 93553-3492
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 11 / 03 / 2016
Transaction ID : SA11A.468797
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	300.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 505 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. BURGESS, STANLEY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 32323 122ND STREET EAST
 City PEARBLOSSOM State CA Zip Code 93553-3492
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 11 / 03 / 2016
Transaction ID : SA11A.468799
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

B. BURGHART, DOROTHY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 645 PINENEEDLE COURT
 City GRAND JUNCTION State CO Zip Code 81506-8760
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 350.00

Date of Receipt 11 / 04 / 2016
Transaction ID : SA11A.479336
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

C. BURHANS, KAREN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1411 SYCAMORE LN
 City NORTHBROOK State IL Zip Code 60062-5437
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 670.00

Date of Receipt 10 / 31 / 2016
Transaction ID : SA11A.459158
 Amount of Each Receipt this Period 60.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	210.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 506 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
Team Ryan

A. BURHANS, KAREN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1411 SYCAMORE LN
 City NORTHBROOK State IL Zip Code 60062-5437
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 670.00

Date of Receipt
 11 / 02 / 2016
Transaction ID : SA11A.469452
 Amount of Each Receipt this Period
 180.00
 Memo Item
 CONTRIBUTION

B. BURHANS, KAREN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1411 SYCAMORE LN
 City NORTHBROOK State IL Zip Code 60062-5437
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 670.00

Date of Receipt
 11 / 04 / 2016
Transaction ID : SA11A.471535
 Amount of Each Receipt this Period
 60.00
 Memo Item
 CONTRIBUTION

C. BURKETT, CHARLES, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 15502 AMBER HOLLOW LN.
 City CYPRESS State TX Zip Code 77429-4952
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 497.00

Date of Receipt
 10 / 29 / 2016
Transaction ID : SA11A.461007
 Amount of Each Receipt this Period
 50.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	290.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 507 OF 4311
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. BURKETT, CHARLES, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 15502 AMBER HOLLOW LN.

City CYPRESS State TX Zip Code 77429-4952

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 497.00

Date of Receipt 11 / 04 / 2016
Transaction ID : SA11A.471697

Amount of Each Receipt this Period 50.00

Memo Item CONTRIBUTION

B. BURKER, HARRY, S., MR., JR.
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 3000 GARLANDS LANE 3312

City BARRINGTON State IL Zip Code 60010-6847

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 700.00

Date of Receipt 10 / 24 / 2016
Transaction ID : SA11A.445837

Amount of Each Receipt this Period 500.00

Memo Item CONTRIBUTION

C. BURKE, ILLIS, F., ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 12109 SE 18TH STREET

City BELLEVUE State WA Zip Code 98005-4607

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) HOMEMAKER Occupation (for Individual) HOMEMAKER

Receipt For: Primary General Other (specify)

Aggregate Year-to-Date ▼ 300.00

Date of Receipt 10 / 26 / 2016
Transaction ID : SA11A.447683

Amount of Each Receipt this Period 100.00

Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 650.00

TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 508 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
Team Ryan

A. BURKE, JOHN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address SHILOH ROAD 496
 City BASTROP State TX Zip Code 78602-3762
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 410.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 25 / 2016
Transaction ID : SA11A.451670
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

B. BURKE, JOHN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address SHILOH ROAD 496
 City BASTROP State TX Zip Code 78602-3762
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 410.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 26 / 2016
Transaction ID : SA11A.454555
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

C. BURKE, JOHN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address SHILOH ROAD 496
 City BASTROP State TX Zip Code 78602-3762
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 410.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 02 / 2016
Transaction ID : SA11A.469671
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	75.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 509 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. BURKE, JOHN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address SHILOH ROAD 496
 City BASTROP State TX Zip Code 78602-3762
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 410.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 04 / 2016
Transaction ID : SA11A.473177
 Amount of Each Receipt this Period
 30.00
 Memo Item
 CONTRIBUTION

B. BURKE, JOHN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address SHILOH ROAD 496
 City BASTROP State TX Zip Code 78602-3762
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 410.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 04 / 2016
Transaction ID : SA11A.473330
 Amount of Each Receipt this Period
 25.00
 Memo Item
 CONTRIBUTION

C. BURKE, JOHN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address SHILOH ROAD 496
 City BASTROP State TX Zip Code 78602-3762
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 410.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 07 / 2016
Transaction ID : SA11A.474699
 Amount of Each Receipt this Period
 25.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	80.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 510 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
Team Ryan

A. BURKE, KEVIN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO BOX 311
 City MENDHAM State NJ Zip Code 07945-0311
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) LEAR CORP Occupation (for Individual) EXECUTIVE
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 04 / 2016
Transaction ID : SA11A.471764
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

B. BURKE, MARILYN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 313 E MAIN ST
 City DAVIS State OK Zip Code 73030-1905
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) REAL ESTATE & INSURANCE
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 450.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 02 / 2016
Transaction ID : SA11A.466088
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

C. BURKE, MARILYN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 313 E MAIN ST
 City DAVIS State OK Zip Code 73030-1905
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) REAL ESTATE & INSURANCE
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 450.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 02 / 2016
Transaction ID : SA11A.466089
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	150.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 511 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
Team Ryan

A. BURKE, MARILYN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 313 E MAIN ST
 City DAVIS State OK Zip Code 73030-1905
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) REAL ESTATE & INSURANCE
 Receipt For: Primary General Other (specify) Aggregate Year-to-Date 450.00

Date of Receipt 11 / 02 / 2016
Transaction ID : SA11A.466090
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

B. BURKHARDT, DONALD, J., DR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 6500 LAKE GROVE ROAD
 City PETOSKEY State MI Zip Code 49770-8311
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) Aggregate Year-to-Date 350.00

Date of Receipt 10 / 21 / 2016
Transaction ID : SA11A.443676
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

C. BURKHARDT, DONALD, J., DR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 6500 LAKE GROVE ROAD
 City PETOSKEY State MI Zip Code 49770-8311
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) Aggregate Year-to-Date 350.00

Date of Receipt 11 / 03 / 2016
Transaction ID : SA11A.465531
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	250.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 512 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. BURMEISTER, PAUL, F., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1332 NE 180 ROAD
 City CLAFLIN State KS Zip Code 67525-9219
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) FARMER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1250.00

Date of Receipt **11 / 04 / 2016**
Transaction ID : SA11A.467446
 Amount of Each Receipt this Period 150.00
 Memo Item CONTRIBUTION

B. BURNBAUM, BRIAN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1260 MANOR DR S
 City WESTON State FL Zip Code 33326-2824
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) BRIAN BURNBAUM Occupation (for Individual) PHYSICIAN
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 205.00

Date of Receipt **11 / 07 / 2016**
Transaction ID : SA11A.475866
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

C. BURNETT, GEORGE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 94-439 KUPUNA LP
 City WAIPAHAU State HI Zip Code 96797-1281
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) STATE OF HAWAII Occupation (for Individual) TELECOMMUNICATIONS
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 350.00

Date of Receipt **10 / 27 / 2016**
Transaction ID : SA11A.453195
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	275.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 513 OF 4311
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. BURNETT, R, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 14471 SILK OAK LANE

City MADERA	State CA	Zip Code 93637-9297
----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	25	/	2016

Transaction ID : SA11A.452239

Amount of Each Receipt this Period
500.00

Memo Item
CONTRIBUTION

B. BURNS, JEFFREY, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 44 RED ALDER CT

City DANVILLE	State CA	Zip Code 94506-4548
------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) WALKER & DUNLOP, LLC	Occupation (for Individual) MORTGAGE BANKER
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
3250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	04	/	2016

Transaction ID : SA11A.471765

Amount of Each Receipt this Period
1000.00

Memo Item
CONTRIBUTION

C. BURR, CARLETON, , , JR
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 27 PAWKECHATT WAY

City MARION	State MA	Zip Code 02738-1620
----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) BURR BROTHERS BOATS	Occupation (for Individual) BOAT REPAIR
--	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	26	/	2016

Transaction ID : SA11A.450866

Amount of Each Receipt this Period
50.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	1550.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 514 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. BURR, CARLETON, , , JR
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 27 PAWKECHATT WAY
 City MARION State MA Zip Code 02738-1620
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) BURR BROTHERS BOATS Occupation (for Individual) BOAT REPAIR
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 31 / 2016
Transaction ID : SA11A.457228
 Amount of Each Receipt this Period
 200.00
 Memo Item
 CONTRIBUTION

B. BURRISS, JOHN, A., , JR.
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 415 161ST PLACE SE
 City BELLEVUE State WA Zip Code 98008-4831
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 700.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 01 / 2016
Transaction ID : SA11A.457143
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION

C. BURRISS, JOHN, A., , JR.
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 415 161ST PLACE SE
 City BELLEVUE State WA Zip Code 98008-4831
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 700.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 01 / 2016
Transaction ID : SA11A.457225
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	400.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 515 OF 4311		
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14	<input type="checkbox"/> 11c <input type="checkbox"/> 15	<input type="checkbox"/> 12 <input type="checkbox"/> 16

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NAME OF COMMITTEE (In Full)
Team Ryan

A. BURRY, MARY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 720 KENOLA COURT
 City LAKE OSWEGO State OR Zip Code 97034-4667
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 325.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 07 / 2016
Transaction ID : SA11A.475702
 Amount of Each Receipt this Period
 50.00
 Memo Item
 CONTRIBUTION

B. BURRY, MARY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 720 KENOLA COURT
 City LAKE OSWEGO State OR Zip Code 97034-4667
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 325.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 07 / 2016
Transaction ID : SA11A.475703
 Amount of Each Receipt this Period
 50.00
 Memo Item
 CONTRIBUTION

C. BURT, ALLEN, M., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 13715 N. WILD HAZEL LANE
 City MARANA State AZ Zip Code 85658-4444
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 800.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 31 / 2016
Transaction ID : SA11A.457946
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	200.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 516 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. BURT, ALLEN, M., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 13715 N. WILD HAZEL LANE
 City MARANA State AZ Zip Code 85658-4444
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 800.00

Date of Receipt 11 / 05 / 2016
Transaction ID : SA11A.478471
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

B. BURT, CHARLES, T., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 8S041 CREEK DRIVE
 City NAPERVILLE State IL Zip Code 60540-9326
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1317.00

Date of Receipt 10 / 21 / 2016
Transaction ID : SA11A.444134
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

C. BURT, CHARLES, T., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 8S041 CREEK DRIVE
 City NAPERVILLE State IL Zip Code 60540-9326
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1317.00

Date of Receipt 10 / 28 / 2016
Transaction ID : SA11A.455353
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶ 125.00
TOTAL This Period (last page this line number only).....▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 517 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. BURT, CHARLES, T., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 8S041 CREEK DRIVE
 City NAPERVILLE State IL Zip Code 60540-9326
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1317.00

Date of Receipt 10 / 28 / 2016
Transaction ID : SA11A.455357
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

B. BURT, CHARLES, T., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 8S041 CREEK DRIVE
 City NAPERVILLE State IL Zip Code 60540-9326
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1317.00

Date of Receipt 10 / 31 / 2016
Transaction ID : SA11A.458022
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

C. BURT, CHARLES, T., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 8S041 CREEK DRIVE
 City NAPERVILLE State IL Zip Code 60540-9326
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1317.00

Date of Receipt 11 / 01 / 2016
Transaction ID : SA11A.461581
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	325.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 518 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
Team Ryan

A. BURT, WILLIAM, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1 HARVEST CIRCLE
 3
 City LINCOLN State MA Zip Code 01773-3215
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 06 / 2016
Transaction ID : SA11A.478058
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION

B. BURT, WILLIAM, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1 HARVEST CIRCLE
 3
 City LINCOLN State MA Zip Code 01773-3215
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 07 / 2016
Transaction ID : SA11A.480295
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION

C. BUSBY, BRUCE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address BOX 48
 City DOSS State TX Zip Code 78618-0048
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 455.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 05 / 2016
Transaction ID : SA11A.478600
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	300.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 519 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. BUSBY, JEFFREY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3655 LAZY BEND RD
 City MILLSAP State TX Zip Code 76066-3837
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) BUSBY QUARTER HORSES Occupation (for Individual) OWNER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 50000.00

Date of Receipt 10 / 24 / 2016
Transaction ID : SA11A.444066
 Amount of Each Receipt this Period 25000.00
 Memo Item CONTRIBUTION

B. BUSEY, SAMUEL, H., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 43519 PUMPKIN RIDGE COURT
 City ASHBURN State VA Zip Code 20147-5241
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) EPL ARCHIVES Occupation (for Individual) PRESIDENT
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt 10 / 21 / 2016
Transaction ID : SA11A.443534
 Amount of Each Receipt this Period 200.00
 Memo Item CONTRIBUTION

C. BUSH, JEAN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2206 HERITAGE HILL DRIVE
 City JACKSON State MS Zip Code 39211-5821
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) WORTHNEWYORK Occupation (for Individual) SALES
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 375.00

Date of Receipt 10 / 31 / 2016
Transaction ID : SA11A.459097
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	25225.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 520 OF 4311
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. BUSH, JEAN, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 2206 HERITAGE HILL DRIVE

City JACKSON	State MS	Zip Code 39211-5821
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) WORTHNEWYORK	Occupation (for Individual) SALES
---	--------------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
375.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11		04		2016

Transaction ID : SA11A.471113

Amount of Each Receipt this Period
25.00

Memo Item
CONTRIBUTION

B. BUSH, JEAN, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 2206 HERITAGE HILL DRIVE

City JACKSON	State MS	Zip Code 39211-5821
-----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) WORTHNEWYORK	Occupation (for Individual) SALES
---	--------------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
375.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11		06		2016

Transaction ID : SA11A.477713

Amount of Each Receipt this Period
50.00

Memo Item
CONTRIBUTION

C. BUSH, ROY, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 214 S 58TH AVENUE

City YAKIMA	State WA	Zip Code 98908-3429
----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
400.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11		04		2016

Transaction ID : SA11A.471683

Amount of Each Receipt this Period
100.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	175.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 521 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. BUSTERUD, JOHN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 110 BELLA VISTA AVE
 City BELVEDERE State CA Zip Code 94920-2466
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 11 / 03 / 2016
Transaction ID : SA11A.469255
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

B. BUSTERUD, JOHN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 110 BELLA VISTA AVE
 City BELVEDERE State CA Zip Code 94920-2466
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 11 / 03 / 2016
Transaction ID : SA11A.469256
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

C. BUTCHER IV, HOWARD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3901 TALL OAKS LANE
 City NEWTOWN SQUARE State PA Zip Code 19073-2771
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 600.00

Date of Receipt 10 / 31 / 2016
Transaction ID : SA11A.459099
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	600.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 522 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. BUTCHER IV, HOWARD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3901 TALL OAKS LANE
 City NEWTOWN SQUARE State PA Zip Code 19073-2771
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 600.00

Date of Receipt 11 / 04 / 2016
Transaction ID : SA11A.471406
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

B. BUTLER, AUDIS, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 21 WINDWARD RD
 City FORT WORTH State TX Zip Code 76132-1020
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 730.00

Date of Receipt 10 / 25 / 2016
Transaction ID : SA11A.448410
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

C. BUTLER, AUDIS, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 21 WINDWARD RD
 City FORT WORTH State TX Zip Code 76132-1020
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 730.00

Date of Receipt 10 / 27 / 2016
Transaction ID : SA11A.453828
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 250.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 523 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
Team Ryan

A. BUTLER, AUDIS, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 21 WINDWARD RD
 City FORT WORTH State TX Zip Code 76132-1020
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 730.00

Date of Receipt
 11 / 04 / 2016
Transaction ID : SA11A.472633
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

B. BUTLER, AUDIS, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 21 WINDWARD RD
 City FORT WORTH State TX Zip Code 76132-1020
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 730.00

Date of Receipt
 11 / 04 / 2016
Transaction ID : SA11A.474224
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

C. BUTLER, DEBRA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 7012 GREEN OAK DRIVE
 City MCLEAN State VA Zip Code 22101-1551
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NEVERNEEDSWINDING LLC Occupation (for Individual) MARKETING
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 700.00

Date of Receipt
 10 / 25 / 2016
Transaction ID : SA11A.448502
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	350.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 524 OF 4311
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. BUTLER, LAWRENCE, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 340 S US HIGHWAY 1 APT 401

City JUPITER	State FL	Zip Code 33477-5929
-----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
700.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		25		2016

Transaction ID : SA11A.448209

Amount of Each Receipt this Period
250.00

Memo Item CONTRIBUTION

B. BUTLER, LAWRENCE, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 340 S US HIGHWAY 1 APT 401

City JUPITER	State FL	Zip Code 33477-5929
-----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
700.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		31		2016

Transaction ID : SA11A.464432

Amount of Each Receipt this Period
100.00

Memo Item CONTRIBUTION

C. BUTLER, LAWRENCE, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 340 S US HIGHWAY 1 APT 401

City JUPITER	State FL	Zip Code 33477-5929
-----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
700.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		31		2016

Transaction ID : SA11A.464438

Amount of Each Receipt this Period
100.00

Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	450.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 525 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. BUTLER, LAWRENCE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 340 S US HIGHWAY 1 APT 401
 City JUPITER State FL Zip Code 33477-5929
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 700.00

Date of Receipt 11 / 04 / 2016
Transaction ID : SA11A.471300
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

B. BUTLER, PAUL, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 723 HILLBORN
 City SWARTHMORE State PA Zip Code 19081-1124
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) AECOM Occupation (for Individual) ENGINEER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 905.00

Date of Receipt 10 / 27 / 2016
Transaction ID : SA11A.453522
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

C. BUTLER, PAUL, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 723 HILLBORN
 City SWARTHMORE State PA Zip Code 19081-1124
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) AECOM Occupation (for Individual) ENGINEER
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 905.00

Date of Receipt 10 / 27 / 2016
Transaction ID : SA11A.453533
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	450.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 526 OF 4311
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. BUTLER, PAUL, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 723 HILLBORN
 City SWARTHMORE State PA Zip Code 19081-1124
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) AECOM Occupation (for Individual) ENGINEER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 905.00

Date of Receipt **11 / 08 / 2016**
Transaction ID : SA11A.479782
 Amount of Each Receipt this Period 100.00
 Memo Item
 CONTRIBUTION

B. BUTTNER, JEAN, B., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 58 LYONS PLAINS ROAD
 City WESTPORT State CT Zip Code 06880-1305
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) INFORMATION REQUESTED PER BEST EFFORTS Occupation (for Individual) INFORMATION REQUESTED PER BE
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt **10 / 25 / 2016**
Transaction ID : SA11A.447272
 Amount of Each Receipt this Period 500.00
 Memo Item
 CONTRIBUTION

C. BUTTS SR, KENNETH, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2397 4TH ST
 City SANGER State CA Zip Code 93657-2259
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt **10 / 26 / 2016**
Transaction ID : SA11A.450174
 Amount of Each Receipt this Period 250.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	850.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 527 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. BUZBEE, JACK, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 200 E DOUGLAS ST
 City DE SOTO State IL Zip Code 62924-1512
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 830.00

Date of Receipt 10 / 30 / 2016
Transaction ID : SA11A.459415
 Amount of Each Receipt this Period 30.00
 Memo Item CONTRIBUTION

B. BUZBEE, JACK, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 200 E DOUGLAS ST
 City DE SOTO State IL Zip Code 62924-1512
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 830.00

Date of Receipt 10 / 31 / 2016
Transaction ID : SA11A.463525
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

C. BUZBEE, JACK, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 200 E DOUGLAS ST
 City DE SOTO State IL Zip Code 62924-1512
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 830.00

Date of Receipt 10 / 31 / 2016
Transaction ID : SA11A.463544
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	130.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 528 OF 4311
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. BUZBEE, JACK, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 200 E DOUGLAS ST

City DE SOTO	State IL	Zip Code 62924-1512
-----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
830.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	04	/	2016

Transaction ID : SA11A.473769

Amount of Each Receipt this Period
50.00

Memo Item CONTRIBUTION

B. BUZBY, SCOTT, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 300 HARBOUR DR
103-B

City VERO BEACH	State FL	Zip Code 32963-2890
--------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1200.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	27	/	2016

Transaction ID : SA11A.453122

Amount of Each Receipt this Period
100.00

Memo Item CONTRIBUTION

C. BUZBY, SCOTT, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 300 HARBOUR DR
103-B

City VERO BEACH	State FL	Zip Code 32963-2890
--------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
1200.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	27	/	2016

Transaction ID : SA11A.453125

Amount of Each Receipt this Period
100.00

Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	250.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 529 OF 4311
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. BYNUM, MICHAEL, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 6306 W MACLAURIN DRIVE
 City TAMPA State FL Zip Code 33647-1162
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) TFS HOLDINGS, INC. Occupation (for Individual) PRESIDENT
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1500.00

Date of Receipt 10 / 26 / 2016
Transaction ID : SA11A.450592
 Amount of Each Receipt this Period 1500.00
 Memo Item CONTRIBUTION

B. BYRD, HERSHAL, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 645 WEST OAK DRIVE
 City FREDERICKSBURG State TX Zip Code 78624-7740
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) WALMART Occupation (for Individual) MAINTENANCE
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 225.00

Date of Receipt 10 / 23 / 2016
Transaction ID : SA11A.446440
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

C. BYRD, HERSHAL, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 645 WEST OAK DRIVE
 City FREDERICKSBURG State TX Zip Code 78624-7740
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) WALMART Occupation (for Individual) MAINTENANCE
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 225.00

Date of Receipt 10 / 23 / 2016
Transaction ID : SA11A.446443
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	1550.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 530 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. BYRD, HERSHAL, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 645 WEST OAK DRIVE
 City FREDERICKSBURG State TX Zip Code 78624-7740
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) WALMART Occupation (for Individual) MAINTENANCE
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 225.00

Date of Receipt 10 / 31 / 2016
Transaction ID : SA11A.459262
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

B. BYRD, HERSHAL, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 645 WEST OAK DRIVE
 City FREDERICKSBURG State TX Zip Code 78624-7740
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) WALMART Occupation (for Individual) MAINTENANCE
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 225.00

Date of Receipt 10 / 31 / 2016
Transaction ID : SA11A.459264
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

C. BYRD, HERSHAL, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 645 WEST OAK DRIVE
 City FREDERICKSBURG State TX Zip Code 78624-7740
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) WALMART Occupation (for Individual) MAINTENANCE
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 225.00

Date of Receipt 10 / 29 / 2016
Transaction ID : SA11A.460579
 Amount of Each Receipt this Period 5.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	55.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 531 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
BYRD, HERSHAL, , ,

Mailing Address 645 WEST OAK DRIVE

City FREDERICKSBURG	State TX	Zip Code 78624-7740
------------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) WALMART	Occupation (for Individual) MAINTENANCE
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
225.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 04 / 2016

Transaction ID : SA11A.470370

Amount of Each Receipt this Period
25.00

Memo Item
CONTRIBUTION

B. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
BYRD, HERSHAL, , ,

Mailing Address 645 WEST OAK DRIVE

City FREDERICKSBURG	State TX	Zip Code 78624-7740
------------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) WALMART	Occupation (for Individual) MAINTENANCE
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
225.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 06 / 2016

Transaction ID : SA11A.476862

Amount of Each Receipt this Period
25.00

Memo Item
CONTRIBUTION

C. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
BYRD, HERSHAL, , ,

Mailing Address 645 WEST OAK DRIVE

City FREDERICKSBURG	State TX	Zip Code 78624-7740
------------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) WALMART	Occupation (for Individual) MAINTENANCE
--	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
225.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 08 / 2016

Transaction ID : SA11A.479819

Amount of Each Receipt this Period
25.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	75.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 532 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. BYRNE, BLAISE, J., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 6245 N. 24TH PARKWAY
 201
 City PHOENIX State AZ Zip Code 85016-2030
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) WINREN, INC Occupation (for Individual) SALES
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 202.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 21 / 2016
Transaction ID : SA11A.444564
 Amount of Each Receipt this Period
 25.00
 Memo Item
 CONTRIBUTION

B. BYRNE, BLAISE, J., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 6245 N. 24TH PARKWAY
 201
 City PHOENIX State AZ Zip Code 85016-2030
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) WINREN, INC Occupation (for Individual) SALES
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 202.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 04 / 2016
Transaction ID : SA11A.472043
 Amount of Each Receipt this Period
 25.00
 Memo Item
 CONTRIBUTION

C. BYRNS, RICHARD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 116 VILLAGE GREEN
 City VICTORIA State TX Zip Code 77904-3859
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 04 / 2016
Transaction ID : SA11A.472792
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	150.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 533 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
Team Ryan

A. BYRUM, LYLE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 7007 BOEING DRIVE
 City EL PASO State TX Zip Code 79925-1109
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) ATI JET INC. Occupation (for Individual) CEO
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 11 / 04 / 2016
Transaction ID : SA11A.471943
 Amount of Each Receipt this Period 100.00
 Memo Item
CONTRIBUTION

B. C. SIMMONS, JUDITH, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5109 189TH AVE NE
 City SAMMAMISH State WA Zip Code 98074-6125
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 11 / 01 / 2016
Transaction ID : SA11A.467296
 Amount of Each Receipt this Period 250.00
 Memo Item
CONTRIBUTION

C. CABOT, MICHELE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1342 SNYDER ROAD
 City GREEN LANE State PA Zip Code 18054-9542
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 320.00

Date of Receipt 10 / 31 / 2016
Transaction ID : SA11A.458382
 Amount of Each Receipt this Period 25.00
 Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	375.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 534 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
Team Ryan

A. CABOT, MICHELE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1342 SNYDER ROAD
 City GREEN LANE State PA Zip Code 18054-9542
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 320.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 31 / 2016
Transaction ID : SA11A.458398
 Amount of Each Receipt this Period
 25.00
 Memo Item
 CONTRIBUTION

B. CABOT, MICHELE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1342 SNYDER ROAD
 City GREEN LANE State PA Zip Code 18054-9542
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 320.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 04 / 2016
Transaction ID : SA11A.471537
 Amount of Each Receipt this Period
 25.00
 Memo Item
 CONTRIBUTION

C. CABOT, RICK, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 928 W. LUTZ LAKE FERN ROAD
 City LUTZ State FL Zip Code 33548-5028
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) 1ST UMC LUTZ Occupation (for Individual) CLERGY
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 600.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 04 / 2016
Transaction ID : SA11A.473709
 Amount of Each Receipt this Period
 50.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	100.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 535 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. CACCHIO, DOLORES, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 152 PORTADA DRIVE
 City ST. AUGUSTINE State FL Zip Code 32095-1635
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 605.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 10 / 26 / 2016
Transaction ID : SA11A.449962
 Amount of Each Receipt this Period
 50.00
 Memo Item
 CONTRIBUTION

B. CACCHIO, DOLORES, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 152 PORTADA DRIVE
 City ST. AUGUSTINE State FL Zip Code 32095-1635
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 605.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 10 / 26 / 2016
Transaction ID : SA11A.449966
 Amount of Each Receipt this Period
 50.00
 Memo Item
 CONTRIBUTION

C. CACCHIO, DOLORES, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 152 PORTADA DRIVE
 City ST. AUGUSTINE State FL Zip Code 32095-1635
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 605.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 10 / 29 / 2016
Transaction ID : SA11A.460708
 Amount of Each Receipt this Period
 25.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 125.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 536 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
Team Ryan

A. CACCHIO, DOLORES, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 152 PORTADA DRIVE
 City ST. AUGUSTINE State FL Zip Code 32095-1635
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 605.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 07 / 2016
Transaction ID : SA11A.475491
 Amount of Each Receipt this Period
 50.00
 Memo Item
 CONTRIBUTION

B. CACCHIO, DOLORES, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 152 PORTADA DRIVE
 City ST. AUGUSTINE State FL Zip Code 32095-1635
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 605.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 07 / 2016
Transaction ID : SA11A.475708
 Amount of Each Receipt this Period
 25.00
 Memo Item
 CONTRIBUTION

C. CACCHIO, DOLORES, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 152 PORTADA DRIVE
 City ST. AUGUSTINE State FL Zip Code 32095-1635
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 605.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 07 / 2016
Transaction ID : SA11A.475710
 Amount of Each Receipt this Period
 25.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	100.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 537 OF 4311
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. CACCHIO, DOLORES, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 152 PORTADA DRIVE

City ST. AUGUSTINE	State FL	Zip Code 32095-1635
-----------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
605.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11		06		2016

Transaction ID : SA11A.478152

Amount of Each Receipt this Period
30.00

Memo Item CONTRIBUTION

B. CACCHIO, DOLORES, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 152 PORTADA DRIVE

City ST. AUGUSTINE	State FL	Zip Code 32095-1635
-----------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
605.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11		08		2016

Transaction ID : SA11A.479801

Amount of Each Receipt this Period
50.00

Memo Item CONTRIBUTION

C. CACIOPPO, JAMES, , MR.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 225 NE MIZNER BLVD STE 720

City BOCA RATON	State FL	Zip Code 33432-4078
--------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) ONE EAST	Occupation (for Individual) INVESTMENT MANAGER
---	---

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
25000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		31		2016

Transaction ID : SA11A.454997

Amount of Each Receipt this Period
25000.00

Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	25080.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 538 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
A. CADY, WILLIAM, CURTIS, ,

Mailing Address 1426 SOUTH 50TH STREET

City KANSAS CITY	State KS	Zip Code 66106-1726
---------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
310.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	04	/	2016

Transaction ID : SA11A.474014

Amount of Each Receipt this Period
25.00

Memo Item CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
B. CAELL, TERESA, ANN, MS.,

Mailing Address 6322 W MYSTIC MEADOWS

City HOUSTON	State TX	Zip Code 77021-2257
-----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
325.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	27	/	2016

Transaction ID : SA11A.452286

Amount of Each Receipt this Period
35.00

Memo Item CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
C. CAELL, TERESA, ANN, MS.,

Mailing Address 6322 W MYSTIC MEADOWS

City HOUSTON	State TX	Zip Code 77021-2257
-----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
325.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	02	/	2016

Transaction ID : SA11A.465149

Amount of Each Receipt this Period
35.00

Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	95.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 539 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. CAFRITZ, JAMES, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4710 BETHESDA AVE.
 508
 City BETHESDA State MD Zip Code 20814-5213
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 31 / 2016
Transaction ID : SA11A.457839
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION

B. CAGLE, NANCY, E., , M.D.
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 40 WATERFORD DRIVE
 City NACOGDOCHES State TX Zip Code 75965-8706
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 27 / 2016
Transaction ID : SA11A.453694
 Amount of Each Receipt this Period
 250.00
 Memo Item
 CONTRIBUTION

C. CAHILL-ERVIN, SHARON, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 335 MERIDIAN RUN DR
 City COCOA State FL Zip Code 32926-2571
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) REAL ESTATE APPRAISER
 Receipt For:
 Primary General
 Other (specify)
 Aggregate Year-to-Date ▼
 750.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 22 / 2016
Transaction ID : SA11A.446927
 Amount of Each Receipt this Period
 150.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	500.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 540 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. CAHILL-ERVIN, SHARON, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 335 MERIDIAN RUN DR
 City COCOA State FL Zip Code 32926-2571
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) REAL ESTATE APPRAISER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 750.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 04 / 2016
Transaction ID : SA11A.472977
 Amount of Each Receipt this Period
 150.00
 Memo Item
 CONTRIBUTION

B. CAIN, ERICKA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 17703 JOHN CONNOR ROAD
 City CORNELIUS State NC Zip Code 28031-7658
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) FINANCIAL INDEPENDENCE GROUP Occupation (for Individual) INSURANCE
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 04 / 2016
Transaction ID : SA11A.473225
 Amount of Each Receipt this Period
 250.00
 Memo Item
 CONTRIBUTION

C. CAIN, RICK, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 526 MILL STONE DRIVE
 City BEAVERCREEK State OH Zip Code 45434-5840
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) DDC ITS Occupation (for Individual) 3L MEDIA
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 04 / 2016
Transaction ID : SA11A.473753
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	500.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 541 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. CAISSIE, LEO, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 524 MAIN ST.
 City HUDSON State MA Zip Code 01749-2909
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 355.00

Date of Receipt 10 / 20 / 2016
Transaction ID : SA11A.442290
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

B. CAISSIE, LEO, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 524 MAIN ST.
 City HUDSON State MA Zip Code 01749-2909
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 355.00

Date of Receipt 10 / 27 / 2016
Transaction ID : SA11A.456919
 Amount of Each Receipt this Period 30.00
 Memo Item CONTRIBUTION

C. CALAHAN, SHANNON, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3304 BREAKERS COVE
 City BELTON State TX Zip Code 76513-2738
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) US DEPT OF VETERANS AFFAIRS Occupation (for Individual) EMERGENCY MANAGEMENT SPECIA
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 460.00

Date of Receipt 10 / 29 / 2016
Transaction ID : SA11A.460868
 Amount of Each Receipt this Period 10.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 65.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 542 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. CALAHAN, SHANNON, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3304 BREAKERS COVE
 City BELTON State TX Zip Code 76513-2738
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) US DEPT OF VETERANS AFFAIRS Occupation (for Individual) EMERGENCY MANAGEMENT SPECIA
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 460.00

Date of Receipt 10 / 29 / 2016
Transaction ID : SA11A.460869
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

B. CALAHAN, SHANNON, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3304 BREAKERS COVE
 City BELTON State TX Zip Code 76513-2738
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) US DEPT OF VETERANS AFFAIRS Occupation (for Individual) EMERGENCY MANAGEMENT SPECIA
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 460.00

Date of Receipt 10 / 29 / 2016
Transaction ID : SA11A.460870
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

C. CALAHAN, SHANNON, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3304 BREAKERS COVE
 City BELTON State TX Zip Code 76513-2738
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) US DEPT OF VETERANS AFFAIRS Occupation (for Individual) EMERGENCY MANAGEMENT SPECIA
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 460.00

Date of Receipt 10 / 29 / 2016
Transaction ID : SA11A.460879
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 100.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 543 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
Team Ryan

A. CALAHAN, SHANNON, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3304 BREAKERS COVE
 City BELTON State TX Zip Code 76513-2738
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) US DEPT OF VETERANS AFFAIRS Occupation (for Individual) EMERGENCY MANAGEMENT SPECIA
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 460.00

Date of Receipt 11 / 07 / 2016
Transaction ID : SA11A.476228
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

B. CALDEIRA, STEPHEN, J., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 9021 BRICKYARD RD
 City POTOMAC State MD Zip Code 20854-1624
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) CONSULTANT
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 7500.00

Date of Receipt 11 / 03 / 2016
Transaction ID : SA11A.465242
 Amount of Each Receipt this Period 2500.00
 Memo Item CONTRIBUTION

C. CALDROPOLI, LOUIS, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 8277 SEVEN MILE DR
 City PONTE VEDRA BEACH State FL Zip Code 32082-3132
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SWISHER INTERNATIONAL Occupation (for Individual) EXECUTIVE
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 2000.00

Date of Receipt 10 / 24 / 2016
Transaction ID : SA11A.443461
 Amount of Each Receipt this Period 2000.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	4600.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 544 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
Team Ryan

A. CALDWELL, CLIFTON, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address #10 GRIFFIN CIRCLE
 City ALBANY State TX Zip Code 76430-3605
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 01 / 2016
Transaction ID : SA11A.462662
 Amount of Each Receipt this Period
 250.00
 Memo Item
 CONTRIBUTION

B. CALDWELL, KMARGARET, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2975 TERRACE DR. #217
 City LAS CRUCES State NM Zip Code 88011-5012
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 650.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 30 / 2016
Transaction ID : SA11A.459679
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION

C. CALDWELL, KMARGARET, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2975 TERRACE DR. #217
 City LAS CRUCES State NM Zip Code 88011-5012
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 650.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 29 / 2016
Transaction ID : SA11A.461184
 Amount of Each Receipt this Period
 50.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	400.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 545 OF 4311
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. CALDWELL, KMARGARET, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2975 TERRACE DR. #217
 City LAS CRUCES State NM Zip Code 88011-5012
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 650.00

Date of Receipt 10 / 29 / 2016
Transaction ID : SA11A.461185
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

B. CALDWELL, KMARGARET, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2975 TERRACE DR. #217
 City LAS CRUCES State NM Zip Code 88011-5012
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 650.00

Date of Receipt 10 / 29 / 2016
Transaction ID : SA11A.461193
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

C. CALDWELL, KMARGARET, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2975 TERRACE DR. #217
 City LAS CRUCES State NM Zip Code 88011-5012
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 650.00

Date of Receipt 10 / 29 / 2016
Transaction ID : SA11A.461194
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	250.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 546 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. CALDWELL, MARGARET, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2975 TERRACE DR.
 217
 City LAS CRUCES State NM Zip Code 88011-5093
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 600.00

Date of Receipt **10 / 23 / 2016**
Transaction ID : SA11A.446543
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

B. CALDWELL, MARGARET, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2975 TERRACE DR.
 217
 City LAS CRUCES State NM Zip Code 88011-5093
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 600.00

Date of Receipt **11 / 04 / 2016**
Transaction ID : SA11A.472801
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

C. CALDWELL, SHIRLEY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address NO. 10 GRIFFIN CIRCLE
 City ALBANY State TX Zip Code 76430-
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt **10 / 27 / 2016**
Transaction ID : SA11A.454171
 Amount of Each Receipt this Period 1000.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	1200.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 547 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
Team Ryan

A. CALDWELL, SLOAN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 118 MYRICK RD NW
 City MILLEDGEVILLE State GA Zip Code 31061-8276
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 31 / 2016
Transaction ID : SA11A.459135
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION

B. CALDWELL, SLOAN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 118 MYRICK RD NW
 City MILLEDGEVILLE State GA Zip Code 31061-8276
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 04 / 2016
Transaction ID : SA11A.471422
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION

C. CALES, NANCY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 7816 WHISPERING PINES
 City GLEN SAINT MARY State FL Zip Code 32040-4728
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF-EMPLOYED Occupation (for Individual) SEMI-DRIVER
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 210.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 07 / 2016
Transaction ID : SA11A.475946
 Amount of Each Receipt this Period
 30.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	230.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 548 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. CALES, NANCY, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 7816 WHISPERING PINES

City GLEN SAINT MARY	State FL	Zip Code 32040-4728
-------------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) SELF-EMPLOYED	Occupation (for Individual) SEMI-DRIVER
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
210.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	07	/	2016

Transaction ID : SA11A.475948

Amount of Each Receipt this Period
30.00

Memo Item
CONTRIBUTION

B. CALES, NANCY, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 7816 WHISPERING PINES

City GLEN SAINT MARY	State FL	Zip Code 32040-4728
-------------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) SELF-EMPLOYED	Occupation (for Individual) SEMI-DRIVER
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
210.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	06	/	2016

Transaction ID : SA11A.477905

Amount of Each Receipt this Period
50.00

Memo Item
CONTRIBUTION

C. CALETTI, RICHARD, C., MR.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1220 MCDONALD AVENUE

City SANTA ROSA	State CA	Zip Code 95404-3529
--------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) SELF EMPLOYED	Occupation (for Individual) CONSULTANT
--	---

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
400.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	03	/	2016

Transaction ID : SA11A.465585

Amount of Each Receipt this Period
200.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	280.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 549 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
Team Ryan

A. CALHOUN, SUSAN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 472 GABRIEL DR
 City KIRKWOOD State MO Zip Code 63122-3615
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 2850.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 20 / 2016
Transaction ID : SA11A.442632
 Amount of Each Receipt this Period
 250.00
 Memo Item
 CONTRIBUTION

B. CALHOUN, SUSAN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 472 GABRIEL DR
 City KIRKWOOD State MO Zip Code 63122-3615
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 2850.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 20 / 2016
Transaction ID : SA11A.442633
 Amount of Each Receipt this Period
 250.00
 Memo Item
 CONTRIBUTION

C. CALHOUN, SUSAN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 472 GABRIEL DR
 City KIRKWOOD State MO Zip Code 63122-3615
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 2850.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 20 / 2016
Transaction ID : SA11A.442647
 Amount of Each Receipt this Period
 250.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	750.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 550 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
Team Ryan

A. CALHOUN, SUSAN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 472 GABRIEL DR
 City KIRKWOOD State MO Zip Code 63122-3615
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 2850.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 20 / 2016
Transaction ID : SA11A.442650
 Amount of Each Receipt this Period
 250.00
 Memo Item
CONTRIBUTION

B. CALHOUN, SUSAN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 472 GABRIEL DR
 City KIRKWOOD State MO Zip Code 63122-3615
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 2850.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 01 / 2016
Transaction ID : SA11A.463161
 Amount of Each Receipt this Period
 250.00
 Memo Item
CONTRIBUTION

C. CALHOUN, SUSAN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 472 GABRIEL DR
 City KIRKWOOD State MO Zip Code 63122-3615
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 2850.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 01 / 2016
Transaction ID : SA11A.463168
 Amount of Each Receipt this Period
 250.00
 Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	750.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 551 OF 4311
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. CALKINS, DAVID, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 620 FOUR HILLS RD SE

City ALBUQUERQUE	State NM	Zip Code 87123-4106
---------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) SUNRISE MEDICAL	Occupation (for Individual) PHYSICIAN
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1200.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	25	/	2016

Transaction ID : SA11A.448694

Amount of Each Receipt this Period
100.00

Memo Item
CONTRIBUTION

B. CALKINS, DAVID, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 620 FOUR HILLS RD SE

City ALBUQUERQUE	State NM	Zip Code 87123-4106
---------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) SUNRISE MEDICAL	Occupation (for Individual) PHYSICIAN
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1200.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	02	/	2016

Transaction ID : SA11A.466415

Amount of Each Receipt this Period
250.00

Memo Item
CONTRIBUTION

C. CALKINS, DAVID, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 620 FOUR HILLS RD SE

City ALBUQUERQUE	State NM	Zip Code 87123-4106
---------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) SUNRISE MEDICAL	Occupation (for Individual) PHYSICIAN
--	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
1200.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	02	/	2016

Transaction ID : SA11A.466419

Amount of Each Receipt this Period
250.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	600.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 552 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
Team Ryan

A. CALKINS, DAVID, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 620 FOUR HILLS RD SE
 City ALBUQUERQUE State NM Zip Code 87123-4106
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SUNRISE MEDICAL Occupation (for Individual) PHYSICIAN
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1200.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 04 / 2016
Transaction ID : SA11A.474234
 Amount of Each Receipt this Period
 200.00
 Memo Item
 CONTRIBUTION

B. CALLAHAN, GLORIA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 229 SHAKERAG ROAD
 City AIKEN State SC Zip Code 29803-6262
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 31 / 2016
Transaction ID : SA11A.458686
 Amount of Each Receipt this Period
 50.00
 Memo Item
 CONTRIBUTION

C. CALLAHAN, GLORIA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 229 SHAKERAG ROAD
 City AIKEN State SC Zip Code 29803-6262
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 31 / 2016
Transaction ID : SA11A.458724
 Amount of Each Receipt this Period
 50.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	300.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 553 OF 4311
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. CALLAHAN, GLORIA, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 229 SHAKERAG ROAD

City AIKEN	State SC	Zip Code 29803-6262
---------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
400.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	02	/	2016

Transaction ID : SA11A.470104

Amount of Each Receipt this Period
50.00

Memo Item
CONTRIBUTION

B. CALLAHAN, JOHN, E., MR.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 295 GRANDE WAY
301

City NAPLES	State FL	Zip Code 34110-6478
----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
900.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	04	/	2016

Transaction ID : SA11A.471660

Amount of Each Receipt this Period
100.00

Memo Item
CONTRIBUTION

C. CALLAHAN, LEONORA, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 625 ISLAND DR

City PALM BEACH	State FL	Zip Code 33480-4744
--------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
245.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	30	/	2016

Transaction ID : SA11A.464859

Amount of Each Receipt this Period
25.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	175.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 554 OF 4311
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. CALLEN, MICHAEL, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 3 690 OAK WOOD DRIVE

City PARK CITY	State UT	Zip Code 84060-
-------------------	-------------	--------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
300.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	27	/	2016

Transaction ID : SA11A.453942

Amount of Each Receipt this Period
100.00

Memo Item CONTRIBUTION

B. CALLEN, MICHAEL, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 3 690 OAK WOOD DRIVE

City PARK CITY	State UT	Zip Code 84060-
-------------------	-------------	--------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
300.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	04	/	2016

Transaction ID : SA11A.471056

Amount of Each Receipt this Period
100.00

Memo Item CONTRIBUTION

C. CALLEN, PAUL, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 7833 LA MIRADA CIR

City BUENA PARK	State CA	Zip Code 90620-2308
--------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
350.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	27	/	2016

Transaction ID : SA11A.456847

Amount of Each Receipt this Period
50.00

Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	250.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 555 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. CALVERT, MIKE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2333 S. LOOP W.
 City HOUSTON State TX Zip Code 77054-2811
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) MIKE CALVERT TOYOTA Occupation (for Individual) AUTO DEALER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1100.00

Date of Receipt **10 / 29 / 2016**
Transaction ID : SA11A.461155
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

B. CALVERT, MIKE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2333 S. LOOP W.
 City HOUSTON State TX Zip Code 77054-2811
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) MIKE CALVERT TOYOTA Occupation (for Individual) AUTO DEALER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1100.00

Date of Receipt **11 / 04 / 2016**
Transaction ID : SA11A.472081
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

C. CALVIN, EVELYN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 11350 WOODSTOCK RD 1141
 City ROSWELL State GA Zip Code 30075-7531
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt **11 / 01 / 2016**
Transaction ID : SA11A.467353
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	225.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 556 OF 4311
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. CALVIN, EVELYN, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 11350 WOODSTOCK RD
1141

City ROSWELL State GA Zip Code 30075-7531

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt
11 / 06 / 2016
Transaction ID : SA11A.477870

Amount of Each Receipt this Period
25.00

Memo Item
CONTRIBUTION

B. CALVIN, EVELYN, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 11350 WOODSTOCK RD
1141

City ROSWELL State GA Zip Code 30075-7531

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt
11 / 06 / 2016
Transaction ID : SA11A.477933

Amount of Each Receipt this Period
25.00

Memo Item
CONTRIBUTION

C. CAMERON, WINSTON, , DR., JR. MD
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 536 COURTFIELD AVENUE

City WINCHESTER State VA Zip Code 22601-3208

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) WINCHESTER ORTHOPAEDIC ASSOCIATES Occupation (for Individual) PHYSICIAN

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
450.00

Date of Receipt
10 / 26 / 2016
Transaction ID : SA11A.447759

Amount of Each Receipt this Period
250.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 300.00

TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 557 OF 4311
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. CAMP, MONALEE, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 7732 CHERRYHILL DRIVE

City TYLER	State TX	Zip Code 75703-7374
---------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
575.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	01	/	2016

Transaction ID : SA11A.462839

Amount of Each Receipt this Period
100.00

Memo Item CONTRIBUTION

B. CAMPBELL, J, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 900 N MALDEN AVENUE

City FULLERTON	State CA	Zip Code 92832-1237
-------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
350.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	31	/	2016

Transaction ID : SA11A.458416

Amount of Each Receipt this Period
50.00

Memo Item CONTRIBUTION

C. CAMPBELL, J, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 900 N MALDEN AVENUE

City FULLERTON	State CA	Zip Code 92832-1237
-------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
350.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	31	/	2016

Transaction ID : SA11A.458434

Amount of Each Receipt this Period
50.00

Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	200.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 558 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. CAMPBELL, J, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 900 N MALDEN AVENUE
 City FULLERTON State CA Zip Code 92832-1237
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 350.00

Date of Receipt 10 / 31 / 2016
Transaction ID : SA11A.458438
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

B. CAMPBELL, J. MELFORT, M., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1100 PEMBRIDGE DRIVE APT 303
 City LAKE FOREST State IL Zip Code 60045-4216
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 700.00

Date of Receipt 10 / 21 / 2016
Transaction ID : SA11A.443564
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

C. CAMPBELL, JOHN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 10311 PLATTWOOD AVE
 City OZONE PARK State NY Zip Code 11417-2662
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 10 / 27 / 2016
Transaction ID : SA11A.456605
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 250.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 559 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
-----------------------------	-----------------------------	-----------------------------

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NAME OF COMMITTEE (In Full)
Team Ryan

A. CAMPBELL, JOHN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 10311 PLATTWOOD AVE
 City OZONE PARK State NY Zip Code 11417-2662
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt **10 / 27 / 2016**
Transaction ID : SA11A.456606
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

B. CAMPBELL, VIRGINIA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 14452 WEST WELDON AVENUE
 City GOODYEAR State AZ Zip Code 85395-8282
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 230.00

Date of Receipt **10 / 31 / 2016**
Transaction ID : SA11A.464392
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

C. CAMPBELL, WAYNE, E., DR., M.D.
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1751 23RD ST
 City NICEVILLE State FL Zip Code 32578-2909
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) WAYNE E CAMPBELL Occupation (for Individual) PHYSICIAN
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 450.00

Date of Receipt **11 / 04 / 2016**
Transaction ID : SA11A.471517
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	225.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 560 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
-----------------------------	-----------------------------	-----------------------------

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NAME OF COMMITTEE (In Full)
Team Ryan

A. CANBY, THOMAS, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 311 BLUEBIRD XING
 City GLEN MILLS State PA Zip Code 19342-3361
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 07 / 2016
Transaction ID : SA11A.467903
 Amount of Each Receipt this Period
 300.00
 Memo Item
 CONTRIBUTION

B. CANCEENNE, LOUIS, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 18011 CASCADES AVE.
 City BATON ROUGE State LA Zip Code 70810-5960
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 225.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 29 / 2016
Transaction ID : SA11A.460674
 Amount of Each Receipt this Period
 25.00
 Memo Item
 CONTRIBUTION

C. CANCEENNE, LOUIS, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 18011 CASCADES AVE.
 City BATON ROUGE State LA Zip Code 70810-5960
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 225.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 04 / 2016
Transaction ID : SA11A.470745
 Amount of Each Receipt this Period
 25.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	350.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 561 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. CANFIELD, BOB, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 7260 W AZURE DR 140 - 18
 City LAS VEGAS State NV Zip Code 89130-7999
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 650.00

Date of Receipt 10 / 22 / 2016
Transaction ID : SA11A.449651
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

B. CANNON, JOHN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1908 FOULKEWAYS
 City GWYNEDD State PA Zip Code 19436-1008
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 10 / 25 / 2016
Transaction ID : SA11A.447301
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

C. CANON, SYLVIA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2615 SOUTH STRATHFORD LANE
 City KINGWOOD State TX Zip Code 77345-1688
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 11 / 02 / 2016
Transaction ID : SA11A.466289
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	250.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 562 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. CANON, SYLVIA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2615 SOUTH STRATHFORD LANE
 City KINGWOOD State TX Zip Code 77345-1688
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt
 11 / 02 / 2016
Transaction ID : SA11A.466290
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

B. CANTEY JR, EMORY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1405 EMS RD EAST
 City FORT WORTH State TX Zip Code 76116-2023
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 210.00

Date of Receipt
 10 / 21 / 2016
Transaction ID : SA11A.444219
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

C. CANTEY JR, EMORY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1405 EMS RD EAST
 City FORT WORTH State TX Zip Code 76116-2023
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 210.00

Date of Receipt
 10 / 25 / 2016
Transaction ID : SA11A.451974
 Amount of Each Receipt this Period 30.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	105.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 563 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. CANTEY JR, EMORY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1405 EMS RD EAST
 City FORT WORTH State TX Zip Code 76116-2023
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 210.00

Date of Receipt **10 / 25 / 2016**
Transaction ID : SA11A.451976
 Amount of Each Receipt this Period 30.00
 Memo Item CONTRIBUTION

B. CANTEY JR, EMORY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1405 EMS RD EAST
 City FORT WORTH State TX Zip Code 76116-2023
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 210.00

Date of Receipt **11 / 05 / 2016**
Transaction ID : SA11A.478723
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

C. CANTOR, ROBERT, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 39 JEWETT DRIVE
 City CINCINNATI State OH Zip Code 45215-2647
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt **10 / 31 / 2016**
Transaction ID : SA11A.459192
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	105.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 564 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. CANTOR, ROBERT, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 39 JEWETT DRIVE
 City CINCINNATI State OH Zip Code 45215-2647
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt 11 / 04 / 2016
Transaction ID : SA11A.473977
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

B. CANTY, EARLE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 6212 S RANCH PARK LANE
 City SPOKANE State WA Zip Code 99206-9330
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) INTUITIVE SURGICAL Occupation (for Individual) SR DIRECTOR
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 750.00

Date of Receipt 11 / 05 / 2016
Transaction ID : SA11A.478406
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

C. CAPPS, PHYLLIS, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 400 W COTTER AVENUE
 City PORT ARANSAS State TX Zip Code 78373-4018
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) INFORMATION REQUESTED PER BEST EFFORTS Occupation (for Individual) INFORMATION REQUESTED PER BEST EFFORTS
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 11 / 21 / 2016
Transaction ID : SA11A.481019
 Amount of Each Receipt this Period 500.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	650.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 565 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. CAPRARO, MICHAEL, A., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 13998 KINGSWOOD
 City RIVERVIEW State MI Zip Code 48193-7856
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 375.00

Date of Receipt 10 / 24 / 2016
Transaction ID : SA11A.446002
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

B. CAPRARO, MICHAEL, A., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 13998 KINGSWOOD
 City RIVERVIEW State MI Zip Code 48193-7856
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 375.00

Date of Receipt 10 / 27 / 2016
Transaction ID : SA11A.453337
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

C. CAPRARO, MICHAEL, A., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 13998 KINGSWOOD
 City RIVERVIEW State MI Zip Code 48193-7856
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 375.00

Date of Receipt 11 / 06 / 2016
Transaction ID : SA11A.477516
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 75.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 566 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. CAPRON, JOHN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1980 PACES FERRY RD SE
 City SMYRNA State GA Zip Code 30080-3124
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 10 / 25 / 2016
Transaction ID : SA11A.448785
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

B. CARADEC, RO, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3608 ELMEN
 City SEABROOK State TX Zip Code 77586-2602
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 207.00

Date of Receipt 10 / 28 / 2016
Transaction ID : SA11A.455696
 Amount of Each Receipt this Period 30.00
 Memo Item CONTRIBUTION

C. CARADEC, RO, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3608 ELMEN
 City SEABROOK State TX Zip Code 77586-2602
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 207.00

Date of Receipt 10 / 28 / 2016
Transaction ID : SA11A.455718
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	130.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 567 OF 4311
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. CARAS, CAROLE, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1090 OLD MOUNTAIN ROAD

City KENNESAW	State GA	Zip Code 30152-4832
------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
450.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		31		2016

Transaction ID : SA11A.464155

Amount of Each Receipt this Period
25.00

Memo Item
CONTRIBUTION

B. CARAS, CAROLE, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1090 OLD MOUNTAIN ROAD

City KENNESAW	State GA	Zip Code 30152-4832
------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
450.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		31		2016

Transaction ID : SA11A.464185

Amount of Each Receipt this Period
25.00

Memo Item
CONTRIBUTION

C. CARAS, CAROLE, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1090 OLD MOUNTAIN ROAD

City KENNESAW	State GA	Zip Code 30152-4832
------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
450.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11		06		2016

Transaction ID : SA11A.476904

Amount of Each Receipt this Period
25.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	75.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 568 OF 4311
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. CARAS, CAROLE, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1090 OLD MOUNTAIN ROAD

City KENNESAW	State GA	Zip Code 30152-4832
------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
450.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	06	/	2016

Transaction ID : SA11A.477939

Amount of Each Receipt this Period
25.00

Memo Item CONTRIBUTION

B. CARBECK, MARY ALICE, ALICE, ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 37981 S BOULDER RIDGE DRIVE

City TUCSON	State AZ	Zip Code 85739-2044
----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) HOMEMAKER	Occupation (for Individual) HOMEMAKER
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	01	/	2016

Transaction ID : SA11A.461671

Amount of Each Receipt this Period
1000.00

Memo Item CONTRIBUTION

C. CARD, ORSON, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 401 WILLOUGHBY BLVD

City GREENSBORO	State NC	Zip Code 27408-3135
--------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) HATRACK RIVER ENTERPRISES	Occupation (for Individual) WRITER
--	---------------------------------------

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
2500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	27	/	2016

Transaction ID : SA11A.452683

Amount of Each Receipt this Period
1000.00

Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	2025.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 569 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
Team Ryan

A. CARDEN, LOIS, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 314 SKYVIEW DR.
 City STEELVILLE State MO Zip Code 65565-8820
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 230.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 26 / 2016
Transaction ID : SA11A.454400
 Amount of Each Receipt this Period
 30.00
 Memo Item
 CONTRIBUTION

B. CARDEN, LOIS, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 314 SKYVIEW DR.
 City STEELVILLE State MO Zip Code 65565-8820
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 230.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 26 / 2016
Transaction ID : SA11A.454406
 Amount of Each Receipt this Period
 25.00
 Memo Item
 CONTRIBUTION

C. CARDEN, LOIS, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 314 SKYVIEW DR.
 City STEELVILLE State MO Zip Code 65565-8820
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 230.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 07 / 2016
Transaction ID : SA11A.474718
 Amount of Each Receipt this Period
 50.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	105.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 570 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
A. CARDINALE, LAWRENCE, , ,

Mailing Address 13 GREENBANK DRIVE

City CHESTERFIELD	State MO	Zip Code 63005-7116
----------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1100.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		31		2016

Transaction ID : SA11A.463486

Amount of Each Receipt this Period
1000.00

Memo Item
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
B. CAREY, STEVE, E., MR,

Mailing Address 1411 RUSSELL RD

City ALEXANDRIA	State VA	Zip Code 22301-2050
--------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) POTOMAC STRATEGIC DEV CO	Occupation (for Individual) BUSINESS DEVELOPER
---	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
10000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11		24		2016

Transaction ID : SA11A.481118

Amount of Each Receipt this Period
2500.00

Memo Item
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
C. CAREY, SUSAN, M., DR.,

Mailing Address 2500-81ST AVE SE #101

City MERCER ISLAND	State WA	Zip Code 98040-2246
-----------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) MEIER CLINICS	Occupation (for Individual) NEUROPSYCHOLOGIST
--	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
230.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		31		2016

Transaction ID : SA11A.457770

Amount of Each Receipt this Period
10.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	3510.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 571 OF 4311		
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14	<input type="checkbox"/> 11c <input type="checkbox"/> 15	<input type="checkbox"/> 12 <input type="checkbox"/> 16

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NAME OF COMMITTEE (In Full)
Team Ryan

A. CAREY, SUSAN, M., DR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2500-81ST AVE SE #101
 City MERCER ISLAND State WA Zip Code 98040-2246
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) MEIER CLINICS Occupation (for Individual) NEUROPSYCHOLOGIST
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 230.00

Date of Receipt 11 / 07 / 2016
Transaction ID : SA11A.474924
 Amount of Each Receipt this Period 20.00
 Memo Item CONTRIBUTION

B. CARGILL, DAVID, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2628 BRENTSHIRE DRIVE
 City TALLAHASSEE State FL Zip Code 32303-1916
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 11 / 04 / 2016
Transaction ID : SA11A.473797
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

C. CARIDI, MICHAEL, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 32 CUTLER ROAD
 City GREENWICH State CT Zip Code 06831-2509
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) BEDFORD CAPITAL Occupation (for Individual) MANAGING DIRECTOR
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 205.00

Date of Receipt 10 / 21 / 2016
Transaction ID : SA11A.444597
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶ 295.00
TOTAL This Period (last page this line number only).....▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 572 OF 4311
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. CARIDI, MICHAEL, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 32 CUTLER ROAD

City GREENWICH	State CT	Zip Code 06831-2509
-------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) BEDFORD CAPITAL	Occupation (for Individual) MANAGING DIRECTOR
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
205.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	31	/	2016

Transaction ID : SA11A.463621

Amount of Each Receipt this Period
30.00

Memo Item CONTRIBUTION

B. CARIDI, MICHAEL, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 32 CUTLER ROAD

City GREENWICH	State CT	Zip Code 06831-2509
-------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) BEDFORD CAPITAL	Occupation (for Individual) MANAGING DIRECTOR
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
205.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	04	/	2016

Transaction ID : SA11A.472383

Amount of Each Receipt this Period
25.00

Memo Item CONTRIBUTION

C. CARLEY, C. DAVID, , MR., JR.
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 4 BELLEVIEW BOULEVARD, APT 608
APT 608

City CLEARWATER	State FL	Zip Code 33756-1960
--------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	07	/	2016

Transaction ID : SA11A.467873

Amount of Each Receipt this Period
150.00

Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	205.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 573 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. CARLISLE, DENNIS, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 9235 CHENAULT ROAD
 City LOUISVILLE State KY Zip Code 40272-3461
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 450.00

Date of Receipt **10 / 24 / 2016**
Transaction ID : SA11A.443924
 Amount of Each Receipt this Period 150.00
 Memo Item CONTRIBUTION

B. CARLISLE, DENNIS, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 9235 CHENAULT ROAD
 City LOUISVILLE State KY Zip Code 40272-3461
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 450.00

Date of Receipt **11 / 08 / 2016**
Transaction ID : SA11A.467952
 Amount of Each Receipt this Period 150.00
 Memo Item CONTRIBUTION

C. CARLL, JAMES, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 316 CHEWS LANDING ROAD
 City HADDONFIELD State NJ Zip Code 08033-3840
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) ARCHER & GREIER Occupation (for Individual) ATTORNEY
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt **10 / 28 / 2016**
Transaction ID : SA11A.454682
 Amount of Each Receipt this Period 500.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	800.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 574 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
Team Ryan

A. CARLSON, GARY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 100 LUISI DRIVE
 City DUBOIS State PA Zip Code 15801-6112
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) CARLSON RESOURCES INC. Occupation (for Individual) EXECUTIVE
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 10 / 27 / 2016
Transaction ID : SA11A.453534
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

B. CARLSGAARD, GEORGE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5111 HARVEST ESTATES
 City SAN JOSE State CA Zip Code 95135-1204
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) A&M INTL Occupation (for Individual) MARINE CONSULTANT
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 334.00

Date of Receipt 10 / 27 / 2016
Transaction ID : SA11A.454225
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

C. CARLSON, HELEN, J., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 381 SENIOR COURT APT. 107
 City KENAI State AK Zip Code 99611-6884
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt 10 / 24 / 2016
Transaction ID : SA11A.443819
 Amount of Each Receipt this Period 400.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 700.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 575 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. CARLSON, HELEN, J., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 381 SENIOR COURT
 APT. 107
 City KENAI State AK Zip Code 99611-6884
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 07 / 2016
Transaction ID : SA11A.467704
 Amount of Each Receipt this Period
 400.00
 Memo Item
 CONTRIBUTION

B. CARLSON, STEPHEN, C., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1323 S FEDERAL ST.
 City CHICAGO State IL Zip Code 60605-2716
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 205.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 25 / 2016
Transaction ID : SA11A.448423
 Amount of Each Receipt this Period
 30.00
 Memo Item
 CONTRIBUTION

C. CARLSON, WILLIAM, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 13395 TIERRA HEIGHTS ROAD
 City REDDING State CA Zip Code 96003-7489
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) INFORMATION REQUESTED PER BEST EFFORTS Occupation (for Individual) INFORMATION REQUESTED PER BEST EFFORTS
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 02 / 2016
Transaction ID : SA11A.465126
 Amount of Each Receipt this Period
 300.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	730.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 576 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. CARNER, JACK, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 16250 N LAGO DEL ORO PKWY
 City TUCSON State AZ Zip Code 85739-9568
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 263.00

Date of Receipt 10 / 23 / 2016
Transaction ID : SA11A.446358
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

B. CARNER, JACK, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 16250 N LAGO DEL ORO PKWY
 City TUCSON State AZ Zip Code 85739-9568
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 263.00

Date of Receipt 10 / 23 / 2016
Transaction ID : SA11A.446527
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

C. CARNER, JACK, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 16250 N LAGO DEL ORO PKWY
 City TUCSON State AZ Zip Code 85739-9568
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 263.00

Date of Receipt 11 / 04 / 2016
Transaction ID : SA11A.471976
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶ 100.00
TOTAL This Period (last page this line number only).....▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 577 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
Team Ryan

A. CARNEY, MARINA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 162 W. WESTMINSTER
 City LAKE FOREST State IL Zip Code 60045-2125
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1564.00

Date of Receipt 10 / 27 / 2016
Transaction ID : SA11A.453371
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

B. CARNEY, MARINA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 162 W. WESTMINSTER
 City LAKE FOREST State IL Zip Code 60045-2125
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1564.00

Date of Receipt 10 / 27 / 2016
Transaction ID : SA11A.453372
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

C. CARNEY, MARINA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 162 W. WESTMINSTER
 City LAKE FOREST State IL Zip Code 60045-2125
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1564.00

Date of Receipt 11 / 02 / 2016
Transaction ID : SA11A.465873
 Amount of Each Receipt this Period 375.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	875.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 578 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. CARNEY, MARINA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 162 W. WESTMINSTER
 City LAKE FOREST State IL Zip Code 60045-2125
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1564.00

Date of Receipt 11 / 07 / 2016
Transaction ID : SA11A.474936
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

B. CARNEY, MARINA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 162 W. WESTMINSTER
 City LAKE FOREST State IL Zip Code 60045-2125
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1564.00

Date of Receipt 11 / 07 / 2016
Transaction ID : SA11A.474939
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

C. CARNEY, MARINA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 162 W. WESTMINSTER
 City LAKE FOREST State IL Zip Code 60045-2125
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1564.00

Date of Receipt 11 / 06 / 2016
Transaction ID : SA11A.478004
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	300.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 579 OF 4311
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. CARNEY, MARINA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 162 W. WESTMINSTER
 City LAKE FOREST State IL Zip Code 60045-2125
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1564.00

Date of Receipt **11 / 06 / 2016**
Transaction ID : SA11A.478007
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

B. CARNEY, PETER, R., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 10 S RIVERSIDE PLAZA SUITE 1470 SUITE 1470
 City CHICAGO State IL Zip Code 60606-3838
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) CARNEY MANAGEMENT LLC Occupation (for Individual) OWNER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt **10 / 27 / 2016**
Transaction ID : SA11A.452440
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

C. CARNI, LOUIE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 323 RAYLOW AVE
 City MANTECA State CA Zip Code 95336-4007
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) LVF ENTERPRISES Occupation (for Individual) OWNER
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt **11 / 07 / 2016**
Transaction ID : SA11A.480445
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 450.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 580 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. CARPENTER, CAROL, , MISS,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 656 W EVERGREEN CT
 City MILWAUKEE State WI Zip Code 53217-1608
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1350.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 25 / 2016
Transaction ID : SA11A.448159
 Amount of Each Receipt this Period
 250.00
 Memo Item
 CONTRIBUTION

B. CARPENTER, CAROL, , MISS,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 656 W EVERGREEN CT
 City MILWAUKEE State WI Zip Code 53217-1608
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1350.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 25 / 2016
Transaction ID : SA11A.448160
 Amount of Each Receipt this Period
 250.00
 Memo Item
 CONTRIBUTION

C. CARPENTER, CAROL, , MISS,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 656 W EVERGREEN CT
 City MILWAUKEE State WI Zip Code 53217-1608
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1350.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 27 / 2016
Transaction ID : SA11A.453739
 Amount of Each Receipt this Period
 250.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	750.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 581 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. CARPENTER, CAROL, , MISS,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 656 W EVERGREEN CT
 City MILWAUKEE State WI Zip Code 53217-1608
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1350.00

Date of Receipt 10 / 31 / 2016
Transaction ID : SA11A.458395
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

B. CARPENTER, CAROL, , MISS,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 656 W EVERGREEN CT
 City MILWAUKEE State WI Zip Code 53217-1608
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1350.00

Date of Receipt 10 / 31 / 2016
Transaction ID : SA11A.458405
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

C. CARPENTER, MAURICE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 6625
 City GLOUCESTER State VA Zip Code 23061-
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 550.00

Date of Receipt 11 / 05 / 2016
Transaction ID : SA11A.478384
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	600.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 582 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. CARPENTIERI, RUSSELL, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 86 SHEATHER ROAD
 City BEDFORD CORNERS State NY Zip Code 10549-4623
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) INSURANCE
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 10 / 25 / 2016
Transaction ID : SA11A.447280
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

B. CARPINO, ANTHONY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 16420 GINGERWOOD COURT
 City GAINESVILLE State VA Zip Code 20155-1944
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 600.00

Date of Receipt 10 / 26 / 2016
Transaction ID : SA11A.450892
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

C. CARPINO, ANTHONY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 16420 GINGERWOOD COURT
 City GAINESVILLE State VA Zip Code 20155-1944
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 600.00

Date of Receipt 11 / 02 / 2016
Transaction ID : SA11A.466850
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 125.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 583 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
Team Ryan

A. CARR, BRIAN, R., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 680 5TH AVE APT 11C
 City NEW YORK State NY Zip Code 10019-5429
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) HIGH BROOK INVESTORS Occupation (for Individual) PRIVATE EQUITY
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 35000.00

Date of Receipt 11 / 03 / 2016
Transaction ID : SA11A.465241
 Amount of Each Receipt this Period 10000.00
 Memo Item CONTRIBUTION

B. CARRESCIA, DIANE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 12 MAPLE STREET
 City STERLING State MA Zip Code 01564-1423
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) ARCHITECTURAL PRODUCT REP.
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 225.00

Date of Receipt 10 / 20 / 2016
Transaction ID : SA11A.444758
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

C. CARRESCIA, DIANE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 12 MAPLE STREET
 City STERLING State MA Zip Code 01564-1423
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) ARCHITECTURAL PRODUCT REP.
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 225.00

Date of Receipt 11 / 02 / 2016
Transaction ID : SA11A.466433
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	10075.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 584 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. CARRESCIA, DIANE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 12 MAPLE STREET
 City STERLING State MA Zip Code 01564-1423
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) ARCHITECTURAL PRODUCT REP.
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 225.00

Date of Receipt **11 / 07 / 2016**
Transaction ID : SA11A.474865
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

B. CARROLL, DAVID, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 235 RIVEREDGE CV
 City CORDOVA State TN Zip Code 38018-7735
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) TOUCHPOINT SOFTWARE, LLC Occupation (for Individual) SOFTWARE DEVELOPER
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 312.00

Date of Receipt **10 / 23 / 2016**
Transaction ID : SA11A.446511
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

C. CARROLL, DAVID, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 235 RIVEREDGE CV
 City CORDOVA State TN Zip Code 38018-7735
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) TOUCHPOINT SOFTWARE, LLC Occupation (for Individual) SOFTWARE DEVELOPER
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 312.00

Date of Receipt **10 / 28 / 2016**
Transaction ID : SA11A.455556
 Amount of Each Receipt this Period 30.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	80.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 585 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. CARROLL, DAVID, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 235 RIVEREDGE CV
 City CORDOVA State TN Zip Code 38018-7735
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) TOUCHPOINT SOFTWARE, LLC Occupation (for Individual) SOFTWARE DEVELOPER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 312.00

Date of Receipt **10 / 31 / 2016**
Transaction ID : SA11A.458877
 Amount of Each Receipt this Period 25.00
 Memo Item
 CONTRIBUTION

B. CARROLL, DAVID, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 235 RIVEREDGE CV
 City CORDOVA State TN Zip Code 38018-7735
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) TOUCHPOINT SOFTWARE, LLC Occupation (for Individual) SOFTWARE DEVELOPER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 312.00

Date of Receipt **11 / 06 / 2016**
Transaction ID : SA11A.477485
 Amount of Each Receipt this Period 25.00
 Memo Item
 CONTRIBUTION

C. CARROLL, ROBERT, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2241 CENTURY HILL
 City LOS ANGELES State CA Zip Code 90067-3506
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 750.00

Date of Receipt **10 / 28 / 2016**
Transaction ID : SA11A.455545
 Amount of Each Receipt this Period 50.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	100.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 586 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. CARRUTHERS, BILL, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 6740 VIEWMONT
 City CLINTON State WA Zip Code 98236-8710
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 425.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 22 / 2016
Transaction ID : SA11A.446882
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION

B. CARRUTHERS, BILL, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 6740 VIEWMONT
 City CLINTON State WA Zip Code 98236-8710
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 425.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 03 / 2016
Transaction ID : SA11A.468667
 Amount of Each Receipt this Period
 25.00
 Memo Item
 CONTRIBUTION

C. CARRUTHERS, BILL, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 6740 VIEWMONT
 City CLINTON State WA Zip Code 98236-8710
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 425.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 04 / 2016
Transaction ID : SA11A.471795
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	225.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 587 OF 4311
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. CARSON, FRANCIS, W., MS.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 2309 APPARATION CT

City ST. GEORGE State UT Zip Code 84790-8001

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 460.00

Date of Receipt 10 / 31 / 2016
Transaction ID : SA11A.459106

Amount of Each Receipt this Period 100.00

Memo Item CONTRIBUTION

B. CARSON, LARRY, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 26 PINECREST PLAZA 267

City SOUTHERN PINES State NC Zip Code 28387-4301

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt 11 / 07 / 2016
Transaction ID : SA11A.480717

Amount of Each Receipt this Period 250.00

Memo Item CONTRIBUTION

C. CARSON, LEON, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 67 E 2ND ST APT 45

City NEW YORK State NY Zip Code 10003-9219

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED

Receipt For: Primary General Other (specify)

Aggregate Year-to-Date ▼ 400.00

Date of Receipt 10 / 29 / 2016
Transaction ID : SA11A.461201

Amount of Each Receipt this Period 100.00

Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 450.00

TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 588 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. CARSON, LEON, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 67 E 2ND ST APT 45
 City NEW YORK State NY Zip Code 10003-9219
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt 10 / 29 / 2016
Transaction ID : SA11A.461203
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

B. CARSON, STANLEY, , DR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4191 S COLORADO BLVD
 City CHERRY HILLS VILLA State CO Zip Code 80113-5039
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 630.00

Date of Receipt 10 / 23 / 2016
Transaction ID : SA11A.446454
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

C. CARSON, STANLEY, , DR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4191 S COLORADO BLVD
 City CHERRY HILLS VILLA State CO Zip Code 80113-5039
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 630.00

Date of Receipt 10 / 21 / 2016
Transaction ID : SA11A.447197
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	150.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 589 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. CARSON, STANLEY, , DR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4191 S COLORADO BLVD
 City CHERRY HILLS VILLA State CO Zip Code 80113-5039
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 630.00

Date of Receipt 10 / 27 / 2016
Transaction ID : SA11A.457083
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

B. CARSON, STANLEY, , DR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4191 S COLORADO BLVD
 City CHERRY HILLS VILLA State CO Zip Code 80113-5039
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 630.00

Date of Receipt 11 / 04 / 2016
Transaction ID : SA11A.467640
 Amount of Each Receipt this Period 35.00
 Memo Item CONTRIBUTION

C. CARSON, STANLEY, , DR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4191 S COLORADO BLVD
 City CHERRY HILLS VILLA State CO Zip Code 80113-5039
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 630.00

Date of Receipt 11 / 02 / 2016
Transaction ID : SA11A.470008
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	85.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 590 OF 4311
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
	<input type="checkbox"/> 12	<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. CARSON, STANLEY, , DR.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 4191 S COLORADO BLVD

City CHERRY HILLS VILLA	State CO	Zip Code 80113-5039
----------------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
630.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11		05		2016

Transaction ID : SA11A.478617

Amount of Each Receipt this Period
25.00

Memo Item
CONTRIBUTION

B. CARSTENSEN, MELANIE, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 10007 JONES AVENUE

City DURHAM	State CA	Zip Code 95938-9718
----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) SELF EMPLOYED	Occupation (for Individual) PLUMBING
--	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
450.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11		04		2016

Transaction ID : SA11A.473048

Amount of Each Receipt this Period
100.00

Memo Item
CONTRIBUTION

C. CARSWELL, NELSON, S., DR., JR., M.D.
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 101 WOODRIDGE ROAD

City DUBLIN	State GA	Zip Code 31021-2940
----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) INFORMATION REQUESTED PER BEST EFFORTS	Occupation (for Individual) INFORMATION REQUESTED PER BEST EFFORTS
---	---

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
300.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		20		2016

Transaction ID : SA11A.433452

Amount of Each Receipt this Period
100.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	225.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 591 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. CARTER, JAY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2730 COMMERCE ST. SUITE 500

City WICHITA FALLS	State TX	Zip Code 76301-8000
-----------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) CARTER AVIATION	Occupation (for Individual) CEO
--	------------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
950.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 25 / 2016

Transaction ID : SA11A.448885

Amount of Each Receipt this Period
100.00

Memo Item
CONTRIBUTION

B. CARTER, JAY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2730 COMMERCE ST. SUITE 500

City WICHITA FALLS	State TX	Zip Code 76301-8000
-----------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) CARTER AVIATION	Occupation (for Individual) CEO
--	------------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
950.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 27 / 2016

Transaction ID : SA11A.452576

Amount of Each Receipt this Period
50.00

Memo Item
CONTRIBUTION

C. CARTER, JAY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2730 COMMERCE ST. SUITE 500

City WICHITA FALLS	State TX	Zip Code 76301-8000
-----------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) CARTER AVIATION	Occupation (for Individual) CEO
--	------------------------------------

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
950.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 04 / 2016

Transaction ID : SA11A.471384

Amount of Each Receipt this Period
100.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	250.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 592 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. CARTER, JAY, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 2730 COMMERCE ST. SUITE 500

City WICHITA FALLS	State TX	Zip Code 76301-8000
-----------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) CARTER AVIATION	Occupation (for Individual) CEO
--	------------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
950.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	06	/	2016

Transaction ID : SA11A.477137

Amount of Each Receipt this Period
50.00

Memo Item
CONTRIBUTION

B. CARTER, JERRY, T., ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 5591 WINDFLOWER ROAD

City WINSTON SALEM	State NC	Zip Code 27106-6268
-----------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
300.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	26	/	2016

Transaction ID : SA11A.450889

Amount of Each Receipt this Period
100.00

Memo Item
CONTRIBUTION

C. CARTER, JERRY, T., ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 5591 WINDFLOWER ROAD

City WINSTON SALEM	State NC	Zip Code 27106-6268
-----------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
300.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	26	/	2016

Transaction ID : SA11A.450913

Amount of Each Receipt this Period
100.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	250.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 593 OF 4311		
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14	<input type="checkbox"/> 11c <input type="checkbox"/> 15	<input type="checkbox"/> 12 <input type="checkbox"/> 16

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NAME OF COMMITTEE (In Full)
Team Ryan

A. CARTER, JERRY, T., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5591 WINDFLOWER ROAD
 City WINSTON SALEM State NC Zip Code 27106-6268
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 10 / 26 / 2016
Transaction ID : SA11A.450916
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION

B. CARTER, KENNETH, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4119 MARSHA SHARP FREEWAY
 City LUBBOCK State TX Zip Code 79407-2416
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) OTTO'S GRANARY Occupation (for Individual) OWNER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 420.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 11 / 04 / 2016
Transaction ID : SA11A.472990
 Amount of Each Receipt this Period
 50.00
 Memo Item
 CONTRIBUTION

C. CARTER, PAMELA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1545 DARTMOUTH ROAD
 City COLUMBUS State GA Zip Code 31904-1903
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) TROY UNIVERSITY Occupation (for Individual) ADMINISTRATOR
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 10 / 28 / 2016
Transaction ID : SA11A.456417
 Amount of Each Receipt this Period
 50.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	200.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 594 OF 4311
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. CARTER, PAMELA, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1545 DARTMOUTH ROAD

City COLUMBUS	State GA	Zip Code 31904-1903
------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) TROY UNIVERSITY	Occupation (for Individual) ADMINISTRATOR
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
10		31		2016

Transaction ID : SA11A.458002

Amount of Each Receipt this Period
50.00

Memo Item
CONTRIBUTION

B. CARTER, PAMELA, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1545 DARTMOUTH ROAD

City COLUMBUS	State GA	Zip Code 31904-1903
------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) TROY UNIVERSITY	Occupation (for Individual) ADMINISTRATOR
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
10		31		2016

Transaction ID : SA11A.458010

Amount of Each Receipt this Period
50.00

Memo Item
CONTRIBUTION

C. CARTER, PAMELA, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1545 DARTMOUTH ROAD

City COLUMBUS	State GA	Zip Code 31904-1903
------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) TROY UNIVERSITY	Occupation (for Individual) ADMINISTRATOR
--	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
250.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
11		04		2016

Transaction ID : SA11A.470740

Amount of Each Receipt this Period
50.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	150.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 595 OF 4311
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. CARTEAUX, PAUL, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 5888 ECHO RIDGE

City STEVENSVILLE	State MI	Zip Code 49127-1320
----------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) AEP COOK NUCLEAR PLANT	Occupation (for Individual) MANAGER
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
375.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	01	/	2016

Transaction ID : SA11A.462972

Amount of Each Receipt this Period
25.00

Memo Item CONTRIBUTION

B. CARTER, RICHARD, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 309 W JOHNSON ST
1344

City MADISON	State WI	Zip Code 53703-3766
-----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) DEAN MEDICAL GROUP	Occupation (for Individual) PHYSICIAN
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
350.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	06	/	2016

Transaction ID : SA11A.477197

Amount of Each Receipt this Period
100.00

Memo Item CONTRIBUTION

C. CARTER, SAMUEL, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 340 SOUTH HEARTZ ROAD

City COPPELL	State TX	Zip Code 75019-5816
-----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) SELF EMPLOYED	Occupation (for Individual) CONSTRUCTION
--	---

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	28	/	2016

Transaction ID : SA11A.455395

Amount of Each Receipt this Period
250.00

Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	375.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 596 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. CARTER, THOMAS, E., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5823 WARM MIST LANE
 City DALLAS State TX Zip Code 75248-
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NEXSTAR BROADCASTING Occupation (for Individual) EXECUTIVE
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 2500.00

Date of Receipt 10 / 24 / 2016
Transaction ID : SA11A.443476
 Amount of Each Receipt this Period 2500.00
 Memo Item CONTRIBUTION

B. CARTER, WILLIAM, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1980 CRESCENT BEACH ROAD
 City MANISTEE State MI Zip Code 49660-8914
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 2650.00

Date of Receipt 10 / 26 / 2016
Transaction ID : SA11A.454638
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

C. CARTER, WILLIAM, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1980 CRESCENT BEACH ROAD
 City MANISTEE State MI Zip Code 49660-8914
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 2650.00

Date of Receipt 10 / 26 / 2016
Transaction ID : SA11A.454654
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	2850.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 597 OF 4311
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Team Ryan

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
A. CARTER, WILLIAM, , ,

Mailing Address **1980 CRESCENT BEACH ROAD**

City MANISTEE	State MI	Zip Code 49660-8914
-------------------------	--------------------	-------------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
--	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
2650.00

Date of Receipt
11 / 06 / 2016

Transaction ID : SA11A.480897

Amount of Each Receipt this Period
100.00

Memo Item
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
B. CARTLEDGE, R., E., ,

Mailing Address **27 SEAWATCH DRIVE**

City SAVANNAH	State GA	Zip Code 31411-2600
-------------------------	--------------------	-------------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) INFORMATION REQUESTED PER BEST EFFORTS	Occupation (for Individual) INFORMATION REQUESTED PER BE
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1100.00

Date of Receipt
11 / 01 / 2016

Transaction ID : SA11A.461688

Amount of Each Receipt this Period
500.00

Memo Item
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
C. CARTRIGHT, WILMA, L., ,

Mailing Address **514 W ARTHUR ST**

City PARIS	State IL	Zip Code 61944-2626
----------------------	--------------------	-------------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) HOMEMAKER
--	---

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
385.00

Date of Receipt
10 / 25 / 2016

Transaction ID : SA11A.449044

Amount of Each Receipt this Period
5.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	605.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 598 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. CARTRIGHT, WILMA, L., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 514 W ARTHUR ST
 City PARIS State IL Zip Code 61944-2626
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) HOMEMAKER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 385.00

Date of Receipt 10 / 27 / 2016
Transaction ID : SA11A.454074
 Amount of Each Receipt this Period 10.00
 Memo Item CONTRIBUTION

B. CARTRIGHT, WILMA, L., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 514 W ARTHUR ST
 City PARIS State IL Zip Code 61944-2626
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) HOMEMAKER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 385.00

Date of Receipt 10 / 27 / 2016
Transaction ID : SA11A.456708
 Amount of Each Receipt this Period 10.00
 Memo Item CONTRIBUTION

C. CARTRIGHT, WILMA, L., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 514 W ARTHUR ST
 City PARIS State IL Zip Code 61944-2626
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) HOMEMAKER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 385.00

Date of Receipt 11 / 04 / 2016
Transaction ID : SA11A.474319
 Amount of Each Receipt this Period 10.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶ 30.00
TOTAL This Period (last page this line number only).....▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 599 OF 4311
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. CARTRIGHT, WILMA, L., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 514 W ARTHUR ST
 City PARIS State IL Zip Code 61944-2626
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) HOMEMAKER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 385.00

Date of Receipt 11 / 04 / 2016
Transaction ID : SA11A.474320
 Amount of Each Receipt this Period 10.00
 Memo Item CONTRIBUTION

B. CARUSO, JOSEPH, M., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 105 N EOLA DR SUITE 4
 City ORLANDO State FL Zip Code 32801-2052
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) REALTICORP Occupation (for Individual) BROKER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 10 / 26 / 2016
Transaction ID : SA11A.454410
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

C. CASE, JEFFREY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 22 TAMARADE DRIVE
 City LITTLETON State CO Zip Code 80127-3513
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 10 / 28 / 2016
Transaction ID : SA11A.456008
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶ 310.00
TOTAL This Period (last page this line number only).....▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 600 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. CASE, JEFFREY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 22 TAMARADE DRIVE
 City LITTLETON State CO Zip Code 80127-3513
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt
 11 / 04 / 2016
Transaction ID : SA11A.473210
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

B. CASEY, CHRISTOPHER, LEE, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5160 BRIDLEWOOD CT
 City PONTE VEDRA BEACH State FL Zip Code 32082-2009
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SWISHER INTERNATIONAL Occupation (for Individual) EXECUTIVE
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 2000.00

Date of Receipt
 10 / 24 / 2016
Transaction ID : SA11A.443474
 Amount of Each Receipt this Period 2000.00
 Memo Item CONTRIBUTION

C. CASEY, JOHN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 815 PALM BLVD
 City ISLE OF PALMS State SC Zip Code 29451-2217
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt
 10 / 27 / 2016
Transaction ID : SA11A.457059
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	2300.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 601 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. CASEY, MICHAEL, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1111 W EL CAMINO REAL, STE 109 MB
 City SUNNYVALE State CA Zip Code 94087-1057
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) INTEL Occupation (for Individual) ENGINEER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1600.00

Date of Receipt 10 / 21 / 2016
Transaction ID : SA11A.444416
 Amount of Each Receipt this Period 500.00
 Memo Item CONTRIBUTION

B. CASEY, MICHAEL, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1111 W EL CAMINO REAL, STE 109 MB
 City SUNNYVALE State CA Zip Code 94087-1057
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) INTEL Occupation (for Individual) ENGINEER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1600.00

Date of Receipt 10 / 21 / 2016
Transaction ID : SA11A.444417
 Amount of Each Receipt this Period 500.00
 Memo Item CONTRIBUTION

C. CASEY, MICHAEL, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1111 W EL CAMINO REAL, STE 109 MB
 City SUNNYVALE State CA Zip Code 94087-1057
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) INTEL Occupation (for Individual) ENGINEER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1600.00

Date of Receipt 10 / 28 / 2016
Transaction ID : SA11A.456041
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	1100.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 602 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. CASEY, MICHAEL, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 1111 W EL CAMINO REAL, STE 109 MB

City SUNNYVALE	State CA	Zip Code 94087-1057
FEC ID number of contributing federal political committee. C		
Name of Employer (for Individual) INTEL		Occupation (for Individual) ENGINEER
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 1600.00

Date of Receipt
11 / 04 / 2016
Transaction ID : SA11A.473406

Amount of Each Receipt this Period
100.00

Memo Item
CONTRIBUTION

B. CASEY, SAMUEL, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 3547 SAVANNAH HILLS DRIVE

City MATTHEWS	State NC	Zip Code 28105-5429
FEC ID number of contributing federal political committee. C		
Name of Employer (for Individual) JUST LAW INTERNATIONAL		Occupation (for Individual) ATTORNEY
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 5500.00

Date of Receipt
10 / 22 / 2016
Transaction ID : SA11A.446962

Amount of Each Receipt this Period
100.00

Memo Item
CONTRIBUTION

C. CASEY, SAMUEL, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 3547 SAVANNAH HILLS DRIVE

City MATTHEWS	State NC	Zip Code 28105-5429
FEC ID number of contributing federal political committee. C		
Name of Employer (for Individual) JUST LAW INTERNATIONAL		Occupation (for Individual) ATTORNEY
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		Aggregate Year-to-Date ▼ 5500.00

Date of Receipt
11 / 04 / 2016
Transaction ID : SA11A.472979

Amount of Each Receipt this Period
100.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	300.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 603 OF 4311
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Team Ryan

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
A. CASHIA, JOAN, , ,

Mailing Address **2341 SALEROSO DRIVE**

City ROWLAND HEIGHTS	State CA	Zip Code 91748-4182
--------------------------------	--------------------	-------------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
--	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
384.00

Date of Receipt
11 / 01 / 2016

Transaction ID : SA11A.463148

Amount of Each Receipt this Period
25.00

Memo Item
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
B. CASPERSON, CAROLINA, , ,

Mailing Address **1700 LINCOLN STREET,**

City DENVER	State CO	Zip Code 80203-4500
-----------------------	--------------------	-------------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) SELF EMPLOYED	Occupation (for Individual) CHRISTIAN SCIENCE PRACTITIONER
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1171.00

Date of Receipt
10 / 28 / 2016

Transaction ID : SA11A.456093

Amount of Each Receipt this Period
50.00

Memo Item
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
C. CASPERSON, CAROLINA, , ,

Mailing Address **1700 LINCOLN STREET,**

City DENVER	State CO	Zip Code 80203-4500
-----------------------	--------------------	-------------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) SELF EMPLOYED	Occupation (for Individual) CHRISTIAN SCIENCE PRACTITIONER
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
1171.00

Date of Receipt
10 / 27 / 2016

Transaction ID : SA11A.456788

Amount of Each Receipt this Period
50.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	125.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 604 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. CASPERSON, CAROLINA, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1700 LINCOLN STREET,
City DENVER State CO Zip Code 80203-4500

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) CHRISTIAN SCIENCE PRACTITIONER

Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 1171.00

Date of Receipt 10 / 27 / 2016
Transaction ID : SA11A.456789

Amount of Each Receipt this Period 50.00

Memo Item CONTRIBUTION

B. CASPERSON, CAROLINA, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1700 LINCOLN STREET,
City DENVER State CO Zip Code 80203-4500

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) CHRISTIAN SCIENCE PRACTITIONER

Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 1171.00

Date of Receipt 10 / 31 / 2016
Transaction ID : SA11A.463996

Amount of Each Receipt this Period 100.00

Memo Item CONTRIBUTION

C. CASPERSON, CAROLINA, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1700 LINCOLN STREET,
City DENVER State CO Zip Code 80203-4500

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) CHRISTIAN SCIENCE PRACTITIONER

Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 1171.00

Date of Receipt 11 / 02 / 2016
Transaction ID : SA11A.469697

Amount of Each Receipt this Period 100.00

Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	250.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 605 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. CASPERSON, CAROLINA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1700 LINCOLN STREET,
 City DENVER State CO Zip Code 80203-4500
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) CHRISTIAN SCIENCE PRACTITIONER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1171.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 04 / 2016
Transaction ID : SA11A.470792
 Amount of Each Receipt this Period
 50.00
 Memo Item
 CONTRIBUTION

B. CASSIDY, LESLIE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 9501 SEDDON ROAD
 City BETHESDA State MD Zip Code 20817-2048
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 3750.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 24 / 2016
Transaction ID : SA11A.445762
 Amount of Each Receipt this Period
 250.00
 Memo Item
 CONTRIBUTION

C. CASSIDY, LESLIE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 9501 SEDDON ROAD
 City BETHESDA State MD Zip Code 20817-2048
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 3750.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 22 / 2016
Transaction ID : SA11A.446819
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	400.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 606 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
Team Ryan

A. CASSIDY, LESLIE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 9501 SEDDON ROAD

City BETHESDA	State MD	Zip Code 20817-2048
------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
3750.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 26 / 2016
Transaction ID : SA11A.454362

Amount of Each Receipt this Period
250.00

Memo Item
CONTRIBUTION

B. CASSIDY, LESLIE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 9501 SEDDON ROAD

City BETHESDA	State MD	Zip Code 20817-2048
------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
3750.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 30 / 2016
Transaction ID : SA11A.464933

Amount of Each Receipt this Period
100.00

Memo Item
CONTRIBUTION

C. CASSIDY, LESLIE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 9501 SEDDON ROAD

City BETHESDA	State MD	Zip Code 20817-2048
------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
3750.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 02 / 2016
Transaction ID : SA11A.466820

Amount of Each Receipt this Period
250.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	600.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 607 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. CASSIDY, LESLIE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 9501 SEDDON ROAD
 City BETHESDA State MD Zip Code 20817-2048
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 3750.00

Date of Receipt 11 / 04 / 2016
Transaction ID : SA11A.470686
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

B. CASSIDY, LESLIE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 9501 SEDDON ROAD
 City BETHESDA State MD Zip Code 20817-2048
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 3750.00

Date of Receipt 11 / 04 / 2016
Transaction ID : SA11A.471019
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

C. CASSIDY, LESLIE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 9501 SEDDON ROAD
 City BETHESDA State MD Zip Code 20817-2048
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 3750.00

Date of Receipt 11 / 04 / 2016
Transaction ID : SA11A.473875
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	600.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 608 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. CASSIDY, LESLIE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 9501 SEDDON ROAD
 City BETHESDA State MD Zip Code 20817-2048
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 3750.00

Date of Receipt **11 / 04 / 2016**
Transaction ID : SA11A.474008
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

B. CASSIDY, LESLIE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 9501 SEDDON ROAD
 City BETHESDA State MD Zip Code 20817-2048
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 3750.00

Date of Receipt **11 / 03 / 2016**
Transaction ID : SA11A.474388
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

C. CASSIDY, LESLIE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 9501 SEDDON ROAD
 City BETHESDA State MD Zip Code 20817-2048
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 3750.00

Date of Receipt **11 / 07 / 2016**
Transaction ID : SA11A.476506
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	600.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 609 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. CASTILLEJA, PAUL, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 401 EAST 7TH STREET
 City JOSEPH State OR Zip Code 97846-8374
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) PAUL CASTILLEJA Occupation (for Individual) FARMER
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 325.00

Date of Receipt 11 / 01 / 2016
Transaction ID : SA11A.462200
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

B. CASTRO, VINCENT, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 7939 CHATEAU POINT LANE
 City HOUSTON State TX Zip Code 77041-1244
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SHELL Occupation (for Individual) COMMERCIAL DEVELOPMENT MGR
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 550.00

Date of Receipt 10 / 22 / 2016
Transaction ID : SA11A.446946
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

C. CASTRO, VINCENT, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 7939 CHATEAU POINT LANE
 City HOUSTON State TX Zip Code 77041-1244
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SHELL Occupation (for Individual) COMMERCIAL DEVELOPMENT MGR
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 550.00

Date of Receipt 11 / 04 / 2016
Transaction ID : SA11A.473208
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	150.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 610 OF 4311
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. CATHEY, BOB, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 259 HICKORY DR

City BUCHANAN	State TN	Zip Code 38222-5006
------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
475.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		27		2016

Transaction ID : SA11A.453589

Amount of Each Receipt this Period
50.00

Memo Item
CONTRIBUTION

B. CATHEY, BOB, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 259 HICKORY DR

City BUCHANAN	State TN	Zip Code 38222-5006
------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
475.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		31		2016

Transaction ID : SA11A.458468

Amount of Each Receipt this Period
25.00

Memo Item
CONTRIBUTION

C. CATHEY, BOB, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 259 HICKORY DR

City BUCHANAN	State TN	Zip Code 38222-5006
------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
475.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11		02		2016

Transaction ID : SA11A.466238

Amount of Each Receipt this Period
25.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	100.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 611 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
Team Ryan

A. CATHEY, BOB, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 259 HICKORY DR
 City BUCHANAN State TN Zip Code 38222-5006
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 475.00

Date of Receipt
 11 / 07 / 2016
Transaction ID : SA11A.476523
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

B. CATHEY, BOB, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 259 HICKORY DR
 City BUCHANAN State TN Zip Code 38222-5006
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 475.00

Date of Receipt
 11 / 07 / 2016
Transaction ID : SA11A.480786
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

C. CAVERLY, GORDON, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 6065 HEARTHSIDE PLACE
 City GRAND BLANC State MI Zip Code 48439-9199
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) MID-STATE CONSULTANTS Occupation (for Individual) REGIONAL VICE-PRESIDENT
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt
 10 / 29 / 2016
Transaction ID : SA11A.461151
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶ 150.00
TOTAL This Period (last page this line number only).....▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 612 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. CAVERLY, GORDON, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 6065 HEARTHSIDE PLACE
 City GRAND BLANC State MI Zip Code 48439-9199
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) MID-STATE CONSULTANTS Occupation (for Individual) REGIONAL VICE-PRESIDENT
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt **11 / 04 / 2016**
Transaction ID : SA11A.470734
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

B. CAVICKE, RICHARD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5849 SAGEBRUSH ROAD
 City LA JOLLA State CA Zip Code 92037-7038
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 475.00

Date of Receipt **10 / 20 / 2016**
Transaction ID : SA11A.442597
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

C. CAVICKE, RICHARD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5849 SAGEBRUSH ROAD
 City LA JOLLA State CA Zip Code 92037-7038
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 475.00

Date of Receipt **10 / 31 / 2016**
Transaction ID : SA11A.458812
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶ 175.00
TOTAL This Period (last page this line number only).....▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 613 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. CAVICKE, RICHARD, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 5849 SAGEBRUSH ROAD

City LA JOLLA	State CA	Zip Code 92037-7038
------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
475.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		30		2016

Transaction ID : SA11A.460194

Amount of Each Receipt this Period
50.00

Memo Item
CONTRIBUTION

B. CAVICKE, RICHARD, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 5849 SAGEBRUSH ROAD

City LA JOLLA	State CA	Zip Code 92037-7038
------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
475.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11		06		2016

Transaction ID : SA11A.478008

Amount of Each Receipt this Period
50.00

Memo Item
CONTRIBUTION

C. CAVICKE, RICHARD, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 5849 SAGEBRUSH ROAD

City LA JOLLA	State CA	Zip Code 92037-7038
------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
475.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11		06		2016

Transaction ID : SA11A.478013

Amount of Each Receipt this Period
50.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	150.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 614 OF 4311
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. CECIL, WILLIAM, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1675 SHORES BLVD

City ROCKWALL	State TX	Zip Code 75087-2329
------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	30	/	2016

Transaction ID : SA11A.460273

Amount of Each Receipt this Period
50.00

Memo Item
CONTRIBUTION

B. CELLER, HERBERT, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 366 OAK GLEN RD.

City HOWELL	State NJ	Zip Code 07731-8624
----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
550.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	06	/	2016

Transaction ID : SA11A.476995

Amount of Each Receipt this Period
150.00

Memo Item
CONTRIBUTION

C. CENTENARI, PAUL, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 8140 TELEGRAPH ROAD

City SEVERN	State MD	Zip Code 21144-3204
----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) PAUL CENTENARI	Occupation (for Individual) ATLASCONTAINER - MFG
---	---

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
1000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	28	/	2016

Transaction ID : SA11A.455947

Amount of Each Receipt this Period
250.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	450.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 615 OF 4311
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. CENTENARI, PAUL, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 8140 TELEGRAPH ROAD

City SEVERN	State MD	Zip Code 21144-3204
----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) PAUL CENTENARI	Occupation (for Individual) ATLASCONTAINER - MFG
---	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1000.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
11		04		2016

Transaction ID : SA11A.472669

Amount of Each Receipt this Period
250.00

Memo Item CONTRIBUTION

B. CERAUL, DAVID, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 22 MARKET STREET

City BANGOR	State PA	Zip Code 18013-1902
----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) SELF EMPLOYED	Occupation (for Individual) ATTORNEY
--	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
700.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
11		02		2016

Transaction ID : SA11A.467081

Amount of Each Receipt this Period
100.00

Memo Item CONTRIBUTION

C. CERAUL, DAVID, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 22 MARKET STREET

City BANGOR	State PA	Zip Code 18013-1902
----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) SELF EMPLOYED	Occupation (for Individual) ATTORNEY
--	---

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
700.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
11		02		2016

Transaction ID : SA11A.467082

Amount of Each Receipt this Period
100.00

Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	450.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 616 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. CHALSEN, CHRIS, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1 PEACH TREE LANE
 City BRIARCLIFF MANOR State NY Zip Code 10510-2638
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 10 / 25 / 2016
Transaction ID : SA11A.451688
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

B. CHALSTY, JENNIFER, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 24 TAYLOR ROAD
 City SHORT HILLS State NJ Zip Code 07078-2226
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt 10 / 28 / 2016
Transaction ID : SA11A.454804
 Amount of Each Receipt this Period 1000.00
 Memo Item CONTRIBUTION

C. CHAMBERS, B., , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5194 N. HAMPTON RDG
 City PEACHTREE CORNERS State GA Zip Code 30092-2617
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) ANGEL FLIGHT SOARS, INC Occupation (for Individual) NONPROFIT EXECUTIVE DIRECTOR
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 235.00

Date of Receipt 10 / 29 / 2016
Transaction ID : SA11A.460393
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶ 1350.00
TOTAL This Period (last page this line number only).....▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 617 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. CHAMBERS, B., , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5194 N. HAMPTON RDG
 City PEACHTREE CORNERS State GA Zip Code 30092-2617
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) ANGEL FLIGHT SOARS, INC Occupation (for Individual) NONPROFIT EXECUTIVE DIRECTOR
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 235.00

Date of Receipt
 11 / 06 / 2016
Transaction ID : SA11A.477947
 Amount of Each Receipt this Period 30.00
 Memo Item
 CONTRIBUTION

B. CHAMBERS, B., , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5194 N. HAMPTON RDG
 City PEACHTREE CORNERS State GA Zip Code 30092-2617
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) ANGEL FLIGHT SOARS, INC Occupation (for Individual) NONPROFIT EXECUTIVE DIRECTOR
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 235.00

Date of Receipt
 11 / 06 / 2016
Transaction ID : SA11A.477960
 Amount of Each Receipt this Period 25.00
 Memo Item
 CONTRIBUTION

C. CHAMBERS, B., , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5194 N. HAMPTON RDG
 City PEACHTREE CORNERS State GA Zip Code 30092-2617
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) ANGEL FLIGHT SOARS, INC Occupation (for Individual) NONPROFIT EXECUTIVE DIRECTOR
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 235.00

Date of Receipt
 11 / 06 / 2016
Transaction ID : SA11A.477961
 Amount of Each Receipt this Period 25.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	80.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 618 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. CHAMBERS, B., , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5194 N. HAMPTON RDG
 City PEACHTREE CORNERS State GA Zip Code 30092-2617
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) ANGEL FLIGHT SOARS, INC Occupation (for Individual) NONPROFIT EXECUTIVE DIRECTOR
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 235.00

Date of Receipt 11 / 07 / 2016
Transaction ID : SA11A.480607
 Amount of Each Receipt this Period 30.00
 Memo Item
 CONTRIBUTION

B. CHAMBERS, JOHN, T., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3230 ALEXIS DR
 City PALO ALTO State CA Zip Code 94304-1331
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) INFORMATION REQUESTED PER BEST EFFORTS Occupation (for Individual) INFORMATION REQUESTED PER BE
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 7700.00

Date of Receipt 11 / 01 / 2016
Transaction ID : SA11A.461909
 Amount of Each Receipt this Period 5000.00
 Memo Item
 CONTRIBUTION

C. CHAMBERS, JOHN, T., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3230 ALEXIS DR
 City PALO ALTO State CA Zip Code 94304-1331
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) INFORMATION REQUESTED PER BEST EFFORTS Occupation (for Individual) INFORMATION REQUESTED PER BE
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 7700.00

Date of Receipt 11 / 01 / 2016
Transaction ID : SA11A.461910
 Amount of Each Receipt this Period 2700.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	7730.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 619 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. CHAMBERS, RICHARD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 246 OAK KNOLL ROAD
 City BARRINGTON State IL Zip Code 60010-2649
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) B.B. GRAHAM & CO. Occupation (for Individual) SECURITIES REPRESENTATIVE
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 2600.00

Date of Receipt 10 / 26 / 2016
Transaction ID : SA11A.451176
 Amount of Each Receipt this Period 1000.00
 Memo Item CONTRIBUTION

B. CHAMBERS, RICHARD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 246 OAK KNOLL ROAD
 City BARRINGTON State IL Zip Code 60010-2649
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) B.B. GRAHAM & CO. Occupation (for Individual) SECURITIES REPRESENTATIVE
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 2600.00

Date of Receipt 11 / 07 / 2016
Transaction ID : SA11A.475294
 Amount of Each Receipt this Period 500.00
 Memo Item CONTRIBUTION

C. CHAMIS, CHRISTOS, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 24534 FRAMINGHAM DRIVE
 City WESTLAKE State OH Zip Code 44145-4902
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 11 / 01 / 2016
Transaction ID : SA11A.461885
 Amount of Each Receipt this Period 200.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	1700.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 620 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. CHAMPAGNE, LEONEL, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 739 WAPPING ROAD
 City PORTSMOUTH State RI Zip Code 02871-5157
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) TRC ALLIANCE LLC Occupation (for Individual) VICE PRESIDENT
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 11 / 02 / 2016
Transaction ID : SA11A.470219
 Amount of Each Receipt this Period 250.00
 Memo Item
CONTRIBUTION

B. CHAN, GILBERT, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 32 MANETTO DR
 City PLAINVIEW State NY Zip Code 11803-2126
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 11 / 01 / 2016
Transaction ID : SA11A.462279
 Amount of Each Receipt this Period 50.00
 Memo Item
CONTRIBUTION

C. CHAN, GILBERT, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 32 MANETTO DR
 City PLAINVIEW State NY Zip Code 11803-2126
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 11 / 01 / 2016
Transaction ID : SA11A.462288
 Amount of Each Receipt this Period 50.00
 Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	350.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 621 OF 4311
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. CHANG, BYUNG, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 5521 OVERBROOK DR.

City ANN ARBOR	State MI	Zip Code 48105-9560
-------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) GENERAL SCIENTIFIC CORP	Occupation (for Individual) ENGINEER
--	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
950.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		24		2016

Transaction ID : SA11A.446065

Amount of Each Receipt this Period
100.00

Memo Item
CONTRIBUTION

B. CHANG, BYUNG, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 5521 OVERBROOK DR.

City ANN ARBOR	State MI	Zip Code 48105-9560
-------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) GENERAL SCIENTIFIC CORP	Occupation (for Individual) ENGINEER
--	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
950.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		24		2016

Transaction ID : SA11A.446069

Amount of Each Receipt this Period
100.00

Memo Item
CONTRIBUTION

C. CHANG, BYUNG, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 5521 OVERBROOK DR.

City ANN ARBOR	State MI	Zip Code 48105-9560
-------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) GENERAL SCIENTIFIC CORP	Occupation (for Individual) ENGINEER
--	---

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
950.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11		04		2016

Transaction ID : SA11A.473474

Amount of Each Receipt this Period
250.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	450.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 622 OF 4311
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. CHANG, SUMEI, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 12203 CIMARRON VALLEY LN
 City PEARLAND State TX Zip Code 77584-4411
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt **10 / 30 / 2016**
Transaction ID : SA11A.460115
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

B. CHANG, SUMEI, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 12203 CIMARRON VALLEY LN
 City PEARLAND State TX Zip Code 77584-4411
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt **11 / 04 / 2016**
Transaction ID : SA11A.472690
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

C. CHAPEL, HAROLD, L., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4667 W 21ST STREET CIRCLE
 City GREELEY State CO Zip Code 80634-3265
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) HEALTHCARE PRODIDER Occupation (for Individual) BANNER
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 600.00

Date of Receipt **11 / 07 / 2016**
Transaction ID : SA11A.467748
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	350.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 623 OF 4311
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. CHAPIN, PAMELA, J., MS.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 2737 E 2ND ST
UNIT 1

City LONG BEACH State CA Zip Code 90803-5165

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1452.00

Date of Receipt
10 / 28 / 2016
Transaction ID : SA11A.454728

Amount of Each Receipt this Period
1000.00

Memo Item CONTRIBUTION

B. CHAPIN, PAMELA, J., MS.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 2737 E 2ND ST
UNIT 1

City LONG BEACH State CA Zip Code 90803-5165

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1452.00

Date of Receipt
11 / 07 / 2016
Transaction ID : SA11A.474887

Amount of Each Receipt this Period
202.00

Memo Item CONTRIBUTION

C. CHAPMAN, BENJAMIN, G., MR.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 20 LAKECREST LANE

City GROSSE POINTE FARM State MI Zip Code 48236-3714

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
250.00

Date of Receipt
11 / 08 / 2016
Transaction ID : SA11A.468068

Amount of Each Receipt this Period
150.00

Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶ 1352.00

TOTAL This Period (last page this line number only).....▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 624 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. CHAPMAN, JOHN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address BAY FARM LANE; PO BOX5
 City WASHINGTON ISLAND State WI Zip Code 54246-0005
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 350.00

Date of Receipt 10 / 26 / 2016
Transaction ID : SA11A.451036
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

B. CHAPMAN, JOHN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address BAY FARM LANE; PO BOX5
 City WASHINGTON ISLAND State WI Zip Code 54246-0005
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 350.00

Date of Receipt 11 / 04 / 2016
Transaction ID : SA11A.472162
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

C. CHARBONNEU, MARY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 304 MANNAKEE ST
 City ROCKVILLE State MD Zip Code 20850-2140
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 220.00

Date of Receipt 10 / 31 / 2016
Transaction ID : SA11A.459276
 Amount of Each Receipt this Period 30.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	130.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 625 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. CHARBONNEU, MARY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 304 MANNAKEE ST
 City ROCKVILLE State MD Zip Code 20850-2140
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 220.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 04 / 2016
Transaction ID : SA11A.471752
 Amount of Each Receipt this Period
 25.00
 Memo Item
 CONTRIBUTION

B. CHARBONNEU, MARY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 304 MANNAKEE ST
 City ROCKVILLE State MD Zip Code 20850-2140
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 220.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 04 / 2016
Transaction ID : SA11A.474149
 Amount of Each Receipt this Period
 30.00
 Memo Item
 CONTRIBUTION

C. CHASE, KENNETH, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 12227 RIOS RD
 City SAN DIEGO State CA Zip Code 92128-2703
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 225.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 28 / 2016
Transaction ID : SA11A.455270
 Amount of Each Receipt this Period
 50.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶ 105.00
TOTAL This Period (last page this line number only).....▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 626 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. CHASSE, ROBERT, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1142 CONTINENTAL AVE
 City MELBOURNE State FL Zip Code 32940-6742
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 350.00

Date of Receipt **10 / 28 / 2016**
Transaction ID : SA11A.455621
 Amount of Each Receipt this Period 10.00
 Memo Item CONTRIBUTION

B. CHASSE, ROBERT, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1142 CONTINENTAL AVE
 City MELBOURNE State FL Zip Code 32940-6742
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 350.00

Date of Receipt **11 / 01 / 2016**
Transaction ID : SA11A.462726
 Amount of Each Receipt this Period 10.00
 Memo Item CONTRIBUTION

C. CHASSE, ROBERT, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1142 CONTINENTAL AVE
 City MELBOURNE State FL Zip Code 32940-6742
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 350.00

Date of Receipt **10 / 31 / 2016**
Transaction ID : SA11A.464627
 Amount of Each Receipt this Period 10.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	30.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 627 OF 4311
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. CHASTAIN, ERIC, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 11808 SAN JOSE BLVD STE 1

City JACKSONVILLE	State FL	Zip Code 32223-1862
----------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) HORMONE HEALTH	Occupation (for Individual) MANAGEMENT
---	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
330.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		25		2016

Transaction ID : SA11A.448693

Amount of Each Receipt this Period
30.00

Memo Item
CONTRIBUTION

B. CHASTAIN, ERIC, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 11808 SAN JOSE BLVD STE 1

City JACKSONVILLE	State FL	Zip Code 32223-1862
----------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) HORMONE HEALTH	Occupation (for Individual) MANAGEMENT
---	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
330.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		31		2016

Transaction ID : SA11A.458647

Amount of Each Receipt this Period
25.00

Memo Item
CONTRIBUTION

C. CHASTAIN, ERIC, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 11808 SAN JOSE BLVD STE 1

City JACKSONVILLE	State FL	Zip Code 32223-1862
----------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) HORMONE HEALTH	Occupation (for Individual) MANAGEMENT
---	---

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
330.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11		03		2016

Transaction ID : SA11A.468464

Amount of Each Receipt this Period
50.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	105.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 628 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
Team Ryan

A. CHASTAIN, ERIC, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 11808 SAN JOSE BLVD STE 1
 City JACKSONVILLE State FL Zip Code 32223-1862
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) HORMONE HEALTH Occupation (for Individual) MANAGEMENT
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 330.00

Date of Receipt 11 / 03 / 2016
Transaction ID : SA11A.468465
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

B. CHASTAIN, ERIC, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 11808 SAN JOSE BLVD STE 1
 City JACKSONVILLE State FL Zip Code 32223-1862
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) HORMONE HEALTH Occupation (for Individual) MANAGEMENT
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 330.00

Date of Receipt 11 / 07 / 2016
Transaction ID : SA11A.475248
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

C. CHATHAM, HUGH, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 65 SUMMIT AVENUE
 City SAN RAFAEL State CA Zip Code 94901-2437
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 11 / 07 / 2016
Transaction ID : SA11A.467723
 Amount of Each Receipt this Period 500.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	600.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 629 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. CHEATHAM, BUCK, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO BOX 46
 City STATESVILLE State NC Zip Code 28687-0046
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 800.00

Date of Receipt
 11 / 04 / 2016
Transaction ID : SA11A.473578
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION

B. CHEATHAM, CHARLES, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1222 N.W. 19TH ST.
 City OKLAHOMA CITY State OK Zip Code 73106-4002
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) BANKONIT, LLC Occupation (for Individual) ATTORNEY
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 525.00

Date of Receipt
 10 / 23 / 2016
Transaction ID : SA11A.446265
 Amount of Each Receipt this Period
 50.00
 Memo Item
 CONTRIBUTION

C. CHEATHAM, CHARLES, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1222 N.W. 19TH ST.
 City OKLAHOMA CITY State OK Zip Code 73106-4002
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) BANKONIT, LLC Occupation (for Individual) ATTORNEY
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 525.00

Date of Receipt
 10 / 31 / 2016
Transaction ID : SA11A.458659
 Amount of Each Receipt this Period
 50.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	200.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 630 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. CHEATHAM, CHARLES, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1222 N.W. 19TH ST.
 City OKLAHOMA CITY State OK Zip Code 73106-4002
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) BANKONIT, LLC Occupation (for Individual) ATTORNEY
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 525.00

Date of Receipt 11 / 03 / 2016
Transaction ID : SA11A.468915
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

B. CHEATHAM, CHARLES, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1222 N.W. 19TH ST.
 City OKLAHOMA CITY State OK Zip Code 73106-4002
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) BANKONIT, LLC Occupation (for Individual) ATTORNEY
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 525.00

Date of Receipt 11 / 07 / 2016
Transaction ID : SA11A.474845
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

C. CHENG, CHUNJER, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 19433 DE HAVILLAND COURT
 City SARATOGA State CA Zip Code 95070-4040
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 600.00

Date of Receipt 10 / 26 / 2016
Transaction ID : SA11A.454461
 Amount of Each Receipt this Period 300.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶ 400.00
TOTAL This Period (last page this line number only).....▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 631 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. CHENG, CHUNJER, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 19433 DE HAVILLAND COURT
 City SARATOGA State CA Zip Code 95070-4040
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 600.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 26 / 2016
Transaction ID : SA11A.454462
 Amount of Each Receipt this Period
 300.00
 Memo Item
 CONTRIBUTION

B. CHILDERS, DICK, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 141 LEASON COVE DRIVE
 City LUSBY State MD Zip Code 20657-2746
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 554.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 30 / 2016
Transaction ID : SA11A.460125
 Amount of Each Receipt this Period
 59.00
 Memo Item
 CONTRIBUTION

C. CHILDERS, DICK, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 141 LEASON COVE DRIVE
 City LUSBY State MD Zip Code 20657-2746
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 554.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 02 / 2016
Transaction ID : SA11A.466592
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	459.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 632 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. CHILDERS, DICK, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 141 LEASON COVE DRIVE
 City LUSBY State MD Zip Code 20657-2746
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 554.00

Date of Receipt 11 / 02 / 2016
Transaction ID : SA11A.466595
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

B. CHILDERS, DICK, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 141 LEASON COVE DRIVE
 City LUSBY State MD Zip Code 20657-2746
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 554.00

Date of Receipt 11 / 04 / 2016
Transaction ID : SA11A.472896
 Amount of Each Receipt this Period 59.00
 Memo Item CONTRIBUTION

C. CHILDERS, MARK, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1342 VIA PORTOFINO
 City NAPLES State FL Zip Code 34108-3327
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 10 / 27 / 2016
Transaction ID : SA11A.456899
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	259.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 633 OF 4311
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. CHILD, WILLIAM, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 5517 S WALKER WOODS LANE

City SALT LAKE CITY	State UT	Zip Code 84117-7662
------------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) INFORMATION REQUESTED PER BEST EFFORTS	Occupation (for Individual) INFORMATION REQUESTED PER BE
---	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
11 / 01 / 2016

Transaction ID : SA11A.461827

Amount of Each Receipt this Period

50.00

Memo Item
CONTRIBUTION

B. CHIN, BEN, G., MR.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1951 QUAKER STREET

City EUREKA	State CA	Zip Code 95501-2726
----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
11 / 07 / 2016

Transaction ID : SA11A.467845

Amount of Each Receipt this Period

150.00

Memo Item
CONTRIBUTION

C. CHITESTER, ROBERT, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 470 SANDSTONE CT.

City ERIE	State PA	Zip Code 16505-5812
--------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) ROBERT CHITESTER	Occupation (for Individual) CHITESTER CREATIVE ASSOCIATES
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
1100.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
10 / 24 / 2016

Transaction ID : SA11A.445810

Amount of Each Receipt this Period

250.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	450.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 634 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. CHITKARA, DEV, R., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 44 LANDING LANE
 City EAST QUOGUE State NY Zip Code 11942-4804
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 10 / 26 / 2016
Transaction ID : SA11A.450083
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

B. CHITTENDEN, WILLIAN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5 OAK BROOK CLUB DRIVE APT N 201
 City OAK BROOK State IL Zip Code 60523-1348
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) INFORMATION REQUESTED PER BEST EFFORTS Occupation (for Individual) INFORMATION REQUESTED PER BE
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt 11 / 01 / 2016
Transaction ID : SA11A.461724
 Amount of Each Receipt this Period 1000.00
 Memo Item CONTRIBUTION

C. CHMIELINSKI, PIOTR, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1210 RESTON AVENUE
 City HERNDON State VA Zip Code 20170-2403
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) HPE Occupation (for Individual) IH ENGINEER
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 10 / 21 / 2016
Transaction ID : SA11A.447118
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	1200.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 635 OF 4311
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. CHMIELINSKI, PIOTR, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1210 RESTON AVENUE
 City HERNDON State VA Zip Code 20170-2403
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) HPE Occupation (for Individual) IH ENGINEER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 11 / 04 / 2016
Transaction ID : SA11A.479585
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

B. CHOATE, ARTHUR, B., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1390 S DIXIE HIGHWAY SUITE 2221 STE 2221
 City CORAL GABLES State FL Zip Code 33146-2946
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) ARTMARINE, INC. Occupation (for Individual) EXECUTIVE
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 10200.00

Date of Receipt 11 / 08 / 2016
Transaction ID : SA11A.467935
 Amount of Each Receipt this Period 2700.00
 Memo Item CONTRIBUTION

C. CHOUEST, GARY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address P.O. BOX 310
 City GALLIANO State LA Zip Code 70354-0310
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) GALLIANO MARINE Occupation (for Individual) OWNER
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 100000.00

Date of Receipt 10 / 28 / 2016
Transaction ID : SA11A.449665
 Amount of Each Receipt this Period 75000.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 77800.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 636 OF 4311		
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14	<input type="checkbox"/> 11c <input type="checkbox"/> 15	<input type="checkbox"/> 12 <input type="checkbox"/> 16

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NAME OF COMMITTEE (In Full)
Team Ryan

A. CHOWNING, GLENN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1645 WEST ORCHARD AVE.
 City HERMISTON State OR Zip Code 97838-6104
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt **10 / 22 / 2016**
Transaction ID : SA11A.446835
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

B. CHOWNING, GLENN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1645 WEST ORCHARD AVE.
 City HERMISTON State OR Zip Code 97838-6104
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt **11 / 04 / 2016**
Transaction ID : SA11A.472999
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

C. CHRISTIE, ADRIAN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1010 WEST LINCOLN ST
 City BIRMINGHAM State MI Zip Code 48009-5012
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) ST JOHN MACOMB HOSPITAL Occupation (for Individual) PHYSICIAN
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 330.00

Date of Receipt **11 / 02 / 2016**
Transaction ID : SA11A.466656
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	225.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 637 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. CHRIST, ARLYN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 417 S. MARTHA ST
 City STILLWATER State MN Zip Code 55082-5619
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 10 / 29 / 2016
Transaction ID : SA11A.461053
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

B. CHRISTEN, CRAIG, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 39 KINGSLEY CT
 City CROSSVILLE State TN Zip Code 38558-2991
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 275.00

Date of Receipt 10 / 26 / 2016
Transaction ID : SA11A.450788
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

C. CHRISTEN, CRAIG, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 39 KINGSLEY CT
 City CROSSVILLE State TN Zip Code 38558-2991
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 275.00

Date of Receipt 10 / 26 / 2016
Transaction ID : SA11A.450818
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	300.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 638 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. CHRISTEN, CRAIG, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 39 KINGSLEY CT
 City CROSSVILLE State TN Zip Code 38558-2991
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 275.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 01 / 2016
Transaction ID : SA11A.462496
 Amount of Each Receipt this Period
 25.00
 Memo Item
 CONTRIBUTION

B. CHRISTOPHER, DAVID, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1701 OLE CARRIAGE DRIVE
 City ATHENS State AL Zip Code 35613-2048
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) CDPA, PC Occupation (for Individual) CPA
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 412.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 20 / 2016
Transaction ID : SA11A.442093
 Amount of Each Receipt this Period
 75.00
 Memo Item
 CONTRIBUTION

C. CHRISTENSEN, DAVID, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO BOX 7
 City ALAMO State CA Zip Code 94507-0007
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) MILESTONE HOLDINGS Occupation (for Individual) CO-PRESIDENT
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 750.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 04 / 2016
Transaction ID : SA11A.473679
 Amount of Each Receipt this Period
 250.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	350.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 639 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
Team Ryan

A. CHRISTOPHER, HENRY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 713 CONTADORA
 City SAN ANTONIO State TX Zip Code 78258-4158
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) LAW OFFICES OF HENRY CHRISTOPHER Occupation (for Individual) ATTORNEY
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 450.00

Date of Receipt 11 / 07 / 2016
Transaction ID : SA11A.476191
 Amount of Each Receipt this Period 200.00
 Memo Item CONTRIBUTION

B. CHRISTOPHER, JOANNE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 358 MOHAWK RD.
 City RAYNHAM State MA Zip Code 02767-5273
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 575.00

Date of Receipt 10 / 21 / 2016
Transaction ID : SA11A.444530
 Amount of Each Receipt this Period 75.00
 Memo Item CONTRIBUTION

C. CHRISTOPHER, JOANNE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 358 MOHAWK RD.
 City RAYNHAM State MA Zip Code 02767-5273
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 575.00

Date of Receipt 10 / 26 / 2016
Transaction ID : SA11A.450824
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	325.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 640 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
A. CHRISTOPHER, JOANNE, , ,

Mailing Address 358 MOHAWK RD.

City RAYNHAM	State MA	Zip Code 02767-5273
-----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
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Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
575.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 26 / 2016

Transaction ID : SA11A.450841

Amount of Each Receipt this Period
50.00

Memo Item
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
B. CHRISTOPHER, JOANNE, , ,

Mailing Address 358 MOHAWK RD.

City RAYNHAM	State MA	Zip Code 02767-5273
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
575.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 01 / 2016

Transaction ID : SA11A.462774

Amount of Each Receipt this Period
75.00

Memo Item
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
C. CHRISTMAN, NEIL, , ,

Mailing Address 6031 BROOKHAVEN CIRCLE

City JOHNS CREEK	State GA	Zip Code 30097-2020
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
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Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
1000.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 03 / 2016

Transaction ID : SA11A.468521

Amount of Each Receipt this Period
1000.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	1125.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 641 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. CHRISTOPHER, ROBERT, A., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 27891 N. 100TH WAY
 City SCOTTSDALE State AZ Zip Code 85262-8929
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1480.00

Date of Receipt 10 / 26 / 2016
Transaction ID : SA11A.451050
 Amount of Each Receipt this Period 110.00
 Memo Item CONTRIBUTION

B. CHRISTOPHER, ROBERT, A., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 27891 N. 100TH WAY
 City SCOTTSDALE State AZ Zip Code 85262-8929
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1480.00

Date of Receipt 10 / 27 / 2016
Transaction ID : SA11A.456667
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

C. CHRISTOPHER, ROBERT, A., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 27891 N. 100TH WAY
 City SCOTTSDALE State AZ Zip Code 85262-8929
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1480.00

Date of Receipt 10 / 27 / 2016
Transaction ID : SA11A.456668
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	310.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 642 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. CHRISTOPHER, ROBERT, A., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 27891 N. 100TH WAY
 City SCOTTSDALE State AZ Zip Code 85262-8929
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1480.00

Date of Receipt 11 / 04 / 2016
Transaction ID : SA11A.471393
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

B. CHRISTOPHER, ROBERT, A., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 27891 N. 100TH WAY
 City SCOTTSDALE State AZ Zip Code 85262-8929
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1480.00

Date of Receipt 11 / 04 / 2016
Transaction ID : SA11A.472334
 Amount of Each Receipt this Period 110.00
 Memo Item CONTRIBUTION

C. CHRISMAN, SUSAN, , MS.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 208 SUMMERTREE COURT
 City BOSSIER CITY State LA Zip Code 71111-5452
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SUSAN CHRISMAN Occupation (for Individual) SELF
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 525.00

Date of Receipt 10 / 28 / 2016
Transaction ID : SA11A.455737
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	260.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 643 OF 4311
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. CHRISTOPHER, THOMAS, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 23 SANDIA HEIGHTS DRIVE NE

City ALBUQUERQUE	State NM	Zip Code 87122-2009
---------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) INFORMATION REQUESTED PER BEST EFFORTS	Occupation (for Individual) INFORMATION REQUESTED PER BE
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Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	03	/	2016

Transaction ID : SA11A.465580

Amount of Each Receipt this Period
1000.00

Memo Item
CONTRIBUTION

B. CHRNELICH, WILLIAM, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 8 MANSION HILL DR

City EWING	State NJ	Zip Code 08628-2656
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
600.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	24	/	2016

Transaction ID : SA11A.445791

Amount of Each Receipt this Period
250.00

Memo Item
CONTRIBUTION

C. CHRNELICH, WILLIAM, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 8 MANSION HILL DR

City EWING	State NJ	Zip Code 08628-2656
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
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Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
600.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	05	/	2016

Transaction ID : SA11A.478885

Amount of Each Receipt this Period
250.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	1500.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 644 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. CHSMBERS, STAN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 7970 VIA CAPRI
 City LA JOLLA State CA Zip Code 92037-4042
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 600.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 23 / 2016
Transaction ID : SA11A.449637
 Amount of Each Receipt this Period
 250.00
 Memo Item
 CONTRIBUTION

B. CHSMBERS, STAN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 7970 VIA CAPRI
 City LA JOLLA State CA Zip Code 92037-4042
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 600.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 01 / 2016
Transaction ID : SA11A.463095
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION

C. CHUBB, BRUCE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3902 WILTON DR. SE
 City GRAND RAPIDS State MI Zip Code 49508-2687
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 31 / 2016
Transaction ID : SA11A.457749
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	450.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 645 OF 4311		
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14	<input type="checkbox"/> 11c <input type="checkbox"/> 15	<input type="checkbox"/> 12 <input type="checkbox"/> 16

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NAME OF COMMITTEE (In Full)
Team Ryan

A. CHUBB, BRUCE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3902 WILTON DR. SE
 City GRAND RAPIDS State MI Zip Code 49508-2687
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 31 / 2016
Transaction ID : SA11A.457757
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION

B. CHUBB, BRUCE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3902 WILTON DR. SE
 City GRAND RAPIDS State MI Zip Code 49508-2687
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 31 / 2016
Transaction ID : SA11A.457775
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION

C. CHUN, ANGELA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 182 CANON DRIVE
 City ORINDA State CA Zip Code 94563-2219
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 693.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 28 / 2016
Transaction ID : SA11A.456061
 Amount of Each Receipt this Period
 50.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	250.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 646 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
Team Ryan

A. CHUN, ANGELA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 182 CANON DRIVE
 City ORINDA State CA Zip Code 94563-2219
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 693.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 04 / 2016
Transaction ID : SA11A.473319
 Amount of Each Receipt this Period
 50.00
 Memo Item
 CONTRIBUTION

B. CICCONE, NICHOLAS, T., , JR
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 97 HARVARD STREET
 City MALDEN State MA Zip Code 02148-7902
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 700.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 24 / 2016
Transaction ID : SA11A.443814
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION

C. CICCONE, NICHOLAS, T., , JR
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 97 HARVARD STREET
 City MALDEN State MA Zip Code 02148-7902
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 700.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 08 / 2016
Transaction ID : SA11A.467990
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	250.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 647 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
Team Ryan

A. CILENTO, RODOLFO, , MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 178 EDGEWATER CIRCLE
 City SUNSET BEACH State NC Zip Code 28468-4412
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 26 / 2016
Transaction ID : SA11A.447747
 Amount of Each Receipt this Period
 150.00
 Memo Item
 CONTRIBUTION

B. CILLEY, PAULA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 330 TOWPATH LN
 City CHESHIRE State CT Zip Code 06410-3356
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 27 / 2016
Transaction ID : SA11A.456796
 Amount of Each Receipt this Period
 50.00
 Memo Item
 CONTRIBUTION

C. CILLEY, PAULA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 330 TOWPATH LN
 City CHESHIRE State CT Zip Code 06410-3356
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 27 / 2016
Transaction ID : SA11A.456807
 Amount of Each Receipt this Period
 50.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	250.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 648 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. CISSELL, ANNMARIE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 20045 W. 112TH CIRCLE
 City OLATHE State KS Zip Code 66061-8732
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 225.00

Date of Receipt **10 / 31 / 2016**
Transaction ID : SA11A.458039
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

B. CLAASEN, JOHAN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO BOX 81463
 City SAN DIEGO State CA Zip Code 92138-1463
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) CLAASEN GROUP, INC. Occupation (for Individual) OWNER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt **11 / 07 / 2016**
Transaction ID : SA11A.475478
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

C. CLAIBORNE, WALTER, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2509 PINE STREET
 City NEW ORLEANS State LA Zip Code 70125-4048
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) REAL ESTATE
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt **10 / 25 / 2016**
Transaction ID : SA11A.447296
 Amount of Each Receipt this Period 150.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	275.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 649 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
-----------------------------	-----------------------------	-----------------------------

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NAME OF COMMITTEE (In Full)
Team Ryan

A. CLARDY, ANN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 7909 KIEKE RD
 City BURTON State TX Zip Code 77835-5234
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 270.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 21 / 2016
Transaction ID : SA11A.444226
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

B. CLARDY, ANN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 7909 KIEKE RD
 City BURTON State TX Zip Code 77835-5234
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 270.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 29 / 2016
Transaction ID : SA11A.460535
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

C. CLARDY, ANN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 7909 KIEKE RD
 City BURTON State TX Zip Code 77835-5234
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 270.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 04 / 2016
Transaction ID : SA11A.473024
 Amount of Each Receipt this Period 5.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	55.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 650 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. CLARDY, ANN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 7909 KIEKE RD
 City BURTON State TX Zip Code 77835-5234
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 270.00

Date of Receipt
 11 / 07 / 2016
Transaction ID : SA11A.475202
 Amount of Each Receipt this Period 5.00
 Memo Item CONTRIBUTION

B. CLARDY, ANN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 7909 KIEKE RD
 City BURTON State TX Zip Code 77835-5234
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 270.00

Date of Receipt
 11 / 07 / 2016
Transaction ID : SA11A.475203
 Amount of Each Receipt this Period 5.00
 Memo Item CONTRIBUTION

C. CLARDY, ANN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 7909 KIEKE RD
 City BURTON State TX Zip Code 77835-5234
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 270.00

Date of Receipt
 11 / 06 / 2016
Transaction ID : SA11A.477161
 Amount of Each Receipt this Period 5.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶ 15.00
TOTAL This Period (last page this line number only).....▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 651 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. CLARDY, ANN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 7909 KIEKE RD
 City BURTON State TX Zip Code 77835-5234
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 270.00

Date of Receipt
 11 / 04 / 2016
Transaction ID : SA11A.479681
 Amount of Each Receipt this Period 10.00
 Memo Item CONTRIBUTION

B. CLARKE, BRIAN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5025 GRAND AVE.
 City WESTERN SPRINGS State IL Zip Code 60558-1823
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) KENSINGTON INTERNATIONAL Occupation (for Individual) SEARCH CONSULTANT
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt
 10 / 27 / 2016
Transaction ID : SA11A.454131
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

C. CLARKE, BRIAN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5025 GRAND AVE.
 City WESTERN SPRINGS State IL Zip Code 60558-1823
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) KENSINGTON INTERNATIONAL Occupation (for Individual) SEARCH CONSULTANT
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt
 10 / 27 / 2016
Transaction ID : SA11A.454133
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	510.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 652 OF 4311
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. CLARKE, BRIAN, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 5025 GRAND AVE.

City WESTERN SPRINGS	State IL	Zip Code 60558-1823
-------------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) KENSINGTON INTERNATIONAL	Occupation (for Individual) SEARCH CONSULTANT
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	04	/	2016

Transaction ID : SA11A.473590

Amount of Each Receipt this Period
100.00

Memo Item CONTRIBUTION

B. CLARK, BRUCE, M., MR.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 35 ALAN

City DANBURY	State CT	Zip Code 06810-8362
-----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
400.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	25	/	2016

Transaction ID : SA11A.448102

Amount of Each Receipt this Period
25.00

Memo Item CONTRIBUTION

C. CLARK, BRUCE, M., MR.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 35 ALAN

City DANBURY	State CT	Zip Code 06810-8362
-----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
400.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	29	/	2016

Transaction ID : SA11A.460601

Amount of Each Receipt this Period
25.00

Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	150.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 653 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
Team Ryan

A. CLARK, BRUCE, M., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 35 ALAN
 City DANBURY State CT Zip Code 06810-8362
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt
 11 / 04 / 2016
Transaction ID : SA11A.471876
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

B. CLARK, CAROL, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1421 TIMBRE MESA
 City FLORISSANT State CO Zip Code 80816-8675
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 217.00

Date of Receipt
 10 / 30 / 2016
Transaction ID : SA11A.460219
 Amount of Each Receipt this Period 32.00
 Memo Item CONTRIBUTION

C. CLARK, CAROL, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1421 TIMBRE MESA
 City FLORISSANT State CO Zip Code 80816-8675
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 217.00

Date of Receipt
 11 / 04 / 2016
Transaction ID : SA11A.473866
 Amount of Each Receipt this Period 32.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	89.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 654 OF 4311
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. CLARK, CHAD, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 1902 SPRUCE HOLLOW ROAD

City ALUM BANK	State PA	Zip Code 15521-9216
-------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NOT EMPLOYED	Occupation (for Individual) NOT EMPLOYED
---	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
685.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		28		2016

Transaction ID : SA11A.455081

Amount of Each Receipt this Period
50.00

Memo Item
CONTRIBUTION

B. CLARK, CHAD, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 1902 SPRUCE HOLLOW ROAD

City ALUM BANK	State PA	Zip Code 15521-9216
-------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NOT EMPLOYED	Occupation (for Individual) NOT EMPLOYED
---	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
685.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		28		2016

Transaction ID : SA11A.455082

Amount of Each Receipt this Period
50.00

Memo Item
CONTRIBUTION

C. CLARK, CHAD, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 1902 SPRUCE HOLLOW ROAD

City ALUM BANK	State PA	Zip Code 15521-9216
-------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NOT EMPLOYED	Occupation (for Individual) NOT EMPLOYED
---	---

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
685.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		28		2016

Transaction ID : SA11A.455089

Amount of Each Receipt this Period
25.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	125.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 655 OF 4311
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. CLARK, CHAD, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1902 SPRUCE HOLLOW ROAD

City ALUM BANK	State PA	Zip Code 15521-9216
-------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NOT EMPLOYED	Occupation (for Individual) NOT EMPLOYED
---	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
685.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		28		2016

Transaction ID : SA11A.455994

Amount of Each Receipt this Period
50.00

Memo Item
CONTRIBUTION

B. CLARK, CHAD, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1902 SPRUCE HOLLOW ROAD

City ALUM BANK	State PA	Zip Code 15521-9216
-------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NOT EMPLOYED	Occupation (for Individual) NOT EMPLOYED
---	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
685.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11		04		2016

Transaction ID : SA11A.472809

Amount of Each Receipt this Period
50.00

Memo Item
CONTRIBUTION

C. CLARK, CHAD, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1902 SPRUCE HOLLOW ROAD

City ALUM BANK	State PA	Zip Code 15521-9216
-------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NOT EMPLOYED	Occupation (for Individual) NOT EMPLOYED
---	---

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
685.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11		07		2016

Transaction ID : SA11A.475760

Amount of Each Receipt this Period
25.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	125.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 656 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. CLARK, DENVER, D., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 13223 PEBBLE RIDGE DRIVE
 City SAINT LOUIS State MO Zip Code 63141-8037
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 11 / 03 / 2016
Transaction ID : SA11A.465499
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

B. CLARKE, EDWIN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2163 GREENVIEW DRIVE
 City ANN ARBOR State MI Zip Code 48103-6111
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 10 / 27 / 2016
Transaction ID : SA11A.453414
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

C. CLARK, ELMO, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2301 BOBWHITE DRIVE
 City ODESSA State TX Zip Code 79761-2234
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 540.00

Date of Receipt 11 / 02 / 2016
Transaction ID : SA11A.465719
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	600.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 657 OF 4311
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. CLARK, ELMO, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 2301 BOBWHITE DRIVE

City ODESSA	State TX	Zip Code 79761-2234
----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
540.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11		07		2016

Transaction ID : SA11A.479888

Amount of Each Receipt this Period
20.00

Memo Item
CONTRIBUTION

B. CLARK, ELMO, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 2301 BOBWHITE DRIVE

City ODESSA	State TX	Zip Code 79761-2234
----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
540.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11		07		2016

Transaction ID : SA11A.479889

Amount of Each Receipt this Period
20.00

Memo Item
CONTRIBUTION

C. CLARK, FRANK, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 400 CLUBHOUSE VISTA ROAD, UNIT 104
TA 104

City ALTOONA	State FL	Zip Code 32702-9660
-----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
275.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		23		2016

Transaction ID : SA11A.446513

Amount of Each Receipt this Period
50.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	90.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 658 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
Team Ryan

A. CLARK, FRANK, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 400 CLUBHOUSE VISTA ROAD, UNIT 104
 TA 104
 City ALTOONA State FL Zip Code 32702-9660
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 275.00

Date of Receipt 11 / 03 / 2016
Transaction ID : SA11A.465598
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

B. CLARK, HAROLD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 501 ACADEMY ROAD
 City STARKVILLE State MS Zip Code 39759-4047
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) C C CLARK Occupation (for Individual) EXECUTIVE
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 650.00

Date of Receipt 10 / 20 / 2016
Transaction ID : SA11A.442412
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

C. CLARK, HAROLD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 501 ACADEMY ROAD
 City STARKVILLE State MS Zip Code 39759-4047
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) C C CLARK Occupation (for Individual) EXECUTIVE
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 650.00

Date of Receipt 10 / 25 / 2016
Transaction ID : SA11A.448669
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	300.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 659 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. CLARK, JERALD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3530 T STREET NW
 City WASHINGTON State DC Zip Code 20007-2217
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) CLARK ASSOCIATES ARCHITECTS Occupation (for Individual) ARCHITECT
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 550.00

Date of Receipt
 11 / 02 / 2016
Transaction ID : SA11A.466001
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION

B. CLARK, JERALD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3530 T STREET NW
 City WASHINGTON State DC Zip Code 20007-2217
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) CLARK ASSOCIATES ARCHITECTS Occupation (for Individual) ARCHITECT
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 550.00

Date of Receipt
 11 / 02 / 2016
Transaction ID : SA11A.466011
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION

C. CLARK, JOANNE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 12826 ROSE DRIVE
 City WHITTIER State CA Zip Code 90601-2431
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) PARKVILLE INSURANCE Occupation (for Individual) RECEPTIONIST
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 750.00

Date of Receipt
 10 / 24 / 2016
Transaction ID : SA11A.449175
 Amount of Each Receipt this Period
 500.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	700.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 660 OF 4311
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. CLARK, JONATHAN, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 130 PECKSLAND RD
City GREENWICH State CT Zip Code 06831-3652
FEC ID number of contributing federal political committee. **C**
Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 2000.00

Date of Receipt **10 / 22 / 2016**
Transaction ID : SA11A.446832
Amount of Each Receipt this Period 1000.00
 Memo Item CONTRIBUTION

B. CLARK, JOY, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 6680 TURNERS COVE RD
City CUMMING State GA Zip Code 30041-4745
FEC ID number of contributing federal political committee. **C**
Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 235.00

Date of Receipt **11 / 04 / 2016**
Transaction ID : SA11A.474260
Amount of Each Receipt this Period 30.00
 Memo Item CONTRIBUTION

C. CLARK, PHILIP, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 7576 ROCKPORT CIRCLE
City LAKE WORTH State FL Zip Code 33467-7306
FEC ID number of contributing federal political committee. **C**
Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 354.00

Date of Receipt **10 / 30 / 2016**
Transaction ID : SA11A.460148
Amount of Each Receipt this Period 59.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶ 1089.00
TOTAL This Period (last page this line number only).....▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 661 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. CLARK, PHILIP, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 7576 ROCKPORT CIRCLE

City LAKE WORTH	State FL	Zip Code 33467-7306
--------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
354.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 04 / 2016

Transaction ID : SA11A.473717

Amount of Each Receipt this Period
59.00

Memo Item
CONTRIBUTION

B. CLARK, TERRY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 225 TRAFALGAR LN

City SAN CLEMENTE	State CA	Zip Code 92672-5482
----------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) CATALYST MINISTRIES	Occupation (for Individual) MUSICIAN
--	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 04 / 2016

Transaction ID : SA11A.473927

Amount of Each Receipt this Period
50.00

Memo Item
CONTRIBUTION

C. CLARK, TERRY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 225 TRAFALGAR LN

City SAN CLEMENTE	State CA	Zip Code 92672-5482
----------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) CATALYST MINISTRIES	Occupation (for Individual) MUSICIAN
--	---

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 06 / 2016

Transaction ID : SA11A.477802

Amount of Each Receipt this Period
25.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	134.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 662 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. CLARK, WILLIAM, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 182 VILLA POINTE DRIVE

City SPRINGBORO	State OH	Zip Code 45066-8314
--------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
11		04		2016

Transaction ID : SA11A.473162

Amount of Each Receipt this Period
50.00

Memo Item
CONTRIBUTION

B. CLARK, WILLIAM, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 182 VILLA POINTE DRIVE

City SPRINGBORO	State OH	Zip Code 45066-8314
--------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
11		07		2016

Transaction ID : SA11A.476348

Amount of Each Receipt this Period
25.00

Memo Item
CONTRIBUTION

C. CLARK, WILLIAM, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 182 VILLA POINTE DRIVE

City SPRINGBORO	State OH	Zip Code 45066-8314
--------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
250.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
11		07		2016

Transaction ID : SA11A.476352

Amount of Each Receipt this Period
25.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	100.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 663 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. CLARY, THOMAS, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 121 SE MOJAVE WAY
 City LAKE CITY State FL Zip Code 32025-3920
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) CBI UNLIMITED, INC. Occupation (for Individual) PRESIDENT
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 270.00

Date of Receipt 10 / 27 / 2016
Transaction ID : SA11A.453605
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

B. CLASSEN, CORYENE, R., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 9225 CASCADE AVENUE APT 1218
 City WEST DES MOINES State IA Zip Code 50266-8595
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 375.00

Date of Receipt 10 / 28 / 2016
Transaction ID : SA11A.454702
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

C. CLASS, WALTER, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 51 TURKEY HILL RD
 City WEST NEWBURY State MA Zip Code 01985-2008
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 700.00

Date of Receipt 11 / 04 / 2016
Transaction ID : SA11A.471853
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	450.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 664 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. CLAWSON, MARK, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 443 WILCHESTER BLVD
 City HOUSTON State TX Zip Code 77079-7328
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) BP Occupation (for Individual) VP - OBO PROJECTS
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt 10 / 22 / 2016
Transaction ID : SA11A.446813
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

B. CLAWSON, MARK, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 443 WILCHESTER BLVD
 City HOUSTON State TX Zip Code 77079-7328
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) BP Occupation (for Individual) VP - OBO PROJECTS
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt 10 / 26 / 2016
Transaction ID : SA11A.450705
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

C. CLAWSON, MARK, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 443 WILCHESTER BLVD
 City HOUSTON State TX Zip Code 77079-7328
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) BP Occupation (for Individual) VP - OBO PROJECTS
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt 11 / 04 / 2016
Transaction ID : SA11A.479366
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶ 300.00
TOTAL This Period (last page this line number only).....▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 665 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. CLAWSON, MARK, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 443 WILCHESTER BLVD

City HOUSTON	State TX	Zip Code 77079-7328
-----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) BP	Occupation (for Individual) VP - OBO PROJECTS
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
400.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	04	/	2016

Transaction ID : SA11A.479370

Amount of Each Receipt this Period
100.00

Memo Item
CONTRIBUTION

B. CLAYPOOL, PAM, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 12448 A BENTBROOK DRIVE

City CHESTERLAND	State OH	Zip Code 44026-2459
---------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) AIRGAS USA LLC	Occupation (for Individual) DIVISION PRESIDENT
---	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1802.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	24	/	2016

Transaction ID : SA11A.446080

Amount of Each Receipt this Period
50.00

Memo Item
CONTRIBUTION

C. CLAYPOOL, PAM, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 12448 A BENTBROOK DRIVE

City CHESTERLAND	State OH	Zip Code 44026-2459
---------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) AIRGAS USA LLC	Occupation (for Individual) DIVISION PRESIDENT
---	---

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
1802.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	31	/	2016

Transaction ID : SA11A.457475

Amount of Each Receipt this Period
25.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	175.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 666 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
Team Ryan

A. CLAYPOOL, PAM, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 12448 A BENTBROOK DRIVE
 City CHESTERLAND State OH Zip Code 44026-2459
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) AIRGAS USA LLC Occupation (for Individual) DIVISION PRESIDENT
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1802.00

Date of Receipt **11 / 05 / 2016**
Transaction ID : SA11A.478927
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

B. CLAYPOOL, PAM, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 12448 A BENTBROOK DRIVE
 City CHESTERLAND State OH Zip Code 44026-2459
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) AIRGAS USA LLC Occupation (for Individual) DIVISION PRESIDENT
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1802.00

Date of Receipt **11 / 05 / 2016**
Transaction ID : SA11A.478928
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

C. CLAYTON JR, WILLIAM, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 307 N LEE ST
 City FALLS CHURCH State VA Zip Code 22046-3233
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt **10 / 27 / 2016**
Transaction ID : SA11A.453879
 Amount of Each Receipt this Period 75.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	125.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 667 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. CLAYTON JR, WILLIAM, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 307 N LEE ST
 City FALLS CHURCH State VA Zip Code 22046-3233
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt
 11 / 04 / 2016
Transaction ID : SA11A.470932
 Amount of Each Receipt this Period 75.00
 Memo Item CONTRIBUTION

B. CLAYTON, WILLIAM, R., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1514 SILO COURT
 City MANASQUAN State NJ Zip Code 08736-2225
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 700.00

Date of Receipt
 11 / 01 / 2016
Transaction ID : SA11A.461675
 Amount of Each Receipt this Period 500.00
 Memo Item CONTRIBUTION

C. CLEMENTE, ANDREW, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO BOX 8
 City WEST SAND LAKE State NY Zip Code 12196-0008
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) INFORMATION REQUESTED PER BEST EFFORTS Occupation (for Individual) INFORMATION REQUESTED PER BEST EFFORTS
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt
 10 / 30 / 2016
Transaction ID : SA11A.460057
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	675.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 668 OF 4311
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. CLEMENTS, BRUCE, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1614 NORFOLK
C

City HOUSTON State TX Zip Code 77006-5296

FEC ID number of contributing federal political committee. C

Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1050.00

Date of Receipt
11 / 01 / 2016
Transaction ID : SA11A.467258

Amount of Each Receipt this Period
100.00

Memo Item CONTRIBUTION

B. CLEMENTS, BRUCE, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1614 NORFOLK
C

City HOUSTON State TX Zip Code 77006-5296

FEC ID number of contributing federal political committee. C

Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1050.00

Date of Receipt
11 / 07 / 2016
Transaction ID : SA11A.475868

Amount of Each Receipt this Period
250.00

Memo Item CONTRIBUTION

C. CLEMENTS, MILTON, G., ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1512 GOLF CLUB EXT

City DOUGLAS State GA Zip Code 31533-8010

FEC ID number of contributing federal political committee. C

Name of Employer (for Individual) INFORMATION REQUESTED PER BEST EFFORTS Occupation (for Individual) INFORMATION REQUESTED PER BEST EFFORTS

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
440.00

Date of Receipt
11 / 01 / 2016
Transaction ID : SA11A.461851

Amount of Each Receipt this Period
190.00

Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 540.00

TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 669 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. CLEMONS, BARBARA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2195 SPRINGMEADOW DRIVE
 City SPRING HILL State FL Zip Code 34606-3769
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 235.00

Date of Receipt 11 / 03 / 2016
Transaction ID : SA11A.465570
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

B. CLEVELAND, CHARLES, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3603 THOMAS AVE
 City MONTGOMERY State AL Zip Code 36111-2013
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 550.00

Date of Receipt 11 / 01 / 2016
Transaction ID : SA11A.462374
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

C. CLIFTON, MARY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 45230 FLINTLOCK CT
 City HOLLYWOOD State MD Zip Code 20636-2860
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 450.00

Date of Receipt 10 / 24 / 2016
Transaction ID : SA11A.445721
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	150.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 670 OF 4311
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. CLIFTON, MARY, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 45230 FLINTLOCK CT

City HOLLYWOOD	State MD	Zip Code 20636-2860
-------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
450.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	06	/	2016

Transaction ID : SA11A.478286

Amount of Each Receipt this Period
25.00

Memo Item
CONTRIBUTION

B. CLIFTON, MARY, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 45230 FLINTLOCK CT

City HOLLYWOOD	State MD	Zip Code 20636-2860
-------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
450.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	05	/	2016

Transaction ID : SA11A.479231

Amount of Each Receipt this Period
25.00

Memo Item
CONTRIBUTION

C. CLINARD, RALPH, HAYNES, MR.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 3306 CHARTREUSE WAY

City HOUSTON	State TX	Zip Code 77082-6857
-----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
211.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	23	/	2016

Transaction ID : SA11A.446468

Amount of Each Receipt this Period
12.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	62.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 671 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. CLINARD, RALPH, HAYNES, MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3306 CHARTREUSE WAY
 City HOUSTON State TX Zip Code 77082-6857
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 211.00

Date of Receipt 10 / 27 / 2016
Transaction ID : SA11A.453441
 Amount of Each Receipt this Period 12.00
 Memo Item CONTRIBUTION

B. CLINE, DAVID, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4641 GREENBRIER MTN. RD
 City PANTHER State WV Zip Code 24872-7605
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) ROCKNROLL COAL CO. Occupation (for Individual) COAL MINER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 11 / 07 / 2016
Transaction ID : SA11A.475724
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

C. CLINTON, JOHN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 111 S WASHINGTON POB 879
 City BROWNSVILLE State TN Zip Code 38012-0879
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) INSOUTH BANK Occupation (for Individual) BANKER
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt 10 / 25 / 2016
Transaction ID : SA11A.447835
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	512.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 672 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. CLINTON, JOHN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 111 S WASHINGTON POB 879
 City BROWNSVILLE State TN Zip Code 38012-0879
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) INSOUTH BANK Occupation (for Individual) BANKER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt 10 / 25 / 2016
Transaction ID : SA11A.447837
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

B. CLINTON, JOHN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 111 S WASHINGTON POB 879
 City BROWNSVILLE State TN Zip Code 38012-0879
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) INSOUTH BANK Occupation (for Individual) BANKER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt 11 / 02 / 2016
Transaction ID : SA11A.466648
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

C. CLINTON, JOHN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 111 S WASHINGTON POB 879
 City BROWNSVILLE State TN Zip Code 38012-0879
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) INSOUTH BANK Occupation (for Individual) BANKER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt 11 / 02 / 2016
Transaction ID : SA11A.466649
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	750.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 673 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. CLOSE, ARMON, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 396 DAYLILY LANE
 City LINCOLN State CA Zip Code 95648-8170
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 325.00

Date of Receipt 10 / 31 / 2016
Transaction ID : SA11A.458529
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

B. CLOUGH, ROGER, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 521 BLACK BEAR LP
 City ALBUQUERQUE State NM Zip Code 87122-1801
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 10 / 26 / 2016
Transaction ID : SA11A.451221
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

C. CLOUGH, ROGER, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 521 BLACK BEAR LP
 City ALBUQUERQUE State NM Zip Code 87122-1801
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 10 / 28 / 2016
Transaction ID : SA11A.461321
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶ 125.00
TOTAL This Period (last page this line number only).....▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 674 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. CLUMPMER, JON, M., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4249 BAY VIEW DRIVE
 City STURGEON BAY State WI Zip Code 54235-9097
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 425.00

Date of Receipt 10 / 31 / 2016
Transaction ID : SA11A.458549
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

B. CLUMPMER, JON, M., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4249 BAY VIEW DRIVE
 City STURGEON BAY State WI Zip Code 54235-9097
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 425.00

Date of Receipt 11 / 04 / 2016
Transaction ID : SA11A.472033
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

C. CLYMER, LUDWICK, M., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 51 OUTERBRIDGE CIRCLE
 City HILTON HEAD ISLAND State SC Zip Code 29926-2915
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt 10 / 25 / 2016
Transaction ID : SA11A.447360
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	225.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 675 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
Team Ryan

A. CO-TRUSTEE, JAMES, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 11545 N. PA BA SHAN TRAIL
 City CHARLEVOIX State MI Zip Code 49720-
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt **10 / 25 / 2016**
Transaction ID : SA11A.448869
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

B. CO-TRUSTEE, JAMES, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 11545 N. PA BA SHAN TRAIL
 City CHARLEVOIX State MI Zip Code 49720-
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt **11 / 04 / 2016**
Transaction ID : SA11A.472627
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

C. COBURN, RONALD, O., MR., JR.
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1552 JESSE LANE
 City GOLDEN State CO Zip Code 80403-8068
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 750.00

Date of Receipt **10 / 28 / 2016**
Transaction ID : SA11A.454719
 Amount of Each Receipt this Period 200.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	400.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 676 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. COBURN, RONALD, O., MR., JR.
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1552 JESSE LANE
 City GOLDEN State CO Zip Code 80403-8068
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 750.00

Date of Receipt 11 / 04 / 2016
Transaction ID : SA11A.467518
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

B. COCKE, DONNA, J., MRS.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 952 8TH. ST.
 City HERMOSA BEACH State CA Zip Code 90254-4309
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 11 / 04 / 2016
Transaction ID : SA11A.473830
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

C. COCKROFT, STEPHEN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 29060 CR 388
 City KERSEY State CO Zip Code 80644-9518
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) OGILVY IRRIGATION & LAND CO Occupation (for Individual) DITCH SUPERVISOR
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 225.00

Date of Receipt 10 / 24 / 2016
Transaction ID : SA11A.449228
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	375.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 677 OF 4311
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. COCKROFT, STEPHEN, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 29060 CR 388

City KERSEY	State CO	Zip Code 80644-9518
----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) OGILVY IRRIGATION & LAND CO	Occupation (for Individual) DITCH SUPERVISOR
--	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
225.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		24		2016

Transaction ID : SA11A.449234

Amount of Each Receipt this Period
25.00

Memo Item
CONTRIBUTION

B. COCKROFT, STEPHEN, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 29060 CR 388

City KERSEY	State CO	Zip Code 80644-9518
----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) OGILVY IRRIGATION & LAND CO	Occupation (for Individual) DITCH SUPERVISOR
--	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
225.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		25		2016

Transaction ID : SA11A.451505

Amount of Each Receipt this Period
25.00

Memo Item
CONTRIBUTION

C. COCKROFT, STEPHEN, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 29060 CR 388

City KERSEY	State CO	Zip Code 80644-9518
----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) OGILVY IRRIGATION & LAND CO	Occupation (for Individual) DITCH SUPERVISOR
--	---

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
225.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11		02		2016

Transaction ID : SA11A.469759

Amount of Each Receipt this Period
25.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	75.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 678 OF 4311
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
Team Ryan

A. CODDINGTON, FREDERICK, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 141 OAKWOOR DR

City MURRAY HILL	State NJ	Zip Code 07974-2116
---------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) CARTI,INC.	Occupation (for Individual) CONSULTANT
---	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
500.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
11		04		2016

Transaction ID : SA11A.473852

Amount of Each Receipt this Period
250.00

Memo Item
CONTRIBUTION

B. CODINA, ARMANDO, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 50 CASUARINA CONCOURSE

City CORAL GABLES	State FL	Zip Code 33143-6510
----------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) CODINA PARTNERS LLC	Occupation (for Individual) EXECUTIVE CHAIRMAN
--	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
60000.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
10		24		2016

Transaction ID : SA11A.443445

Amount of Each Receipt this Period
50000.00

Memo Item
CONTRIBUTION

C. CODRINGTON, MELITA, S., ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 200 SWEET BAY AVENUE

City NEW SMYRNA BEACH	State FL	Zip Code 32168-7968
--------------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
300.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
11		09		2016

Transaction ID : SA11A.468183

Amount of Each Receipt this Period
200.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	50450.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 679 OF 4311
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. CODY, JAMES, J., , JR.
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 61 ROXBURY RD

City FRANKLIN SQUARE	State NY	Zip Code 11010-4430
-------------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
300.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		20		2016

Transaction ID : SA11A.442494

Amount of Each Receipt this Period
100.00

Memo Item
CONTRIBUTION

B. CODY, JAMES, J., , JR.
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 61 ROXBURY RD

City FRANKLIN SQUARE	State NY	Zip Code 11010-4430
-------------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
300.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		20		2016

Transaction ID : SA11A.442497

Amount of Each Receipt this Period
100.00

Memo Item
CONTRIBUTION

C. COFFEY, LOUISE, J., ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 180 7TH AVENUE S

City NAPLES	State FL	Zip Code 34102-6857
----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
10000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		27		2016

Transaction ID : SA11A.452307

Amount of Each Receipt this Period
10000.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	10200.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 680 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. COGAN, JAMES, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1422 EUCLID AVE. #900
 City CLEVELAND State OH Zip Code 44115-2001
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) INFORMATION REQUESTED PER BEST EFFORTS Occupation (for Individual) INFORMATION REQUESTED PER BE
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 300.00

Date of Receipt 11 / 07 / 2016
Transaction ID : SA11A.479998
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

B. COHEE, GEORGE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 53 12TH AVE
 City MILTON State WA Zip Code 98354-6500
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 500.00

Date of Receipt 10 / 25 / 2016
Transaction ID : SA11A.448907
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

C. COHEE, GEORGE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 53 12TH AVE
 City MILTON State WA Zip Code 98354-6500
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 500.00

Date of Receipt 11 / 04 / 2016
Transaction ID : SA11A.470964
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶ 150.00
TOTAL This Period (last page this line number only).....▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 681 OF 4311
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. COHEN, EILEEN, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 20421 VIA SANSOVINO

City PORTER RANCH	State CA	Zip Code 91326-4408
----------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) SELF-EMPLOYED	Occupation (for Individual) NETWORK MARKETING
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
302.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		21		2016

Transaction ID : SA11A.444572

Amount of Each Receipt this Period
25.00

Memo Item
CONTRIBUTION

B. COHEN, EILEEN, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 20421 VIA SANSOVINO

City PORTER RANCH	State CA	Zip Code 91326-4408
----------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) SELF-EMPLOYED	Occupation (for Individual) NETWORK MARKETING
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
302.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		31		2016

Transaction ID : SA11A.458681

Amount of Each Receipt this Period
25.00

Memo Item
CONTRIBUTION

C. COHEN, EILEEN, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 20421 VIA SANSOVINO

City PORTER RANCH	State CA	Zip Code 91326-4408
----------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) SELF-EMPLOYED	Occupation (for Individual) NETWORK MARKETING
--	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
302.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11		04		2016

Transaction ID : SA11A.472516

Amount of Each Receipt this Period
25.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	75.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 682 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
-----------------------------	-----------------------------	-----------------------------

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NAME OF COMMITTEE (In Full)
Team Ryan

A. COHEN, LOUIS, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 13 MERRY HILL CT
 City BALTIMORE State MD Zip Code 21208-1746
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Occupation (for Individual)
 PIRORITY 1 AUTO GROUP AUTO DEALER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 23 / 2016
Transaction ID : SA11A.446514
 Amount of Each Receipt this Period
 500.00
 Memo Item
 CONTRIBUTION

B. COHN, FLORENCE, F., MS.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 40 W 3RD AVENUE APT 304
 City SAN MATEO State CA Zip Code 94402-1564
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Occupation (for Individual)
 RETIRED RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1050.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 07 / 2016
Transaction ID : SA11A.467803
 Amount of Each Receipt this Period
 500.00
 Memo Item
 CONTRIBUTION

C. COHN, HEIMAN, , MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1215 EAST AVENUE APT. 1
 City VICKSBURG State MS Zip Code 39180-3957
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Occupation (for Individual)
 NONE RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 28 / 2016
Transaction ID : SA11A.454783
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	1100.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 683 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
-----------------------------	-----------------------------	-----------------------------

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NAME OF COMMITTEE (In Full)
Team Ryan

A. COIL, JOHN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2101 NORTH MAIN ST
 SUITE E
 City SANTA ANA State CA Zip Code 92706-2763
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 31 / 2016
Transaction ID : SA11A.458006
 Amount of Each Receipt this Period
 250.00
 Memo Item
 CONTRIBUTION

B. COLBRY, BRIAN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO BOX 205
 City FRENCHTOWN State NJ Zip Code 08825-0205
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 325.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 27 / 2016
Transaction ID : SA11A.452504
 Amount of Each Receipt this Period
 25.00
 Memo Item
 CONTRIBUTION

C. COLBRY, BRIAN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO BOX 205
 City FRENCHTOWN State NJ Zip Code 08825-0205
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 325.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 27 / 2016
Transaction ID : SA11A.452505
 Amount of Each Receipt this Period
 25.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	300.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 684 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. COLBRY, BRIAN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO BOX 205
 City FRENCHTOWN State NJ Zip Code 08825-0205
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 325.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 02 / 2016
Transaction ID : SA11A.466833
 Amount of Each Receipt this Period
 25.00
 Memo Item
 CONTRIBUTION

B. COLBRY, BRIAN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO BOX 205
 City FRENCHTOWN State NJ Zip Code 08825-0205
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 325.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 02 / 2016
Transaction ID : SA11A.466836
 Amount of Each Receipt this Period
 25.00
 Memo Item
 CONTRIBUTION

C. COLDIRON, DEAN, , MR., JR
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1285 SAINT MARK CT
 City LOS ALTOS State CA Zip Code 94024-7040
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) ROD TECH Occupation (for Individual) SALES
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 550.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 21 / 2016
Transaction ID : SA11A.481009
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	150.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 685 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. COLDIRON, MICHELE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1065 MIRAMONTE AVE
 City LOS ALTOS State CA Zip Code 94024-5028
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 585.00

Date of Receipt 10 / 29 / 2016
Transaction ID : SA11A.461132
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

B. COLDIRON, MICHELE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1065 MIRAMONTE AVE
 City LOS ALTOS State CA Zip Code 94024-5028
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 585.00

Date of Receipt 11 / 04 / 2016
Transaction ID : SA11A.471951
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

C. COLE, ALLAN, C., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4561 WESTCHESTER LANE
 City PADUCAH State KY Zip Code 42003-8832
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 275.00

Date of Receipt 10 / 20 / 2016
Transaction ID : SA11A.433455
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 200.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 686 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. COLE, ALLAN, C., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4561 WESTCHESTER LANE
 City PADUCAH State KY Zip Code 42003-8832
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 275.00

Date of Receipt: 10 / 21 / 2016
Transaction ID : SA11A.443547
 Amount of Each Receipt this Period: 100.00
 Memo Item CONTRIBUTION

B. COLE, ALLAN, C., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4561 WESTCHESTER LANE
 City PADUCAH State KY Zip Code 42003-8832
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 275.00

Date of Receipt: 11 / 03 / 2016
Transaction ID : SA11A.465325
 Amount of Each Receipt this Period: 25.00
 Memo Item CONTRIBUTION

C. COLE, CRAIG, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 14002 SE 259 TH ST
 City KENT State WA Zip Code 98042-3615
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 307.00

Date of Receipt: 10 / 27 / 2016
Transaction ID : SA11A.452887
 Amount of Each Receipt this Period: 25.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶ 150.00
TOTAL This Period (last page this line number only).....▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 687 OF 4311
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. COLE, CRAIG, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 14002 SE 259 TH ST
 City KENT State WA Zip Code 98042-3615
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 307.00

Date of Receipt 11 / 04 / 2016
Transaction ID : SA11A.472055
 Amount of Each Receipt this Period 42.00
 Memo Item CONTRIBUTION

B. COLE, JACK, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 326 W 83 ST 3D
 City NEW YORK State NY Zip Code 10024-4813
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) CONSULTANT
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 275.00

Date of Receipt 10 / 30 / 2016
Transaction ID : SA11A.464928
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

C. COLE, JACK, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 326 W 83 ST 3D
 City NEW YORK State NY Zip Code 10024-4813
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) CONSULTANT
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 275.00

Date of Receipt 11 / 04 / 2016
Transaction ID : SA11A.473823
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶ 142.00
TOTAL This Period (last page this line number only).....▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 688 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. COLE, MARY, ANNE, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 131 TENBURY RD.
 City LUTHERVILLE State MD Zip Code 21093-6340
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 600.00

Date of Receipt 10 / 24 / 2016
Transaction ID : SA11A.446247
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

B. COLEMAN, DOUGLAS, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 34522 N SCOTTSDALE RD STE 120-437
 City SCOTTSDALE State AZ Zip Code 85266-1224
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1405.00

Date of Receipt 10 / 31 / 2016
Transaction ID : SA11A.458261
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

C. COLEMAN, JANE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 59 KING STREET
 City REDWOOD CITY State CA Zip Code 94062-1937
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) INFORMATION REQUESTED PER BEST EFFORTS Occupation (for Individual) INFORMATION REQUESTED PER BEST EFFORTS
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 11 / 07 / 2016
Transaction ID : SA11A.467808
 Amount of Each Receipt this Period 500.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 775.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 689 OF 4311
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. COLEMAN, MARIE, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 219 ROSEMONT ST

City HAVERHILL	State MA	Zip Code 01832-1320
-------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
275.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	25	/	2016

Transaction ID : SA11A.451997

Amount of Each Receipt this Period
50.00

Memo Item CONTRIBUTION

B. COLEMAN, MARIE, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 219 ROSEMONT ST

City HAVERHILL	State MA	Zip Code 01832-1320
-------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
275.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	07	/	2016

Transaction ID : SA11A.476342

Amount of Each Receipt this Period
25.00

Memo Item CONTRIBUTION

C. COLEMAN, MARIE, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 219 ROSEMONT ST

City HAVERHILL	State MA	Zip Code 01832-1320
-------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
275.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	05	/	2016

Transaction ID : SA11A.478958

Amount of Each Receipt this Period
25.00

Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	100.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 690 OF 4311
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. COLLARD, RICHARD, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 425 CARDINAL DRIVE

City MANKATO	State MN	Zip Code 56001-6747
-----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
655.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	01	/	2016

Transaction ID : SA11A.462806

Amount of Each Receipt this Period
131.00

Memo Item CONTRIBUTION

B. COLLINS, ALLEN, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 16919 W. COYOTE TRAIL

City SAND SPRINGS	State OK	Zip Code 74063-4754
----------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
350.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	27	/	2016

Transaction ID : SA11A.453254

Amount of Each Receipt this Period
50.00

Memo Item CONTRIBUTION

C. COLLINS, DON, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 2705 CLUBLAKE TRAIL

City MCKINNEY	State TX	Zip Code 75070-4009
------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) INFORMATION REQUESTED PER BEST EFFORTS	Occupation (for Individual) INFORMATION REQUESTED PER BES
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
300.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	10	/	2016

Transaction ID : SA11A.468209

Amount of Each Receipt this Period
100.00

Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	281.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 691 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. COLLINS, JOHN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 100 SEAVIEW AVENUE
 UNIT 4 1
 City MONMOUTH BEACH State NJ Zip Code 07750-1250
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 04 / 2016
Transaction ID : SA11A.467627
 Amount of Each Receipt this Period
 150.00
 Memo Item
 CONTRIBUTION

B. COLLINS, M., , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 333 LAKE VALLEY DR
 City FRANKLIN State TN Zip Code 37069-4652
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 650.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 04 / 2016
Transaction ID : SA11A.472414
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION

C. COLLIER, MICHAEL, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 856 MOUNTAIN VIEW DRIVE
 City LAFAYETTE State CA Zip Code 94549-4214
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 350.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 06 / 2016
Transaction ID : SA11A.480881
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	350.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 692 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
Team Ryan

A. COLLINS, MORTON, H., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4000 TOWN CENTER
 STE 909
 City SOUTHFIELD State MI Zip Code 48075-1408
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) ATTORNEY
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 25 / 2016
Transaction ID : SA11A.447259
 Amount of Each Receipt this Period
 250.00
 Memo Item
 CONTRIBUTION

B. COLLINS, RICHARD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1816 GALLOP DR SE
 City HUNTSVILLE State AL Zip Code 35803-3670
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 275.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 23 / 2016
Transaction ID : SA11A.446488
 Amount of Each Receipt this Period
 50.00
 Memo Item
 CONTRIBUTION

C. COLLINS, RICHARD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1816 GALLOP DR SE
 City HUNTSVILLE State AL Zip Code 35803-3670
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 275.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 27 / 2016
Transaction ID : SA11A.453273
 Amount of Each Receipt this Period
 50.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	350.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 693 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. COLLINS, RICHARD, P., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 16928 FLORENCE VIEW DRIVE
 City MONTVERDE State FL Zip Code 34756-3424
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt 10 / 25 / 2016
Transaction ID : SA11A.447302
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

B. COLLINS, THELBERT, J., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO BOX 6625
 City LUBBOCK State TX Zip Code 79493-6625
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 273.00

Date of Receipt 10 / 24 / 2016
Transaction ID : SA11A.449519
 Amount of Each Receipt this Period 68.00
 Memo Item CONTRIBUTION

C. COLOGNA, RUDY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 34 LUMMI KEY
 City BELLEVUE State WA Zip Code 98006-1016
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 600.00

Date of Receipt 10 / 28 / 2016
Transaction ID : SA11A.455943
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	268.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 694 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. COLOGNA, RUDY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 34 LUMMI KEY
 City BELLEVUE State WA Zip Code 98006-1016
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 600.00

Date of Receipt 11 / 04 / 2016
Transaction ID : SA11A.472648
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

B. COLON-ESCOBAR, TAMI, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 112 ROLLING RIDGE DR.
 City DEL RIO State TX Zip Code 78840-2102
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt 11 / 04 / 2016
Transaction ID : SA11A.472473
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

C. COLWELL, PETER, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO BOX 281
 City MANISTIQUE State MI Zip Code 49854-0281
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 11 / 02 / 2016
Transaction ID : SA11A.466330
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	400.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 695 OF 4311
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Team Ryan

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
A. COMAN, GAVIN, , MR,

Mailing Address **28 FERRY LANE E**

City WESTPORT	State CT	Zip Code 06880-6030
-------------------------	--------------------	-------------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) BANK OF AMERICA	Occupation (for Individual) MANAGING DIRECTOR - GLOBAL FX
---	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
20000.00

Date of Receipt
11 / 14 / 2016

Transaction ID : SA11A.468432

Amount of Each Receipt this Period
10000.00

Memo Item
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
B. COMLY, ROBERT, , ,

Mailing Address **2 BELLWOOD LANE**

City CASTLETON ON HUDSO	State NY	Zip Code 12033-9558
-----------------------------------	--------------------	-------------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
--	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
275.00

Date of Receipt
10 / 20 / 2016

Transaction ID : SA11A.442321

Amount of Each Receipt this Period
25.00

Memo Item
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
C. COMLY, ROBERT, , ,

Mailing Address **2 BELLWOOD LANE**

City CASTLETON ON HUDSO	State NY	Zip Code 12033-9558
-----------------------------------	--------------------	-------------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
--	---

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
275.00

Date of Receipt
10 / 20 / 2016

Transaction ID : SA11A.442322

Amount of Each Receipt this Period
25.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	10050.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 696 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. COMLY, ROBERT, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2 BELLWOOD LANE
 City CASTLETON ON HUDSO State NY Zip Code 12033-9558
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 275.00

Date of Receipt 10 / 20 / 2016
Transaction ID : SA11A.442323
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

B. COMRIE, HARVEY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4185 FOREST PARK RD
 City NORTON SHORES State MI Zip Code 49441-4554
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) DENTIST
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 10 / 25 / 2016
Transaction ID : SA11A.451909
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

C. CONANT, RICHARD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 137 WOODLANDS WEST
 City COLUMBIA State SC Zip Code 29229-3378
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 225.00

Date of Receipt 10 / 25 / 2016
Transaction ID : SA11A.448910
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	300.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 697 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
Team Ryan

A. CONANT, RICHARD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 137 WOODLANDS WEST
 City COLUMBIA State SC Zip Code 29229-3378
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 225.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 03 / 2016
Transaction ID : SA11A.469347
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

B. CONANT, RICHARD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 137 WOODLANDS WEST
 City COLUMBIA State SC Zip Code 29229-3378
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 225.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 03 / 2016
Transaction ID : SA11A.469349
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

C. CONANT, RICHARD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 137 WOODLANDS WEST
 City COLUMBIA State SC Zip Code 29229-3378
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 225.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 04 / 2016
Transaction ID : SA11A.471319
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	75.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 698 OF 4311
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
Team Ryan

A. CONANT, RICHARD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 137 WOODLANDS WEST
 City COLUMBIA State SC Zip Code 29229-3378
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 225.00

Date of Receipt **11 / 07 / 2016**
Transaction ID : SA11A.475375
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

B. CONDRAN, GLENDA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 246 LAKE DR
 City SAN BRUNO State CA Zip Code 94066-2514
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt **10 / 21 / 2016**
Transaction ID : SA11A.444536
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

C. CONDRAN, GLENDA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 246 LAKE DR
 City SAN BRUNO State CA Zip Code 94066-2514
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt **10 / 23 / 2016**
Transaction ID : SA11A.446437
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 175.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 699 OF 4311
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. CONDRAN, GLENDA, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 246 LAKE DR

City SAN BRUNO	State CA	Zip Code 94066-2514
-------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
400.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11		04		2016

Transaction ID : SA11A.473419

Amount of Each Receipt this Period
50.00

Memo Item
CONTRIBUTION

B. CONGDON, JOHN, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 600 CORNWALLIS PLACE

City MANAKIN SABOT	State VA	Zip Code 23103-3041
-----------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) OLD DOMINION TRUCK LEASING	Occupation (for Individual) EXECUTIVE
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11		03		2016

Transaction ID : SA11A.474588

Amount of Each Receipt this Period
250.00

Memo Item
CONTRIBUTION

C. CONGER, JOHN, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1618 ANN WAY

City BOULDER CITY	State NV	Zip Code 89005-1800
----------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) SELF EMPLOYED	Occupation (for Individual) AUTO BODY
--	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11		03		2016

Transaction ID : SA11A.474543

Amount of Each Receipt this Period
250.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	550.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 700 OF 4311
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. CONIGLIARO, JOSEPH, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 20 FIELD STONE DRIVE
 City EASTON State CT Zip Code 06612-1016
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) STERLING JEWELERS Occupation (for Individual) SALESMAN
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 11 / 04 / 2016
Transaction ID : SA11A.473731
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

B. CONLON, MARY, K., MS.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4181 BRANDONMORE DRIVE
 City CINCINNATI State OH Zip Code 45255-3705
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) KETL TOAL Occupation (for Individual) PRESIDENT
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 550.00

Date of Receipt 11 / 03 / 2016
Transaction ID : SA11A.465420
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

C. CONNELL, CARL, W., MR., JR.
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2520 FALCONCREST LOOP
 City RICHLAND State WA Zip Code 99352-9314
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 10 / 27 / 2016
Transaction ID : SA11A.456718
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	400.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 701 OF 4311
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. CONNELL, CARL, W., MR., JR.
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 2520 FALCONCREST LOOP

City RICHLAND	State WA	Zip Code 99352-9314
------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	01	/	2016

Transaction ID : SA11A.462569

Amount of Each Receipt this Period
100.00

Memo Item CONTRIBUTION

B. CONNER, JOSEPH, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 4511 E BASE ROAD

City COLUMBUS	State IN	Zip Code 47201-9087
------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	24	/	2016

Transaction ID : SA11A.443859

Amount of Each Receipt this Period
500.00

Memo Item CONTRIBUTION

C. CONNELL, MARY, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 2931 WILLADSEN DRIVE

City CLINTON	State IA	Zip Code 52732-9605
-----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) AIR CONTROL, INC.	Occupation (for Individual) OWNER/CEO
--	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
300.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	20	/	2016

Transaction ID : SA11A.442342

Amount of Each Receipt this Period
50.00

Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	650.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 702 OF 4311
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. CONNELL, MARY, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 2931 WILLADSEN DRIVE
City CLINTON State IA Zip Code 52732-9605
FEC ID number of contributing federal political committee. **C**
Name of Employer (for Individual) AIR CONTROL, INC. Occupation (for Individual) OWNER/CEO
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 300.00

Date of Receipt 11 / 04 / 2016
Transaction ID : SA11A.473357
Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

B. CONNORS, JIM, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 16509 PRIVATE DRIVE 3433
City ST. JOSEPH State MO Zip Code 64505-3289
FEC ID number of contributing federal political committee. **C**
Name of Employer (for Individual) BHHS STEIN & SUMMERS REAL ESTATE Occupation (for Individual) REAL ESTATE SALES
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 235.00

Date of Receipt 11 / 06 / 2016
Transaction ID : SA11A.477705
Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

C. CONNORS, JIM, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 16509 PRIVATE DRIVE 3433
City ST. JOSEPH State MO Zip Code 64505-3289
FEC ID number of contributing federal political committee. **C**
Name of Employer (for Individual) BHHS STEIN & SUMMERS REAL ESTATE Occupation (for Individual) REAL ESTATE SALES
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 235.00

Date of Receipt 11 / 06 / 2016
Transaction ID : SA11A.477706
Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 250.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 703 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. CONNOR, MARIA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 36 ALLERTON ST
 City BROOKLINE State MA Zip Code 02445-7726
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) POLYVINYL FILMS Occupation (for Individual) VP
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1097.00

Date of Receipt 10 / 21 / 2016
Transaction ID : SA11A.444289
 Amount of Each Receipt this Period 100.00
 Memo Item
 CONTRIBUTION

B. CONNOR, MARIA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 36 ALLERTON ST
 City BROOKLINE State MA Zip Code 02445-7726
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) POLYVINYL FILMS Occupation (for Individual) VP
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1097.00

Date of Receipt 10 / 29 / 2016
Transaction ID : SA11A.464975
 Amount of Each Receipt this Period 100.00
 Memo Item
 CONTRIBUTION

C. CONNOR, ROBERT, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 6811 BUCKINGHAM BLVD
 City BERKELEY State CA Zip Code 94705-1708
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt 10 / 20 / 2016
Transaction ID : SA11A.441984
 Amount of Each Receipt this Period 500.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	700.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 704 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. CONNOR, ROBERT, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 6811 BUCKINGHAM BLVD
 City BERKELEY State CA Zip Code 94705-1708
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt 10 / 27 / 2016
Transaction ID : SA11A.453341
 Amount of Each Receipt this Period 500.00
 Memo Item CONTRIBUTION

B. CONSOLVER, GEORGE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2208 NORTHCREST DRIVE
 City PLANO State TX Zip Code 75075-8354
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 10 / 23 / 2016
Transaction ID : SA11A.446311
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

C. CONSOLVER, GEORGE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2208 NORTHCREST DRIVE
 City PLANO State TX Zip Code 75075-8354
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 11 / 06 / 2016
Transaction ID : SA11A.477384
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	700.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 705 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
A. CONSTANTIN, BERNICE, , ,

Mailing Address 1528 NW 94TH STREET

City GAINESVILLE	State FL	Zip Code 32606-5568
---------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
425.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 27 / 2016

Transaction ID : SA11A.456843

Amount of Each Receipt this Period
50.00

Memo Item CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
B. CONSTANTIN, BERNICE, , ,

Mailing Address 1528 NW 94TH STREET

City GAINESVILLE	State FL	Zip Code 32606-5568
---------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
425.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 27 / 2016

Transaction ID : SA11A.456844

Amount of Each Receipt this Period
50.00

Memo Item CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
C. CONSTANTIN, BERNICE, , ,

Mailing Address 1528 NW 94TH STREET

City GAINESVILLE	State FL	Zip Code 32606-5568
---------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
425.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 05 / 2016

Transaction ID : SA11A.478531

Amount of Each Receipt this Period
50.00

Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	150.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 706 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
Team Ryan

A. CONSTANTIN, BERNICE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1528 NW 94TH STREET
 City GAINESVILLE State FL Zip Code 32606-5568
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 425.00

Date of Receipt 11 / 05 / 2016
Transaction ID : SA11A.478532
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

B. CONSTABLE, SANSRA, , MS.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3801 FUCHSIA CIRCLE
 City SEAL BEACH State CA Zip Code 90740-2907
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 610.00

Date of Receipt 10 / 26 / 2016
Transaction ID : SA11A.449942
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

C. CONSTABLE, SANSRA, , MS.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3801 FUCHSIA CIRCLE
 City SEAL BEACH State CA Zip Code 90740-2907
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 610.00

Date of Receipt 10 / 26 / 2016
Transaction ID : SA11A.449943
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	150.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 707 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. CONSTABLE, SANSRA, , MS.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3801 FUCHSIA CIRCLE
 City SEAL BEACH State CA Zip Code 90740-2907
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 610.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 01 / 2016
Transaction ID : SA11A.462792
 Amount of Each Receipt this Period
 30.00
 Memo Item
 CONTRIBUTION

B. CONVEY, ALLAN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 15403 SE 42ND ST
 City BELLEVUE State WA Zip Code 98006-1726
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 225.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 31 / 2016
Transaction ID : SA11A.459211
 Amount of Each Receipt this Period
 25.00
 Memo Item
 CONTRIBUTION

C. CONWAY, ANITA, W., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 50 AYRAULT STREET
 City NEWPORT State RI Zip Code 02840-2728
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 295.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 25 / 2016
Transaction ID : SA11A.447536
 Amount of Each Receipt this Period
 95.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	150.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 708 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. CONWAY, ANITA, W., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 50 AYRAULT STREET
 City NEWPORT State RI Zip Code 02840-2728
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 295.00

Date of Receipt 11 / 08 / 2016
Transaction ID : SA11A.468041
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

B. CONWAY, JERRY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2605 WESTLAKE DR
 City AUSTIN State TX Zip Code 78746-2924
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) BUSINESS OWNER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 11 / 02 / 2016
Transaction ID : SA11A.467077
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

C. CONWAY, LINDA, A., MS.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 330 PAYSON ROAD
 City BELMONT State MA Zip Code 02478-3403
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) FINANCIAL CONSULTANT
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt 10 / 31 / 2016
Transaction ID : SA11A.458437
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	450.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 709 OF 4311
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. COOGAN JR, HENRY, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 2742 LIVE OAK LANE

City MIDLOTHIAN	State VA	Zip Code 23113-3100
--------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
650.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	28	/	2016

Transaction ID : SA11A.456163

Amount of Each Receipt this Period
100.00

Memo Item
CONTRIBUTION

B. COOGAN JR, HENRY, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 2742 LIVE OAK LANE

City MIDLOTHIAN	State VA	Zip Code 23113-3100
--------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
650.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	04	/	2016

Transaction ID : SA11A.471425

Amount of Each Receipt this Period
100.00

Memo Item
CONTRIBUTION

C. COOK, BRENDA, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 2669 HOLLY POINT RD EAST

City ORANGE PARK	State FL	Zip Code 32073-5634
---------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	22	/	2016

Transaction ID : SA11A.446748

Amount of Each Receipt this Period
100.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	300.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 710 OF 4311
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. COOK, CHARLES, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 85 SUGAR CREEK PL

City WACO	State TX	Zip Code 76712-3407
--------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
700.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	27	/	2016

Transaction ID : SA11A.452934

Amount of Each Receipt this Period
100.00

Memo Item
CONTRIBUTION

B. COOK, CHARLES, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 85 SUGAR CREEK PL

City WACO	State TX	Zip Code 76712-3407
--------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
700.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	06	/	2016

Transaction ID : SA11A.477466

Amount of Each Receipt this Period
100.00

Memo Item
CONTRIBUTION

C. COOK, CHARLES, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 85 SUGAR CREEK PL

City WACO	State TX	Zip Code 76712-3407
--------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
700.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	06	/	2016

Transaction ID : SA11A.477470

Amount of Each Receipt this Period
100.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	300.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 711 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. COOK, GREGORY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 972 ELM COURT
 City NAPERVILLE State IL Zip Code 60540-2700
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) CB&I Occupation (for Individual) HSE MANAGER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 650.00

Date of Receipt 10 / 30 / 2016
Transaction ID : SA11A.464931
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

B. COOK, HARRY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 10125 WHISPER POINTE DRIVE
 City TAMPA State FL Zip Code 33647-2903
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) DIFFUSION PHARMACEUTICALS Occupation (for Individual) PHARMACEUTICALS
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 800.00

Date of Receipt 10 / 22 / 2016
Transaction ID : SA11A.446997
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

C. COOK, HARRY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 10125 WHISPER POINTE DRIVE
 City TAMPA State FL Zip Code 33647-2903
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) DIFFUSION PHARMACEUTICALS Occupation (for Individual) PHARMACEUTICALS
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 800.00

Date of Receipt 11 / 04 / 2016
Transaction ID : SA11A.471704
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	300.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 712 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. COOK, HARRY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 10125 WHISPER POINTE DRIVE
 City TAMPA State FL Zip Code 33647-2903
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) DIFFUSION PHARMACEUTICALS Occupation (for Individual) PHARMACEUTICALS
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 800.00

Date of Receipt 11 / 04 / 2016
Transaction ID : SA11A.473373
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

B. COOK, IDA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 550 CLARK STREET
 City OVIEDO State FL Zip Code 32765-9725
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 725.00

Date of Receipt 10 / 24 / 2016
Transaction ID : SA11A.445754
 Amount of Each Receipt this Period 75.00
 Memo Item CONTRIBUTION

C. COOK, IDA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 550 CLARK STREET
 City OVIEDO State FL Zip Code 32765-9725
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 725.00

Date of Receipt 10 / 24 / 2016
Transaction ID : SA11A.445755
 Amount of Each Receipt this Period 75.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 250.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 713 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. COOK, JANET, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3113 N. PROVENCE LANE H-3
 City LEHI State UT Zip Code 84043-5149
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 550.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 04 / 2016
Transaction ID : SA11A.473307
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION

B. COOK, LANGDON, P., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 195 OLD MILL ROAD
 City GREENWICH State CT Zip Code 06831-2614
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 20 / 2016
Transaction ID : SA11A.433430
 Amount of Each Receipt this Period
 1000.00
 Memo Item
 CONTRIBUTION

C. COOK, SCOTT, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 386 MOUNTAIN HOME ROAD
 City WOODSIDE State CA Zip Code 94062-2513
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) INTUIT INC Occupation (for Individual) FOUNDER
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 7500.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 03 / 2016
Transaction ID : SA11A.465159
 Amount of Each Receipt this Period
 5000.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	6100.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 714 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. COOK, SCOTT, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 386 MOUNTAIN HOME ROAD
 City WOODSIDE State CA Zip Code 94062-2513
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) INTUIT INC Occupation (for Individual) FOUNDER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 7500.00

Date of Receipt
 11 / 03 / 2016
Transaction ID : SA11A.465185
 Amount of Each Receipt this Period
 2500.00
 Memo Item
 CONTRIBUTION

B. COOK, STEVEN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 9300 OVERSEAS HWY
 City MARATHON State FL Zip Code 33050-3245
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt
 11 / 06 / 2016
Transaction ID : SA11A.477318
 Amount of Each Receipt this Period
 250.00
 Memo Item
 CONTRIBUTION

C. COOK, WILLIAM, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2 PINE TREE LANE
 City RADFORD State VA Zip Code 24141-3525
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NEW RIVER VALLEY PEDIATRICS Occupation (for Individual) PEDIATRICIAN
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt
 10 / 31 / 2016
Transaction ID : SA11A.463839
 Amount of Each Receipt this Period
 25.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	2775.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 715 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. COOKE, ANDREW, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 50 WHITE OAK ROAD
 City WELLESLEY State MA Zip Code 02481-1435
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) MERCURY BUSINESS SERVICES Occupation (for Individual) FINANCIAL EXECUTIVE
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 10 / 31 / 2016
Transaction ID : SA11A.458735
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

B. COONEY, SHIRLEY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5710 N. CAMPBELL AVE
 City TUCSON State AZ Zip Code 85718-4218
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 550.00

Date of Receipt 10 / 21 / 2016
Transaction ID : SA11A.444509
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

C. COONEY, SHIRLEY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5710 N. CAMPBELL AVE
 City TUCSON State AZ Zip Code 85718-4218
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 550.00

Date of Receipt 10 / 26 / 2016
Transaction ID : SA11A.450236
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	400.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 716 OF 4311
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. COONEY, SHIRLEY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5710 N. CAMPBELL AVE
 City TUCSON State AZ Zip Code 85718-4218
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 550.00

Date of Receipt **10 / 26 / 2016**
Transaction ID : SA11A.450238
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

B. COONEY, SHIRLEY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5710 N. CAMPBELL AVE
 City TUCSON State AZ Zip Code 85718-4218
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 550.00

Date of Receipt **11 / 04 / 2016**
Transaction ID : SA11A.471647
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

C. COOPER, GLYDE, G., MS.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 85 SOUTHAMPTON AVE
 City BERKELEY State CA Zip Code 94707-2034
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt **10 / 26 / 2016**
Transaction ID : SA11A.454483
 Amount of Each Receipt this Period 500.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	650.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 717 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. COOPER, JR., J., , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 743 LOCHMOOR BLVD.
 City GROSSE POINTE WOOD State MI Zip Code 48236-4008
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) GREAT LAKES WINE & SPIRITS LLC Occupation (for Individual) BOARD MEMBER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1050.00

Date of Receipt 10 / 23 / 2016
Transaction ID : SA11A.446283
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

B. COOPER, LARRY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 17ROYAL DALTON
 City CONROE State TX Zip Code 77304-9719
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 350.00

Date of Receipt 10 / 31 / 2016
Transaction ID : SA11A.458553
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

C. COOPER, RICHARD, A., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 9 FOUR LEAF MNR
 City REXFORD State NY Zip Code 12148-1490
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 450.00

Date of Receipt 11 / 10 / 2016
Transaction ID : SA11A.468202
 Amount of Each Receipt this Period 150.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	650.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 718 OF 4311
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. COOPER, RONALD, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 5714 DEL ROY DRIVE
City DALLAS State TX Zip Code 75230-2966
FEC ID number of contributing federal political committee. **C**
Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 2700.00

Date of Receipt 11 / 01 / 2016
Transaction ID : SA11A.467359
Amount of Each Receipt this Period 2700.00
 Memo Item CONTRIBUTION

B. COOPER, WILFRED, N., MR., SR.
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 546 S BAY FRONT NA
City BALBOA ISLAND State CA Zip Code 92662-1038
FEC ID number of contributing federal political committee. **C**
Name of Employer (for Individual) WNC & ASSOCIATES, INC Occupation (for Individual) REAL ESTATE INVESTMENTS
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 250.00

Date of Receipt 10 / 29 / 2016
Transaction ID : SA11A.460997
Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

C. COOPER, WILFRED, N., MR., SR.
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 546 S BAY FRONT NA
City BALBOA ISLAND State CA Zip Code 92662-1038
FEC ID number of contributing federal political committee. **C**
Name of Employer (for Individual) WNC & ASSOCIATES, INC Occupation (for Individual) REAL ESTATE INVESTMENTS
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 250.00

Date of Receipt 11 / 04 / 2016
Transaction ID : SA11A.471707
Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶ 2800.00
TOTAL This Period (last page this line number only).....▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 719 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
Team Ryan

A. COOVERT, ISABELLE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2 DEACON DRIVE
 City SAINT LOUIS State MO Zip Code 63131-4802
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 11 / 07 / 2016
Transaction ID : SA11A.467821
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

B. COPELAND, SHIRLEY, H., MS.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 368 BENTLEYVILLE RD
 City CHAGRIN FALLS State OH Zip Code 44022-2433
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) JENSEN TRAVELON Occupation (for Individual) OWNER TRAVEL AGENCY
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 455.00

Date of Receipt 10 / 27 / 2016
Transaction ID : SA11A.453622
 Amount of Each Receipt this Period 30.00
 Memo Item CONTRIBUTION

C. COPELAND, SHIRLEY, H., MS.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 368 BENTLEYVILLE RD
 City CHAGRIN FALLS State OH Zip Code 44022-2433
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) JENSEN TRAVELON Occupation (for Individual) OWNER TRAVEL AGENCY
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 455.00

Date of Receipt 11 / 01 / 2016
Transaction ID : SA11A.462262
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	330.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 720 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
Team Ryan

A. COPLEY, PATRICIA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5334 MONTICELLO
 City DALLAS State TX Zip Code 75206-6038
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 20 / 2016
Transaction ID : SA11A.441996
 Amount of Each Receipt this Period
 25.00
 Memo Item
 CONTRIBUTION

B. COPLEY, PATRICIA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5334 MONTICELLO
 City DALLAS State TX Zip Code 75206-6038
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 20 / 2016
Transaction ID : SA11A.441997
 Amount of Each Receipt this Period
 25.00
 Memo Item
 CONTRIBUTION

C. COPPLE, KENNETH, S., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 6650 E COUNTY ROAD 40
 City FORT COLLINS State CO Zip Code 80525-9671
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) ATTORNEY
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 1050.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 25 / 2016
Transaction ID : SA11A.447503
 Amount of Each Receipt this Period
 200.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	250.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 721 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
Team Ryan

A. COPPLE, KENNETH, S., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 6650 E COUNTY ROAD 40
 City FORT COLLINS State CO Zip Code 80525-9671
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) ATTORNEY
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1050.00

Date of Receipt 11 / 07 / 2016
Transaction ID : SA11A.467726
 Amount of Each Receipt this Period 400.00
 Memo Item CONTRIBUTION

B. COPPOCK, MICHAEL, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 214 ASPEN CIRCLE
 City LINCOLN State MA Zip Code 01773-4919
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 230.00

Date of Receipt 10 / 24 / 2016
Transaction ID : SA11A.449335
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

C. COPPOCK, MICHAEL, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 214 ASPEN CIRCLE
 City LINCOLN State MA Zip Code 01773-4919
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 230.00

Date of Receipt 10 / 31 / 2016
Transaction ID : SA11A.458996
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	450.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 722 OF 4311
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
Team Ryan

A. CORBETT, CORNELIA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1043 GUI SANDO DE AVILA
 City TAMPA State FL Zip Code 33613-1058
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt **10 / 25 / 2016**
Transaction ID : SA11A.448501
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

B. CORBETT, MICHAEL, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1590 MAJORCA PL
 City VERO BEACH State FL Zip Code 32967-7257
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 800.00

Date of Receipt **10 / 31 / 2016**
Transaction ID : SA11A.458466
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

C. CORBETT, MICHAEL, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1590 MAJORCA PL
 City VERO BEACH State FL Zip Code 32967-7257
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 800.00

Date of Receipt **11 / 04 / 2016**
Transaction ID : SA11A.472122
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 450.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 723 OF 4311
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. CORCORAN, CHARLES, J., MR.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 8533. BEAUFORT DRIVE

City FULTON	State MD	Zip Code 20759-9633
----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1125.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		21		2016

Transaction ID : SA11A.444486

Amount of Each Receipt this Period
25.00

Memo Item CONTRIBUTION

B. CORCORAN, CHARLES, J., MR.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 8533. BEAUFORT DRIVE

City FULTON	State MD	Zip Code 20759-9633
----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1125.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		20		2016

Transaction ID : SA11A.444737

Amount of Each Receipt this Period
100.00

Memo Item CONTRIBUTION

C. CORCORAN, CHARLES, J., MR.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 8533. BEAUFORT DRIVE

City FULTON	State MD	Zip Code 20759-9633
----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
1125.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		20		2016

Transaction ID : SA11A.444896

Amount of Each Receipt this Period
100.00

Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	225.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 724 OF 4311
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. CORCORAN, CHARLES, J., MR.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 8533. BEAUFORT DRIVE

City FULTON	State MD	Zip Code 20759-9633
----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1125.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		20		2016

Transaction ID : SA11A.444898

Amount of Each Receipt this Period
100.00

Memo Item
CONTRIBUTION

B. CORCORAN, CHARLES, J., MR.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 8533. BEAUFORT DRIVE

City FULTON	State MD	Zip Code 20759-9633
----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1125.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		31		2016

Transaction ID : SA11A.464798

Amount of Each Receipt this Period
100.00

Memo Item
CONTRIBUTION

C. CORCORAN, CHARLES, J., MR.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 8533. BEAUFORT DRIVE

City FULTON	State MD	Zip Code 20759-9633
----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
1125.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		31		2016

Transaction ID : SA11A.464832

Amount of Each Receipt this Period
100.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	300.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 725 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. CORCORAN, CHARLES, J., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 8533. BEAUFORT DRIVE
 City FULTON State MD Zip Code 20759-9633
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1125.00

Date of Receipt 11 / 04 / 2016
Transaction ID : SA11A.471772
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

B. CORETTE, MARY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5501 CHAMBERLIN AVE.
 City CHEVY CHASE State MD Zip Code 20815-6643
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) LONG & FOSTER REAL ESTATE Occupation (for Individual) REAL ESTATE
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 330.00

Date of Receipt 10 / 28 / 2016
Transaction ID : SA11A.456326
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

C. CORETTE, MARY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5501 CHAMBERLIN AVE.
 City CHEVY CHASE State MD Zip Code 20815-6643
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) LONG & FOSTER REAL ESTATE Occupation (for Individual) REAL ESTATE
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 330.00

Date of Receipt 10 / 28 / 2016
Transaction ID : SA11A.456327
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	225.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 726 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. COREY, TIM, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 47 SCHOOL STREET
 City ALBION State ME Zip Code 04910-6502
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) COREY IBA Occupation (for Individual) BUSINESS OWNER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 11 / 04 / 2016
Transaction ID : SA11A.473682
 Amount of Each Receipt this Period 75.00
 Memo Item CONTRIBUTION

B. CORFMAN, RANDLE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 21350 OAKDALE DRIVE
 City ROGERS State MN Zip Code 55374-8907
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) MIDWEST CENTER FOR REPRODUCTIVE HEALTH Occupation (for Individual) PHYSICIAN
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 11 / 02 / 2016
Transaction ID : SA11A.466612
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

C. CORGAN, WARREN, G., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3015 REDFORD DRIVE
 City GREENSBORO State NC Zip Code 27408-3115
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) CORGAN ENTERPRISES Occupation (for Individual) EXECUTIVE
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 10 / 28 / 2016
Transaction ID : SA11A.454756
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	425.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 727 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. CORLEY, IVY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 179 RIVERWOOD
 City BOERNE State TX Zip Code 78006-5788
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 877.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 04 / 2016
Transaction ID : SA11A.471836
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION

B. CORNETT, CYNTHIA, W., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 14280 E RIDGE ROAD
 City ARP State TX Zip Code 75750-9637
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 21 / 2016
Transaction ID : SA11A.443539
 Amount of Each Receipt this Period
 200.00
 Memo Item
 CONTRIBUTION

C. CORNELL, DELOR, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO BOX 807
 City WOODBURY State NJ Zip Code 08096-7807
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) CORNELL Occupation (for Individual) STEEL CONSTRUCTION
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 04 / 2016
Transaction ID : SA11A.479666
 Amount of Each Receipt this Period
 1000.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	1300.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 728 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. CORNELL, GEORGE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 710 WAUBAUNUQUA TRAIL
 City DE PERE State WI Zip Code 54115-3559
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) PACIFIC CHEESE Occupation (for Individual) V/P INDUSTRY RELATIONS
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 350.00

Date of Receipt 10 / 28 / 2016
Transaction ID : SA11A.456038
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

B. CORNELL, GEORGE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 710 WAUBAUNUQUA TRAIL
 City DE PERE State WI Zip Code 54115-3559
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) PACIFIC CHEESE Occupation (for Individual) V/P INDUSTRY RELATIONS
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 350.00

Date of Receipt 11 / 04 / 2016
Transaction ID : SA11A.473273
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

C. CORNELL, HENRY, , MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 116 E 86TH ST
 City NEW YORK State NY Zip Code 10028-1010
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) INVESTOR
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 50000.00

Date of Receipt 10 / 20 / 2016
Transaction ID : SA11A.443513
 Amount of Each Receipt this Period 50000.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	50100.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 729 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. CORNELL, VANESSA, , MRS.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 116 E 80TH ST
 City NEW YORK State NY Zip Code 10075-0306
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) HOMEMAKER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 50000.00

Date of Receipt 10 / 20 / 2016
Transaction ID : SA11A.443512
 Amount of Each Receipt this Period 50000.00
 Memo Item CONTRIBUTION

B. CORR, JAMES, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 205 WAVERLY CT
 City WEATHERFORD State TX Zip Code 76085-3623
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 10 / 25 / 2016
Transaction ID : SA11A.452049
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

C. CORRAO, LUD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO BOX 12907
 City RENO State NV Zip Code 89510-2907
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 11 / 04 / 2016
Transaction ID : SA11A.472807
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	50500.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 730 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. CORRELLO, MATTHEW, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 20 STONE COMMONS
 City YAPHANK State NY Zip Code 11980-2035
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Occupation (for Individual)
 PI SALES
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 725.00

Date of Receipt 10 / 26 / 2016
Transaction ID : SA11A.451191
 Amount of Each Receipt this Period 50.00
 Memo Item
 CONTRIBUTION

B. CORRELLO, MATTHEW, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 20 STONE COMMONS
 City YAPHANK State NY Zip Code 11980-2035
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Occupation (for Individual)
 PI SALES
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 725.00

Date of Receipt 10 / 26 / 2016
Transaction ID : SA11A.451192
 Amount of Each Receipt this Period 50.00
 Memo Item
 CONTRIBUTION

C. CORRELLO, MATTHEW, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 20 STONE COMMONS
 City YAPHANK State NY Zip Code 11980-2035
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Occupation (for Individual)
 PI SALES
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 725.00

Date of Receipt 10 / 26 / 2016
Transaction ID : SA11A.451195
 Amount of Each Receipt this Period 100.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 200.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 731 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. CORRELLO, MATTHEW, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 20 STONE COMMONS
 City YAPHANK State NY Zip Code 11980-2035
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Occupation (for Individual)
 PI SALES
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 725.00

Date of Receipt
 11 / 03 / 2016
Transaction ID : SA11A.468679
 Amount of Each Receipt this Period
 50.00
 Memo Item
 CONTRIBUTION

B. CORRELLO, MATTHEW, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 20 STONE COMMONS
 City YAPHANK State NY Zip Code 11980-2035
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Occupation (for Individual)
 PI SALES
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 725.00

Date of Receipt
 11 / 03 / 2016
Transaction ID : SA11A.468714
 Amount of Each Receipt this Period
 50.00
 Memo Item
 CONTRIBUTION

C. CORRELLO, MATTHEW, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 20 STONE COMMONS
 City YAPHANK State NY Zip Code 11980-2035
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Occupation (for Individual)
 PI SALES
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 725.00

Date of Receipt
 11 / 03 / 2016
Transaction ID : SA11A.469133
 Amount of Each Receipt this Period
 25.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	125.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 732 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. CORRIGAN, PAUL, A., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 26980 CRESTWOOD DRIVE
 City FRANKLIN State MI Zip Code 48025-1378
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) CORRIGAN MOVING SYSTEMS Occupation (for Individual) CEO
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1450.00

Date of Receipt 10 / 24 / 2016
Transaction ID : SA11A.443695
 Amount of Each Receipt this Period 300.00
 Memo Item CONTRIBUTION

B. CORRIGAN, PAUL, A., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 26980 CRESTWOOD DRIVE
 City FRANKLIN State MI Zip Code 48025-1378
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) CORRIGAN MOVING SYSTEMS Occupation (for Individual) CEO
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1450.00

Date of Receipt 10 / 31 / 2016
Transaction ID : SA11A.458983
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

C. CORTS, DAVID, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1075 CREST VALLEY DR. UNIT B
 City ATLANTA State GA Zip Code 30327-4669
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 10 / 23 / 2016
Transaction ID : SA11A.446547
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	650.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 733 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
Team Ryan

A. COSENZA, GIL, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 133 EAST MAIN ST
SUITE 1A

City BABYLON	State NY	Zip Code 11702-3517
-----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) STATE FARM	Occupation (for Individual) AGENT
---	--------------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
458.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 28 / 2016

Transaction ID : SA11A.455668

Amount of Each Receipt this Period
50.00

Memo Item
CONTRIBUTION

B. COSENZA, GIL, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 133 EAST MAIN ST
SUITE 1A

City BABYLON	State NY	Zip Code 11702-3517
-----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) STATE FARM	Occupation (for Individual) AGENT
---	--------------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
458.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 28 / 2016

Transaction ID : SA11A.455670

Amount of Each Receipt this Period
50.00

Memo Item
CONTRIBUTION

C. COSENZA, GIL, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 133 EAST MAIN ST
SUITE 1A

City BABYLON	State NY	Zip Code 11702-3517
-----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) STATE FARM	Occupation (for Individual) AGENT
---	--------------------------------------

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
458.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 31 / 2016

Transaction ID : SA11A.457647

Amount of Each Receipt this Period
25.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	125.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 734 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. COSENZA, GIL, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 133 EAST MAIN ST
 SUITE 1A
 City BABYLON State NY Zip Code 11702-3517
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) STATE FARM Occupation (for Individual) AGENT
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 458.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 10 / 31 / 2016
Transaction ID : SA11A.457649
 Amount of Each Receipt this Period
 25.00
 Memo Item
 CONTRIBUTION

B. COSENZA, GIL, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 133 EAST MAIN ST
 SUITE 1A
 City BABYLON State NY Zip Code 11702-3517
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) STATE FARM Occupation (for Individual) AGENT
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 458.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 11 / 01 / 2016
Transaction ID : SA11A.462659
 Amount of Each Receipt this Period
 35.00
 Memo Item
 CONTRIBUTION

C. COSENZA, GIL, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 133 EAST MAIN ST
 SUITE 1A
 City BABYLON State NY Zip Code 11702-3517
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) STATE FARM Occupation (for Individual) AGENT
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 458.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 11 / 01 / 2016
Transaction ID : SA11A.462660
 Amount of Each Receipt this Period
 35.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	95.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 735 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. COSENTINO, RAMONA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 63 PARKER RIDGE LANE
 309
 City BLUE HILL State ME Zip Code 04614-6129
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 450.00

Date of Receipt 10 / 25 / 2016
Transaction ID : SA11A.448971
 Amount of Each Receipt this Period 400.00
 Memo Item CONTRIBUTION

B. COSENTINO, RAMONA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 63 PARKER RIDGE LANE
 309
 City BLUE HILL State ME Zip Code 04614-6129
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 450.00

Date of Receipt 11 / 07 / 2016
Transaction ID : SA11A.476343
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

C. COSGROVE, MICHAEL, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 78940 SKYWARD WAY
 City LA QUINTA State CA Zip Code 92253-4979
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) COSGROVE, COSGROVE & HUMPHREY Occupation (for Individual) ATTORNEY
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 350.00

Date of Receipt 10 / 20 / 2016
Transaction ID : SA11A.444887
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	550.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 736 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. COSGROVE, MICHAEL, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 78940 SKYWARD WAY
 City LA QUINTA State CA Zip Code 92253-4979
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) COSGROVE, COSGROVE & HUMPHREY Occupation (for Individual) ATTORNEY
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 350.00

Date of Receipt **11 / 06 / 2016**
Transaction ID : SA11A.477230
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

B. COSGROVE, MIKE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3 CAMBRIDGE COURT
 City NEW ROCHELLE State NY Zip Code 10804-1020
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 1300.00

Date of Receipt **10 / 23 / 2016**
Transaction ID : SA11A.449604
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

C. COSGROVE, MIKE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3 CAMBRIDGE COURT
 City NEW ROCHELLE State NY Zip Code 10804-1020
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 1300.00

Date of Receipt **10 / 27 / 2016**
Transaction ID : SA11A.453264
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 250.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 737 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
Team Ryan

A. COSTA, REGINA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 120 SERRAMONTE CT
 City HENDERSON State NV Zip Code 89074-7201
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 475.00

Date of Receipt 10 / 24 / 2016
Transaction ID : SA11A.445712
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

B. COSTA, REGINA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 120 SERRAMONTE CT
 City HENDERSON State NV Zip Code 89074-7201
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 475.00

Date of Receipt 10 / 24 / 2016
Transaction ID : SA11A.445713
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

C. COSTA, REGINA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 120 SERRAMONTE CT
 City HENDERSON State NV Zip Code 89074-7201
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 475.00

Date of Receipt 11 / 06 / 2016
Transaction ID : SA11A.477897
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶ 125.00
TOTAL This Period (last page this line number only).....▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 738 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. COSTA, REGINA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 120 SERRAMONTE CT
 City HENDERSON State NV Zip Code 89074-7201
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 475.00

Date of Receipt
 11 / 06 / 2016
Transaction ID : SA11A.477899
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

B. COSTA, REGINA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 120 SERRAMONTE CT
 City HENDERSON State NV Zip Code 89074-7201
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 475.00

Date of Receipt
 11 / 06 / 2016
Transaction ID : SA11A.477901
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

C. COSTELLO, CHRISTIANE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2037 PIERCE STREET
 City SAN FRANCISCO State CA Zip Code 94115-2211
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt
 11 / 03 / 2016
Transaction ID : SA11A.468482
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	300.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 739 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. COSTELLO, CHRISTIANE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2037 PIERCE STREET
 City SAN FRANCISCO State CA Zip Code 94115-2211
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt 11 / 03 / 2016
Transaction ID : SA11A.468484
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

B. COSTELLO, CHRISTIANE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2037 PIERCE STREET
 City SAN FRANCISCO State CA Zip Code 94115-2211
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt 11 / 03 / 2016
Transaction ID : SA11A.468491
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

C. COSTELLO, CHRISTIANE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2037 PIERCE STREET
 City SAN FRANCISCO State CA Zip Code 94115-2211
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt 11 / 03 / 2016
Transaction ID : SA11A.468493
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	750.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 740 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
Team Ryan

A. COSTELLO, MARGARET, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO BOX 1252
 City CARMEL State CA Zip Code 93921-1252
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 2100.00

Date of Receipt 10 / 27 / 2016
Transaction ID : SA11A.453675
 Amount of Each Receipt this Period 1000.00
 Memo Item CONTRIBUTION

B. COSTELLO, MARGARET, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO BOX 1252
 City CARMEL State CA Zip Code 93921-1252
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 2100.00

Date of Receipt 10 / 30 / 2016
Transaction ID : SA11A.459968
 Amount of Each Receipt this Period 500.00
 Memo Item CONTRIBUTION

C. COSTELLO, ROBERT, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 301 AVENIDA ARLENA
 City SAN CLEMENTE State CA Zip Code 92672-3101
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 10 / 21 / 2016
Transaction ID : SA11A.444113
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 1600.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 741 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
Team Ryan

A. COSTELLO, ROBERT, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 301 AVENIDA ARLENA
 City SAN CLEMENTE State CA Zip Code 92672-3101
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 10 / 21 / 2016
Transaction ID : SA11A.444115
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

B. COSTIN, GEORGETA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4351 BEULAH DR
 City LA CANADA FLINTRID State CA Zip Code 91011-3322
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 10 / 28 / 2016
Transaction ID : SA11A.456137
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

C. COSTIN, GEORGETA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4351 BEULAH DR
 City LA CANADA FLINTRID State CA Zip Code 91011-3322
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 11 / 04 / 2016
Transaction ID : SA11A.470797
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 200.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 742 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
Team Ryan

A. COTE, CHARLES, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 68 POST ISLAND ROAD
 City QUINCY State MA Zip Code 02169-2614
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 04 / 2016
Transaction ID : SA11A.479392
 Amount of Each Receipt this Period
 250.00
 Memo Item
 CONTRIBUTION

B. COTTEN, LARY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 7637 ROYAL LANE
 City DALLAS State TX Zip Code 75230-3617
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 25 / 2016
Transaction ID : SA11A.451958
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION

C. COTTEN, LARY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 7637 ROYAL LANE
 City DALLAS State TX Zip Code 75230-3617
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 25 / 2016
Transaction ID : SA11A.451960
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	450.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 743 OF 4311
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
Team Ryan

A. COTTEN, LARY, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 7637 ROYAL LANE

City DALLAS	State TX	Zip Code 75230-3617
FEC ID number of contributing federal political committee. C		
Name of Employer (for Individual) NONE		Occupation (for Individual) RETIRED
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 400.00

Date of Receipt
MM / DD / YYYY
11 / 06 / 2016
Transaction ID : SA11A.477247

Amount of Each Receipt this Period
100.00

Memo Item CONTRIBUTION

B. COTTRELL, ROBERT, L., MR.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 7 WHEELRIGHT CRESCENT

City HAMILTON	State OH	Zip Code 45013-5818
FEC ID number of contributing federal political committee. C		
Name of Employer (for Individual) NONE		Occupation (for Individual) RETIRED
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 1125.00

Date of Receipt
MM / DD / YYYY
10 / 20 / 2016
Transaction ID : SA11A.442117

Amount of Each Receipt this Period
100.00

Memo Item CONTRIBUTION

C. COTTRELL, ROBERT, L., MR.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 7 WHEELRIGHT CRESCENT

City HAMILTON	State OH	Zip Code 45013-5818
FEC ID number of contributing federal political committee. C		
Name of Employer (for Individual) NONE		Occupation (for Individual) RETIRED
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		Aggregate Year-to-Date ▼ 1125.00

Date of Receipt
MM / DD / YYYY
10 / 26 / 2016
Transaction ID : SA11A.447752

Amount of Each Receipt this Period
50.00

Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	250.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 744 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. COTTRELL, ROBERT, L., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 7 WHEELRIGHT CRESCENT

City HAMILTON	State OH	Zip Code 45013-5818
------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1125.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 25 / 2016

Transaction ID : SA11A.448758

Amount of Each Receipt this Period
100.00

Memo Item CONTRIBUTION

B. COTTRELL, ROBERT, L., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 7 WHEELRIGHT CRESCENT

City HAMILTON	State OH	Zip Code 45013-5818
------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1125.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 26 / 2016

Transaction ID : SA11A.449911

Amount of Each Receipt this Period
100.00

Memo Item CONTRIBUTION

C. COTTRELL, ROBERT, L., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 7 WHEELRIGHT CRESCENT

City HAMILTON	State OH	Zip Code 45013-5818
------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
1125.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 04 / 2016

Transaction ID : SA11A.471025

Amount of Each Receipt this Period
100.00

Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	300.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 745 OF 4311
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
COUFAL, RICHARD, , ,

Mailing Address **15121 S. DALES AVE**

City BEAVERCREEK	State OR	Zip Code 97004-9668
----------------------------	--------------------	-------------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
--	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **300.00**

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	26	/	2016

Transaction ID : SA11A.451046

Amount of Each Receipt this Period

50.00

Memo Item
CONTRIBUTION

B. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
COUFAL, RICHARD, , ,

Mailing Address **15121 S. DALES AVE**

City BEAVERCREEK	State OR	Zip Code 97004-9668
----------------------------	--------------------	-------------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
--	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **300.00**

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	04	/	2016

Transaction ID : SA11A.472917

Amount of Each Receipt this Period

50.00

Memo Item
CONTRIBUTION

C. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
COUGHLAN, GARY, , ,

Mailing Address **1100 5TH AVE S STE 201
STE 201**

City NAPLES	State FL	Zip Code 34102-6407
-----------------------	--------------------	-------------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
--	---

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼ **1250.00**

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	31	/	2016

Transaction ID : SA11A.464063

Amount of Each Receipt this Period

250.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	350.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 746 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. COUNTS, JACK, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1300 METROPOLITAN AVE.
 City OKLAHOMA CITY State OK Zip Code 73108-2042
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) CANDID COLOR SYSTEMS Occupation (for Individual) CEO
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1250.00

Date of Receipt 10 / 30 / 2016
Transaction ID : SA11A.459461
 Amount of Each Receipt this Period 200.00
 Memo Item
CONTRIBUTION

B. COUNTS, JACK, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1300 METROPOLITAN AVE.
 City OKLAHOMA CITY State OK Zip Code 73108-2042
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) CANDID COLOR SYSTEMS Occupation (for Individual) CEO
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1250.00

Date of Receipt 11 / 04 / 2016
Transaction ID : SA11A.470427
 Amount of Each Receipt this Period 100.00
 Memo Item
CONTRIBUTION

C. COUNTS, JACK, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1300 METROPOLITAN AVE.
 City OKLAHOMA CITY State OK Zip Code 73108-2042
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) CANDID COLOR SYSTEMS Occupation (for Individual) CEO
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1250.00

Date of Receipt 11 / 07 / 2016
Transaction ID : SA11A.476385
 Amount of Each Receipt this Period 50.00
 Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	350.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 747 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
-----------------------------	-----------------------------	-----------------------------

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NAME OF COMMITTEE (In Full)
Team Ryan

A. COUNTS, JACK, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1300 METROPOLITAN AVE.
 City OKLAHOMA CITY State OK Zip Code 73108-2042
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) CANDID COLOR SYSTEMS Occupation (for Individual) CEO
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1250.00

Date of Receipt 11 / 06 / 2016
Transaction ID : SA11A.477969
 Amount of Each Receipt this Period 50.00
 Memo Item
CONTRIBUTION

B. COUNTS, JACK, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1300 METROPOLITAN AVE.
 City OKLAHOMA CITY State OK Zip Code 73108-2042
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) CANDID COLOR SYSTEMS Occupation (for Individual) CEO
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1250.00

Date of Receipt 11 / 07 / 2016
Transaction ID : SA11A.480612
 Amount of Each Receipt this Period 50.00
 Memo Item
CONTRIBUTION

C. COUPER, BEV, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 13580 THOROUGHbred LOOP
 City GRASS VALLEY State CA Zip Code 95949-7691
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 10 / 29 / 2016
Transaction ID : SA11A.460572
 Amount of Each Receipt this Period 250.00
 Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	350.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 748 OF 4311
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. COUPER, BEV, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 13580 THOROUGHbred LOOP
 City GRASS VALLEY State CA Zip Code 95949-7691
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 29 / 2016
Transaction ID : SA11A.460577
 Amount of Each Receipt this Period
 250.00
 Memo Item
 CONTRIBUTION

B. COURI, GERALD, E., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1215 SEITZ DR
 City WACKESHA State WI Zip Code 53186-6745
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) INFORMATION REQUESTED PER BEST EFFORTS Occupation (for Individual) INFORMATION REQUESTED PER BE
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 2500.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 03 / 2016
Transaction ID : SA11A.465197
 Amount of Each Receipt this Period
 2500.00
 Memo Item
 CONTRIBUTION

C. COURI, SUSAN, B., MRS.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1515 MEADOW LANE
 City GLENVIEW State IL Zip Code 60025-2347
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 225.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 20 / 2016
Transaction ID : SA11A.442071
 Amount of Each Receipt this Period
 25.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	2775.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 749 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. COURI, SUSAN, B., MRS.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1515 MEADOW LANE
 City GLENVIEW State IL Zip Code 60025-2347
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 225.00

Date of Receipt 10 / 24 / 2016
Transaction ID : SA11A.449239
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

B. COURI, SUSAN, B., MRS.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1515 MEADOW LANE
 City GLENVIEW State IL Zip Code 60025-2347
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 225.00

Date of Receipt 11 / 04 / 2016
Transaction ID : SA11A.471062
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

C. COURI, SUSAN, B., MRS.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1515 MEADOW LANE
 City GLENVIEW State IL Zip Code 60025-2347
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 225.00

Date of Receipt 11 / 04 / 2016
Transaction ID : SA11A.472256
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	75.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 750 OF 4311
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
Team Ryan

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
A. COURTNEY, PATRICIA, A., ,

Mailing Address **22850 SW 134 AVENUE**

City MIAMI	State FL	Zip Code 33170-7313
----------------------	--------------------	-------------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) HOGAN LOVELLS US LLP	Occupation (for Individual) SECRETARY
--	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
341.00

Date of Receipt
10 / 21 / 2016

Transaction ID : SA11A.444413

Amount of Each Receipt this Period
100.00

Memo Item
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
B. COWAN, JON, , ,

Mailing Address **1861 MORNINGSIDE DRIVE SE**

City GRAND RAPIDS	State MI	Zip Code 49506-5120
-----------------------------	--------------------	-------------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
--	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
500.00

Date of Receipt
10 / 23 / 2016

Transaction ID : SA11A.446467

Amount of Each Receipt this Period
100.00

Memo Item
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
C. COWAN, ROBERT, B., MR.,

Mailing Address **1900 S LEWIS STREET**

City ANAHEIM	State CA	Zip Code 92805-6718
------------------------	--------------------	-------------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) MARINA LANDSCAPE	Occupation (for Individual) PRESIDENT
--	---

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
2500.00

Date of Receipt
10 / 28 / 2016

Transaction ID : SA11A.454696

Amount of Each Receipt this Period
500.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	700.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 751 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. COWDREY, RON, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3601 OLSEN BLVD.
 City AMARILLO State TX Zip Code 79109-3020
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) R.B. ENTERTAINMENT INC. Occupation (for Individual) G.M.
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 375.00

Date of Receipt 11 / 02 / 2016
Transaction ID : SA11A.466889
 Amount of Each Receipt this Period 75.00
 Memo Item CONTRIBUTION

B. COWEN, BARBARA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 154 ESSEX DRIVE
 City TENAFLY State NJ Zip Code 07670-2300
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) COWEN & JACOBS Occupation (for Individual) ATTORNEY
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1500.00

Date of Receipt 11 / 02 / 2016
Transaction ID : SA11A.466549
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

C. COWEN, BARBARA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 154 ESSEX DRIVE
 City TENAFLY State NJ Zip Code 07670-2300
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) COWEN & JACOBS Occupation (for Individual) ATTORNEY
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1500.00

Date of Receipt 11 / 02 / 2016
Transaction ID : SA11A.466564
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	575.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 752 OF 4311
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. COX, ARTHUR, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 8213 KERRY ROAD

City CHEVY CHASE	State MD	Zip Code 20815-4807
---------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) CG ENTERPRISES, INC.	Occupation (for Individual) EXECUTIVE
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		31		2016

Transaction ID : SA11A.458915

Amount of Each Receipt this Period
250.00

Memo Item
CONTRIBUTION

B. COX, BERRY, R., ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 2100 MCKINNEY AVE STE 1700

City DALLAS	State TX	Zip Code 75201-6975
----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) SELF EMPLOYED	Occupation (for Individual) PRIVATE EQUITY
--	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
5000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		28		2016

Transaction ID : SA11A.449666

Amount of Each Receipt this Period
5000.00

Memo Item
CONTRIBUTION

C. COX, CHARLES, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 14012 BRIDGE AVE.

City MADILL	State OK	Zip Code 73446-8422
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
315.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		29		2016

Transaction ID : SA11A.460364

Amount of Each Receipt this Period
25.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	5275.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 753 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. COX, CLIFFORD, C., MR., JR.
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 230 CEDAR HEIGHTS DRIVE
 City THOUSAND OAKS State CA Zip Code 91360-1755
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 10 / 26 / 2016
Transaction ID : SA11A.450245
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

B. COX, JERRY, S., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5847 SAN FELIPE STE 2575
 City HOUSTON State TX Zip Code 77057-3263
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) COX AND PERKINS Occupation (for Individual) EXECUTIVE
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 5000.00

Date of Receipt 10 / 24 / 2016
Transaction ID : SA11A.443501
 Amount of Each Receipt this Period 5000.00
 Memo Item CONTRIBUTION

C. COX, RONALD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 8420 LINEBROOK DRIVE
 City TRINITY State FL Zip Code 34655-5315
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 11 / 01 / 2016
Transaction ID : SA11A.461654
 Amount of Each Receipt this Period 500.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	5600.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 754 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. COX, SHONA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 64 BELLEFIELD AVE
 City WESTERVILLE State OH Zip Code 43081-1281
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) DR REICH DDS INC Occupation (for Individual) OFF MGR
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 675.00

Date of Receipt 10 / 24 / 2016
Transaction ID : SA11A.449572
 Amount of Each Receipt this Period 50.00
 Memo Item
CONTRIBUTION

B. COX, SHONA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 64 BELLEFIELD AVE
 City WESTERVILLE State OH Zip Code 43081-1281
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) DR REICH DDS INC Occupation (for Individual) OFF MGR
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 675.00

Date of Receipt 10 / 30 / 2016
Transaction ID : SA11A.459882
 Amount of Each Receipt this Period 50.00
 Memo Item
CONTRIBUTION

C. COX, SHONA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 64 BELLEFIELD AVE
 City WESTERVILLE State OH Zip Code 43081-1281
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) DR REICH DDS INC Occupation (for Individual) OFF MGR
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 675.00

Date of Receipt 11 / 02 / 2016
Transaction ID : SA11A.470033
 Amount of Each Receipt this Period 25.00
 Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶ 125.00
TOTAL This Period (last page this line number only).....▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 755 OF 4311
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. COX, SHONA, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address **64 BELLEFIELD AVE**

City WESTERVILLE	State OH	Zip Code 43081-1281
----------------------------	--------------------	-------------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) DR REICH DDS INC	Occupation (for Individual) OFF MGR
--	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **675.00**

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	04	/	2016

Transaction ID : SA11A.473131

Amount of Each Receipt this Period

50.00

Memo Item
CONTRIBUTION

B. COX, SHONA, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address **64 BELLEFIELD AVE**

City WESTERVILLE	State OH	Zip Code 43081-1281
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) DR REICH DDS INC	Occupation (for Individual) OFF MGR
--	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **675.00**

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	07	/	2016

Transaction ID : SA11A.480533

Amount of Each Receipt this Period

50.00

Memo Item
CONTRIBUTION

C. COYLE, JAMES, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address **21 BUNTON STREET**

City MILTON	State MA	Zip Code 02186-5736
-----------------------	--------------------	-------------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
--	---

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼ **405.00**

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	25	/	2016

Transaction ID : SA11A.452108

Amount of Each Receipt this Period

30.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	130.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 756 OF 4311
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. COYLE, JAMES, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 21 BUNTON STREET

City MILTON	State MA	Zip Code 02186-5736
----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
405.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
11		06		2016

Transaction ID : SA11A.477234

Amount of Each Receipt this Period
25.00

Memo Item
CONTRIBUTION

B. CRAGHEAD, WYOMA, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 11394 CR 308

City LLANO	State TX	Zip Code 78643-3506
---------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) SELF EMPLOYED	Occupation (for Individual) BUSINESS OWNER
--	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
425.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
11		07		2016

Transaction ID : SA11A.475706

Amount of Each Receipt this Period
50.00

Memo Item
CONTRIBUTION

C. CRAIG, CHARLES, E., MR, JR.
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 101123 METRONOME DRIVE

City HOUSTON	State TX	Zip Code 77080-
-----------------	-------------	--------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) CRAIG AND HEIDT INC	Occupation (for Individual) VP
--	-----------------------------------

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
600.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
11		08		2016

Transaction ID : SA11A.468005

Amount of Each Receipt this Period
300.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	375.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 757 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. CRAIG, JUDY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 170 RAINBOW DRIVE #7084

City LIVINGSTON	State TX	Zip Code 77399-1070
--------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
740.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 23 / 2016

Transaction ID : SA11A.446295

Amount of Each Receipt this Period
25.00

Memo Item
CONTRIBUTION

B. CRAIG, JUDY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 170 RAINBOW DRIVE #7084

City LIVINGSTON	State TX	Zip Code 77399-1070
--------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
740.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 26 / 2016

Transaction ID : SA11A.454373

Amount of Each Receipt this Period
25.00

Memo Item
CONTRIBUTION

C. CRAIG, JUDY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 170 RAINBOW DRIVE #7084

City LIVINGSTON	State TX	Zip Code 77399-1070
--------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
740.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 31 / 2016

Transaction ID : SA11A.464388

Amount of Each Receipt this Period
25.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	75.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 758 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. CRAIG, JUDY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 170 RAINBOW DRIVE #7084
 City LIVINGSTON State TX Zip Code 77399-1070
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 740.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 11 / 03 / 2016
Transaction ID : SA11A.468704
 Amount of Each Receipt this Period
 25.00
 Memo Item
 CONTRIBUTION

B. CRAIG, JUDY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 170 RAINBOW DRIVE #7084
 City LIVINGSTON State TX Zip Code 77399-1070
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 740.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 11 / 04 / 2016
Transaction ID : SA11A.472928
 Amount of Each Receipt this Period
 25.00
 Memo Item
 CONTRIBUTION

C. CRAIG, JUDY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 170 RAINBOW DRIVE #7084
 City LIVINGSTON State TX Zip Code 77399-1070
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 740.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 11 / 04 / 2016
Transaction ID : SA11A.474078
 Amount of Each Receipt this Period
 30.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	80.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 759 OF 4311
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. CRAIG, KAREN, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 640 BRIGHTSIDE LANE

City PASADENA	State CA	Zip Code 91107-5342
------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
450.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	30	/	2016

Transaction ID : SA11A.460058

Amount of Each Receipt this Period
75.00

Memo Item
CONTRIBUTION

B. CRAIG, KAREN, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 640 BRIGHTSIDE LANE

City PASADENA	State CA	Zip Code 91107-5342
------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
450.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	04	/	2016

Transaction ID : SA11A.471599

Amount of Each Receipt this Period
75.00

Memo Item
CONTRIBUTION

C. CRAIG, KAREN, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 640 BRIGHTSIDE LANE

City PASADENA	State CA	Zip Code 91107-5342
------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
450.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	07	/	2016

Transaction ID : SA11A.480754

Amount of Each Receipt this Period
75.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	225.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 760 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. CRAIG, KAREN, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 640 BRIGHTSIDE LANE

City PASADENA	State CA	Zip Code 91107-5342
------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
450.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	07	/	2016

Transaction ID : SA11A.480756

Amount of Each Receipt this Period
75.00

Memo Item
CONTRIBUTION

B. CRAIG, MONTE, L., ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 59 WARRINGTON CT

City LAKE BLUFF	State IL	Zip Code 60044-1324
--------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
600.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	23	/	2016

Transaction ID : SA11A.449607

Amount of Each Receipt this Period
50.00

Memo Item
CONTRIBUTION

C. CRAIG, MONTE, L., ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 59 WARRINGTON CT

City LAKE BLUFF	State IL	Zip Code 60044-1324
--------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
600.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	04	/	2016

Transaction ID : SA11A.470284

Amount of Each Receipt this Period
100.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	225.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 761 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. CRAIG, MONTE, L., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 59 WARRINGTON CT
 City LAKE BLUFF State IL Zip Code 60044-1324
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 600.00

Date of Receipt
 11 / 04 / 2016
Transaction ID : SA11A.470287
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION

B. CRAIG, MONTE, L., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 59 WARRINGTON CT
 City LAKE BLUFF State IL Zip Code 60044-1324
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 600.00

Date of Receipt
 11 / 04 / 2016
Transaction ID : SA11A.470288
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION

C. CRAIG, PHYLLIS, R., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO BOX 614
 City NUCLA State CO Zip Code 81424-0614
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 245.00

Date of Receipt
 10 / 25 / 2016
Transaction ID : SA11A.447347
 Amount of Each Receipt this Period
 35.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	235.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 762 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. CRAIG, PHYLLIS, R., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO BOX 614
 City NUCLA State CO Zip Code 81424-0614
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 245.00

Date of Receipt
 11 / 08 / 2016
Transaction ID : SA11A.467986
 Amount of Each Receipt this Period
 35.00
 Memo Item
 CONTRIBUTION

B. CRAIG, SANDRA, K., MRS.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 12309 MOTLEY ROAD
 City PEYTON State CO Zip Code 80831-7984
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 650.00

Date of Receipt
 10 / 25 / 2016
Transaction ID : SA11A.447307
 Amount of Each Receipt this Period
 200.00
 Memo Item
 CONTRIBUTION

C. CRAIG, SCOTT, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 13556 ISHNALA COURT
 City WELLINGTON State FL Zip Code 33414-7801
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) OFFICE DEPOT Occupation (for Individual) TREASURY
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt
 10 / 26 / 2016
Transaction ID : SA11A.451145
 Amount of Each Receipt this Period
 250.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	485.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 763 OF 4311
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. CRAIG, SCOTT, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 13556 ISHNALA COURT

City WELLINGTON	State FL	Zip Code 33414-7801
--------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) OFFICE DEPOT	Occupation (for Individual) TREASURY
---	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		26		2016

Transaction ID : SA11A.451147

Amount of Each Receipt this Period
250.00

Memo Item
CONTRIBUTION

B. CRAIN, GARY, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address PO BOX 2580

City SOUTHAMPTON	State NY	Zip Code 11969-2580
---------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) INFORMATION REQUESTED PER BEST EFFORTS	Occupation (for Individual) INFORMATION REQUESTED PER BE
---	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		28		2016

Transaction ID : SA11A.454808

Amount of Each Receipt this Period
500.00

Memo Item
CONTRIBUTION

C. CRAIN, JOHN, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1706 COVENTRY LN

City NICHOLS HILLS	State OK	Zip Code 73120-1004
-----------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
600.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		24		2016

Transaction ID : SA11A.449137

Amount of Each Receipt this Period
25.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	775.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 764 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. CRAIN, JOHN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1706 COVENTRY LN
 City NICHOLS HILLS State OK Zip Code 73120-1004
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 600.00

Date of Receipt 10 / 27 / 2016
Transaction ID : SA11A.453286
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

B. CRAIN, JOHN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1706 COVENTRY LN
 City NICHOLS HILLS State OK Zip Code 73120-1004
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 600.00

Date of Receipt 10 / 31 / 2016
Transaction ID : SA11A.463452
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

C. CRAIN, JOHN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1706 COVENTRY LN
 City NICHOLS HILLS State OK Zip Code 73120-1004
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 600.00

Date of Receipt 11 / 06 / 2016
Transaction ID : SA11A.478180
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶ 100.00
TOTAL This Period (last page this line number only).....▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 765 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. CRAIN, SUSAN, R., MISS,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 7182 CHAMPIONS LANE

City WEST CHESTER	State OH	Zip Code 45069-4634
----------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) SELF EMPLOYED	Occupation (for Individual) CPA
--	------------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
550.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
11		04		2016

Transaction ID : SA11A.479424

Amount of Each Receipt this Period
100.00

Memo Item
CONTRIBUTION

B. CRAIN, SUSAN, R., MISS,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 7182 CHAMPIONS LANE

City WEST CHESTER	State OH	Zip Code 45069-4634
----------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) SELF EMPLOYED	Occupation (for Individual) CPA
--	------------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
550.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
11		04		2016

Transaction ID : SA11A.479426

Amount of Each Receipt this Period
50.00

Memo Item
CONTRIBUTION

C. CRAIN, SUSAN, R., MISS,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 7182 CHAMPIONS LANE

City WEST CHESTER	State OH	Zip Code 45069-4634
----------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) SELF EMPLOYED	Occupation (for Individual) CPA
--	------------------------------------

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
550.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
11		04		2016

Transaction ID : SA11A.479427

Amount of Each Receipt this Period
50.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	200.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 766 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. CRANDALL, L. DALE, DALE, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 698 ARKANSAS STREET
 City SAN FRANCISCO State CA Zip Code 94107-2831
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) PREDMONT CORP ADVISORS Occupation (for Individual) EXECUTIVE
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 3000.00

Date of Receipt 11 / 01 / 2016
Transaction ID : SA11A.461547
 Amount of Each Receipt this Period 1000.00
 Memo Item CONTRIBUTION

B. CRANE, WILLIAM, A., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 863 PEMBRIDGE DRIVE
 City LAKE FOREST State IL Zip Code 60045-4202
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 750.00

Date of Receipt 10 / 20 / 2016
Transaction ID : SA11A.433408
 Amount of Each Receipt this Period 500.00
 Memo Item CONTRIBUTION

C. CRANNEY, MICHAEL, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 503 W 1300 S
 City OAKLEY State ID Zip Code 83346-9756
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 1750.00

Date of Receipt 10 / 25 / 2016
Transaction ID : SA11A.448879
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	1750.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 767 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. CRANNEY, MICHAEL, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 503 W 1300 S
 City OAKLEY State ID Zip Code 83346-9756
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1750.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 04 / 2016
Transaction ID : SA11A.472500
 Amount of Each Receipt this Period
 250.00
 Memo Item
 CONTRIBUTION

B. CRARY, MARGARET, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 8401 E WOODLAND ROAD
 City TUCSON State AZ Zip Code 85749-8140
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 24 / 2016
Transaction ID : SA11A.443742
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION

C. CRAVEN, KAY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4 FREMONTIA
 City PORTOLA VALLEY State CA Zip Code 94028-8032
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 29 / 2016
Transaction ID : SA11A.460662
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	450.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 768 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. CRAWFORD, WAYNE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 16164 SIERRA HWY
 City SANTA CLARITA State CA Zip Code 91390-4733
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SANTA CLARITA CONCRETE Occupation (for Individual) CEO
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 350.00

Date of Receipt **11 / 02 / 2016**
Transaction ID : SA11A.466195
 Amount of Each Receipt this Period 100.00
 Memo Item
CONTRIBUTION

B. CRAY, SANDRA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 6267 S. MILLER CT.
 City LITTLETON State CO Zip Code 80127-5584
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 325.00

Date of Receipt **10 / 31 / 2016**
Transaction ID : SA11A.458063
 Amount of Each Receipt this Period 25.00
 Memo Item
CONTRIBUTION

C. CREAMER, GLENN, M., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 107 NAYATT ROAD
 City BARRINGTON State RI Zip Code 02806-3300
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) PROVIDENCE EQUITY PARTNERS INC Occupation (for Individual) PRIVATE EQUITY INVESTOR
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 50000.00

Date of Receipt **10 / 28 / 2016**
Transaction ID : SA11A.449669
 Amount of Each Receipt this Period 50000.00
 Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	50125.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 769 OF 4311
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. CREAMER, MARY, JANE, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 107 NAYATT RD
 City BARRINGTON State RI Zip Code 02806-3300
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) HOMEMAKER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 50000.00

Date of Receipt **10 / 28 / 2016**
Transaction ID : SA11A.449695
 Amount of Each Receipt this Period 50000.00
 Memo Item CONTRIBUTION

B. CREASMAN, RAYMOND, L., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 24434 MOSS CREEK LANE
 City PONTE VEDRA BEACH State FL Zip Code 32082-2141
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SWISHER INTERNATIONAL, INC. Occupation (for Individual) EXECUTIVE
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 2000.00

Date of Receipt **10 / 24 / 2016**
Transaction ID : SA11A.443475
 Amount of Each Receipt this Period 2000.00
 Memo Item CONTRIBUTION

C. CREEDON, JOHN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address ONE PRYER LANE
 City LARCHMONT State NY Zip Code 10538-4012
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt **10 / 24 / 2016**
Transaction ID : SA11A.443875
 Amount of Each Receipt this Period 500.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	52500.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 770 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
Team Ryan

A. CREWS, NITA, , MS.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 221 MOORE STREET
 City PRESCOTT State AR Zip Code 71857-2645
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 28 / 2016
Transaction ID : SA11A.456153
 Amount of Each Receipt this Period
 25.00
 Memo Item
 CONTRIBUTION

B. CREWS, NITA, , MS.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 221 MOORE STREET
 City PRESCOTT State AR Zip Code 71857-2645
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 04 / 2016
Transaction ID : SA11A.472194
 Amount of Each Receipt this Period
 25.00
 Memo Item
 CONTRIBUTION

C. CRISAFULLI, C., , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 283 MURRAY AVENUE
 City DELMAR State NY Zip Code 12054-9708
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 950.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 27 / 2016
Transaction ID : SA11A.452285
 Amount of Each Receipt this Period
 500.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	550.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 771 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
Team Ryan

A. CRISAFULLI, C., , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 283 MURRAY AVENUE
 City DELMAR State NY Zip Code 12054-9708
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 950.00

Date of Receipt 10 / 27 / 2016
Transaction ID : SA11A.452296
 Amount of Each Receipt this Period 200.00
 Memo Item CONTRIBUTION

B. CRISLER, BARBARA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5284 BARDWELL AVENUE
 City RIVERSIDE State CA Zip Code 92506-1517
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 475.00

Date of Receipt 10 / 26 / 2016
Transaction ID : SA11A.451003
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

C. CRISP, GREGORY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 9711 MASON AVE.
 City CHATSWORTH State CA Zip Code 91311-5208
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) INVELOP INC. Occupation (for Individual) PRESIDENT
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 10 / 23 / 2016
Transaction ID : SA11A.446463
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	300.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 772 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
Team Ryan

A. CRISP, GREGORY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 9711 MASON AVE.
 City CHATSWORTH State CA Zip Code 91311-5208
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) INVELOP INC. Occupation (for Individual) PRESIDENT
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 01 / 2016
Transaction ID : SA11A.467284
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION

B. CRISP, GREGORY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 9711 MASON AVE.
 City CHATSWORTH State CA Zip Code 91311-5208
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) INVELOP INC. Occupation (for Individual) PRESIDENT
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 01 / 2016
Transaction ID : SA11A.467286
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION

C. CRISPIN, WILLIAM, H., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 324 MANSION DRIVE
 City ALEXANDRIA State VA Zip Code 22302-2903
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 24 / 2016
Transaction ID : SA11A.443865
 Amount of Each Receipt this Period
 500.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	700.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 773 OF 4311
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
Team Ryan

A. CRITCHFIELD, STEVE, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 30023 STEELHEAD

City CANYON LAKE	State CA	Zip Code 92587-7460
---------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
600.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
10		31		2016

Transaction ID : SA11A.464210

Amount of Each Receipt this Period
50.00

Memo Item
CONTRIBUTION

B. CROCKER, BRUCE, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1250 HAMILTON AVE

City PALO ALTO	State CA	Zip Code 94301-3120
-------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
301.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
10		21		2016

Transaction ID : SA11A.444251

Amount of Each Receipt this Period
100.00

Memo Item
CONTRIBUTION

C. CROCKER, BRUCE, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1250 HAMILTON AVE

City PALO ALTO	State CA	Zip Code 94301-3120
-------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
301.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
10		21		2016

Transaction ID : SA11A.444255

Amount of Each Receipt this Period
100.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	250.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 774 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. CROCKER, BRUCE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1250 HAMILTON AVE
 City PALO ALTO State CA Zip Code 94301-3120
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 301.00

Date of Receipt 10 / 21 / 2016
Transaction ID : SA11A.444260
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

B. CROCKETT, PATRICIA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 10326 RAINIER AVENUE S
 City SEATTLE State WA Zip Code 98178-2614
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 480.00

Date of Receipt 11 / 02 / 2016
Transaction ID : SA11A.466551
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

C. CROCKETT, PATRICIA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 10326 RAINIER AVENUE S
 City SEATTLE State WA Zip Code 98178-2614
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 480.00

Date of Receipt 11 / 05 / 2016
Transaction ID : SA11A.479296
 Amount of Each Receipt this Period 30.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶ 180.00
TOTAL This Period (last page this line number only).....▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 775 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. CROMAR, MICHAEL, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO BOX 3025
 City RANCHO CORDOVA State CA Zip Code 95741-3025
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt 10 / 26 / 2016
Transaction ID : SA11A.450881
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

B. CROMAR, MICHAEL, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO BOX 3025
 City RANCHO CORDOVA State CA Zip Code 95741-3025
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt 10 / 31 / 2016
Transaction ID : SA11A.464172
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

C. CROMAR, MICHAEL, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO BOX 3025
 City RANCHO CORDOVA State CA Zip Code 95741-3025
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt 10 / 31 / 2016
Transaction ID : SA11A.464195
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 300.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 776 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. CROMAR, MICHAEL, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO BOX 3025

City RANCHO CORDOVA	State CA	Zip Code 95741-3025
------------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
400.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 02 / 2016
Transaction ID : SA11A.469487

Amount of Each Receipt this Period
100.00

Memo Item
CONTRIBUTION

B. CROMER, MARSHALL, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4701 OAKPORT STREET

City OAKLAND	State CA	Zip Code 94601-4906
-----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) CROMER MATERIAL HANDLING	Occupation (for Individual) PRESIDENT
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
550.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 29 / 2016
Transaction ID : SA11A.460850

Amount of Each Receipt this Period
250.00

Memo Item
CONTRIBUTION

C. CRONK, JANET, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address THE TRAYNOR GROUP
 PO BOX 6240

City ALBANY	State CA	Zip Code 94706-0240
----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 26 / 2016
Transaction ID : SA11A.449858

Amount of Each Receipt this Period
250.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	600.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 777 OF 4311
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
A. CROOK, RICHARD, , ,

Mailing Address **59 DELMAR STREET**

City SAN FRANCISCO	State CA	Zip Code 94117-4005
------------------------------	--------------------	-------------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
--	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **250.00**

Date of Receipt
10 / 27 / 2016

Transaction ID : SA11A.453550

Amount of Each Receipt this Period
25.00

Memo Item CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
B. CROSS, FRIEDA, , ,

Mailing Address **P.O.BOX 384**

City FORT DEPOSIT	State AL	Zip Code 36032-0384
-----------------------------	--------------------	-------------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) CROSS PRINTING	Occupation (for Individual) PRINTER
--	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **225.00**

Date of Receipt
11 / 01 / 2016

Transaction ID : SA11A.462386

Amount of Each Receipt this Period
100.00

Memo Item CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
C. CROSS, FRIEDA, , ,

Mailing Address **P.O.BOX 384**

City FORT DEPOSIT	State AL	Zip Code 36032-0384
-----------------------------	--------------------	-------------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) CROSS PRINTING	Occupation (for Individual) PRINTER
--	---

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼ **225.00**

Date of Receipt
11 / 04 / 2016

Transaction ID : SA11A.472418

Amount of Each Receipt this Period
25.00

Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	150.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 778 OF 4311
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. CROSS MD, ROBERT, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address P.O. BOX 427, 159 PROSPEDT POINT R

City BOMOSEEN	State VT	Zip Code 05732-0427
------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
275.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		24		2016

Transaction ID : SA11A.449403

Amount of Each Receipt this Period
25.00

Memo Item
CONTRIBUTION

B. CROSS MD, ROBERT, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address P.O. BOX 427, 159 PROSPEDT POINT R

City BOMOSEEN	State VT	Zip Code 05732-0427
------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
275.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		27		2016

Transaction ID : SA11A.453638

Amount of Each Receipt this Period
25.00

Memo Item
CONTRIBUTION

C. CROSS MD, ROBERT, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address P.O. BOX 427, 159 PROSPEDT POINT R

City BOMOSEEN	State VT	Zip Code 05732-0427
------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
275.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		31		2016

Transaction ID : SA11A.463239

Amount of Each Receipt this Period
25.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	75.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 779 OF 4311
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. CROSS MD, ROBERT, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address P.O. BOX 427, 159 PROSPEDT POINT R

City BOMOSEEN	State VT	Zip Code 05732-0427
------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
275.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11		03		2016

Transaction ID : SA11A.468928

Amount of Each Receipt this Period
25.00

Memo Item CONTRIBUTION

B. CROSS MD, ROBERT, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address P.O. BOX 427, 159 PROSPEDT POINT R

City BOMOSEEN	State VT	Zip Code 05732-0427
------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
275.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11		03		2016

Transaction ID : SA11A.469084

Amount of Each Receipt this Period
25.00

Memo Item CONTRIBUTION

C. CROSS MD, ROBERT, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address P.O. BOX 427, 159 PROSPEDT POINT R

City BOMOSEEN	State VT	Zip Code 05732-0427
------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
275.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11		07		2016

Transaction ID : SA11A.480015

Amount of Each Receipt this Period
25.00

Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	75.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 780 OF 4311
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
Team Ryan

A. CROSS MD, ROBERT, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address P.O. BOX 427, 159 PROSPEDT POINT R

City BOMOSEEN	State VT	Zip Code 05732-0427
------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
275.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
11	/	07	/	2016

Transaction ID : SA11A.480092

Amount of Each Receipt this Period
25.00

Memo Item
CONTRIBUTION

B. CROUCH, DENNIS, E., MR., USAF (RET)
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 3069 RANCHFIELD DRIVE

City BEAVERCREEK	State OH	Zip Code 45432-2610
---------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
320.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
10	/	26	/	2016

Transaction ID : SA11A.450710

Amount of Each Receipt this Period
50.00

Memo Item
CONTRIBUTION

C. CROUCH, DENNIS, E., MR., USAF (RET)
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 3069 RANCHFIELD DRIVE

City BEAVERCREEK	State OH	Zip Code 45432-2610
---------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
320.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
10	/	31	/	2016

Transaction ID : SA11A.463169

Amount of Each Receipt this Period
25.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	100.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 781 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
-----------------------------	-----------------------------	-----------------------------

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NAME OF COMMITTEE (In Full)
Team Ryan

A. CROUSE, STEPHEN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1101 RIDGEMONT ROAD
 City WATERLOO State IA Zip Code 50701-4841
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) JOHN DEERE, PEC Occupation (for Individual) ENGINEER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 01 / 2016
Transaction ID : SA11A.461545
 Amount of Each Receipt this Period
 200.00
 Memo Item
 CONTRIBUTION

B. CROW, KATHERINE, RAYMOND, MRS.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4700 PRESTON ROAD
 City DALLAS State TX Zip Code 75205-3712
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) HOMEMAKER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 41100.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 28 / 2016
Transaction ID : SA11A.449664
 Amount of Each Receipt this Period
 41100.00
 Memo Item
 CONTRIBUTION

C. CROW, RITA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 107 BELLE LANE
 City PORT LAVACA State TX Zip Code 77979-2000
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 27 / 2016
Transaction ID : SA11A.452862
 Amount of Each Receipt this Period
 250.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	41550.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 782 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. CROWDER, DARLENE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 6202 JEFFERSON BLVD
 City FREDERICK State MD Zip Code 21703-5808
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) REALTOR
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 550.00

Date of Receipt 10 / 31 / 2016
Transaction ID : SA11A.463880
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

B. CROWDER, JANET, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 40 SAWYERS POINT RD.
 City MIRROR LAKE State NH Zip Code 03853-6057
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1250.00

Date of Receipt 10 / 27 / 2016
Transaction ID : SA11A.454009
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

C. CROWDER, WAYNE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 6202 JEFFERSON BOULEVARD
 City FREDERICK State MD Zip Code 21703-5808
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF Occupation (for Individual) PEDIATRICIAN
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt 10 / 21 / 2016
Transaction ID : SA11A.447114
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	400.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 783 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. CROWLEY, DANIEL, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1730 I ST STE 101

City SACRAMENTO	State CA	Zip Code 95811-3017
--------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) DYNAMIC HEALTHCARE SOLUTIONS	Occupation (for Individual) CHAIRMAN
---	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
5000.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 03 / 2016
Transaction ID : SA11A.465234

Amount of Each Receipt this Period
5000.00

Memo Item
CONTRIBUTION

B. CROWN, JAMIE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 17700 LONGDRAFT ROAD

City GAITHERSBURG	State MD	Zip Code 20878-1117
----------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) BOWMAN CONSULTING GROUP	Occupation (for Individual) PLANNER
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1500.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 30 / 2016
Transaction ID : SA11A.460225

Amount of Each Receipt this Period
500.00

Memo Item
CONTRIBUTION

C. CROWN, JAMIE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 17700 LONGDRAFT ROAD

City GAITHERSBURG	State MD	Zip Code 20878-1117
----------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) BOWMAN CONSULTING GROUP	Occupation (for Individual) PLANNER
--	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
1500.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 04 / 2016
Transaction ID : SA11A.470847

Amount of Each Receipt this Period
500.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	6000.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 784 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. CROWTHER, MARY, D., MRS.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 8431 BRIAR LANE
 City PRAIRIE VILLAGE State KS Zip Code 66207-1746
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 600.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 26 / 2016
Transaction ID : SA11A.451171
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION

B. CROWTHER, MARY, D., MRS.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 8431 BRIAR LANE
 City PRAIRIE VILLAGE State KS Zip Code 66207-1746
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 600.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 07 / 2016
Transaction ID : SA11A.476480
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION

C. CRUIKSHANK, ROBERT, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4520 HARRIS TRAIL
 City ATLANTA State GA Zip Code 30327-3824
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 07 / 2016
Transaction ID : SA11A.474992
 Amount of Each Receipt this Period
 1000.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	1200.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 785 OF 4311
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. CRUMBAUGH, DAVID, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1040 N. LAKESHORE DRIVE
10-A

City CHICAGO State IL Zip Code 60611-1165

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) LATHAM & WATKINS LLP Occupation (for Individual) ATTORNEY

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 950.00

Date of Receipt 10 / 23 / 2016
Transaction ID : SA11A.446431

Amount of Each Receipt this Period 250.00

Memo Item CONTRIBUTION

B. CRUMBAUGH, DAVID, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1040 N. LAKESHORE DRIVE
10-A

City CHICAGO State IL Zip Code 60611-1165

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) LATHAM & WATKINS LLP Occupation (for Individual) ATTORNEY

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 950.00

Date of Receipt 10 / 23 / 2016
Transaction ID : SA11A.446432

Amount of Each Receipt this Period 250.00

Memo Item CONTRIBUTION

C. CRYER, JOANNE, R., ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 40427 DOLERITA AVENUE

City FREMONT State CA Zip Code 94539-3097

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED

Receipt For: Primary General Other (specify)

Aggregate Year-to-Date ▼ 375.00

Date of Receipt 11 / 03 / 2016
Transaction ID : SA11A.468509

Amount of Each Receipt this Period 75.00

Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 575.00

TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 786 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. CSEPLO, KATHRYN, E., MS.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1281 BONNIEVIEW
 City LAKEWOOD State OH Zip Code 44107-2330
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 320.00

Date of Receipt
 11 / 07 / 2016
Transaction ID : SA11A.474613
 Amount of Each Receipt this Period 30.00
 Memo Item CONTRIBUTION

B. CSEPLO, KATHRYN, E., MS.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1281 BONNIEVIEW
 City LAKEWOOD State OH Zip Code 44107-2330
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 320.00

Date of Receipt
 11 / 07 / 2016
Transaction ID : SA11A.474615
 Amount of Each Receipt this Period 30.00
 Memo Item CONTRIBUTION

C. CSEPLO, KATHRYN, E., MS.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1281 BONNIEVIEW
 City LAKEWOOD State OH Zip Code 44107-2330
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 320.00

Date of Receipt
 11 / 05 / 2016
Transaction ID : SA11A.478966
 Amount of Each Receipt this Period 30.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	90.00
TOTAL This Period (last page this line number only).....▶	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 787 OF 4311
<input checked="" type="checkbox"/>	11a	<input type="checkbox"/>	11b
<input type="checkbox"/>	13	<input type="checkbox"/>	14
<input type="checkbox"/>		<input type="checkbox"/>	11c
<input type="checkbox"/>		<input type="checkbox"/>	12
<input type="checkbox"/>		<input type="checkbox"/>	15
<input type="checkbox"/>		<input type="checkbox"/>	16
<input type="checkbox"/>		<input type="checkbox"/>	17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. CSEPLO, KATHRYN, E., MS.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1281 BONNIEVIEW
 City LAKEWOOD State OH Zip Code 44107-2330
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 320.00

Date of Receipt
 11 / 05 / 2016
Transaction ID : SA11A.478967
 Amount of Each Receipt this Period 30.00
 Memo Item CONTRIBUTION

B. CSEPLO, KATHRYN, E., MS.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1281 BONNIEVIEW
 City LAKEWOOD State OH Zip Code 44107-2330
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 320.00

Date of Receipt
 11 / 05 / 2016
Transaction ID : SA11A.478972
 Amount of Each Receipt this Period 30.00
 Memo Item CONTRIBUTION

C. CSEPLO, KATHRYN, E., MS.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1281 BONNIEVIEW
 City LAKEWOOD State OH Zip Code 44107-2330
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 320.00

Date of Receipt
 11 / 05 / 2016
Transaction ID : SA11A.478974
 Amount of Each Receipt this Period 30.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	90.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 788 OF 4311
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. CSERVENYAK, FRANK, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 3260 EXECUTIVE DRIVE

City JOLIET	State IL	Zip Code 60431-2822
----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) RCK LAW FIRM	Occupation (for Individual) ATTORNEY
---	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
11		08		2016

Transaction ID : SA11A.479739

Amount of Each Receipt this Period
250.00

Memo Item
CONTRIBUTION

B. CUCINELL, MARK, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 8 MOUNTAIN VIEW AVENUE

City RIDGEFIELD	State CT	Zip Code 06877-4010
--------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) BELWAY ELECTRICAL CONTRACTING	Occupation (for Individual) ELECTRICAL CONTRACTOR
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
500.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
11		07		2016

Transaction ID : SA11A.480233

Amount of Each Receipt this Period
250.00

Memo Item
CONTRIBUTION

C. CULBERTSON, ROBERT, M., MR., JR.
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address P.O. BOX 53

City DELAVAN	State IL	Zip Code 61734-0053
-----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) RETIRED	Occupation (for Individual) RETIRED
--	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
550.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
10		26		2016

Transaction ID : SA11A.447622

Amount of Each Receipt this Period
250.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	750.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 789 OF 4311
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. CULBERSON, SAMUEL, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 2680 MISTY MEADOW DRIVE

City PROSPER	State TX	Zip Code 75078-9745
-----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) RIMKUS CONSULTING GROUP	Occupation (for Individual) EXECUTIVE
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
900.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		31		2016

Transaction ID : SA11A.463618

Amount of Each Receipt this Period
500.00

Memo Item CONTRIBUTION

B. CULBERSON, SAMUEL, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 2680 MISTY MEADOW DRIVE

City PROSPER	State TX	Zip Code 75078-9745
-----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) RIMKUS CONSULTING GROUP	Occupation (for Individual) EXECUTIVE
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
900.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11		07		2016

Transaction ID : SA11A.475761

Amount of Each Receipt this Period
100.00

Memo Item CONTRIBUTION

C. CULLEN, WILLIAM, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 93 CRESTA VERDE DR.

City ROLLING HILLS ESTA	State CA	Zip Code 90274-5456
----------------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
350.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		30		2016

Transaction ID : SA11A.464906

Amount of Each Receipt this Period
100.00

Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	700.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 790 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. CULLUM, JANE, K., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO BOX 90
 City TAFTON State PA Zip Code 18464-0090
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 370.00

Date of Receipt 11 / 01 / 2016
Transaction ID : SA11A.462407
 Amount of Each Receipt this Period 35.00
 Memo Item CONTRIBUTION

B. CULLUM, ROBERT, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 6600 TURTLE CREEK BOULEVARD
 City DALLAS State TX Zip Code 75205-1246
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) FARIWAY CAPITAL PARTNER Occupation (for Individual) REAL ESTATE DEVELOPER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 11 / 01 / 2016
Transaction ID : SA11A.462387
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

C. CUMMINGS, ANTHONY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 625 HAMILTON STREET
 City EASTON State PA Zip Code 18042-1505
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) LAFAYETTE COLLEGE Occupation (for Individual) COLLEGE PROFESSOR
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 10 / 24 / 2016
Transaction ID : SA11A.445774
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	535.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 791 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
Team Ryan

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
A. CUMMINS, CONNIE, , ,

Mailing Address 2929 BUFFALO SPEEDWAY
908

City HOUSTON State TX Zip Code 77098-1720

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
264.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 07 / 2016
Transaction ID : SA11A.475718

Amount of Each Receipt this Period
25.00

Memo Item CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
B. CUMMINS, JOAN, , MS.,

Mailing Address 2608 ASHLEY WOODS DRIVE

City WESTCHESTER State IL Zip Code 60154-5908

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1735.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 02 / 2016
Transaction ID : SA11A.466156

Amount of Each Receipt this Period
50.00

Memo Item CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
C. CUMMINS, JOAN, , MS.,

Mailing Address 2608 ASHLEY WOODS DRIVE

City WESTCHESTER State IL Zip Code 60154-5908

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
1735.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 02 / 2016
Transaction ID : SA11A.466160

Amount of Each Receipt this Period
50.00

Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 125.00

TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 792 OF 4311
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. CUMMINS, JOAN, , MS.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 2608 ASHLEY WOODS DRIVE

City WESTCHESTER	State IL	Zip Code 60154-5908
---------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1735.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11		01		2016

Transaction ID : SA11A.467327

Amount of Each Receipt this Period
100.00

Memo Item
CONTRIBUTION

B. CUMMINS, JOAN, , MS.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 2608 ASHLEY WOODS DRIVE

City WESTCHESTER	State IL	Zip Code 60154-5908
---------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1735.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11		01		2016

Transaction ID : SA11A.467335

Amount of Each Receipt this Period
50.00

Memo Item
CONTRIBUTION

C. CUMMINS, JOAN, , MS.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 2608 ASHLEY WOODS DRIVE

City WESTCHESTER	State IL	Zip Code 60154-5908
---------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
1735.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11		06		2016

Transaction ID : SA11A.478141

Amount of Each Receipt this Period
100.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	250.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 793 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. CUMMINS, JOAN, , MS.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2608 ASHLEY WOODS DRIVE
 City WESTCHESTER State IL Zip Code 60154-5908
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1735.00

Date of Receipt
 11 / 05 / 2016
Transaction ID : SA11A.478460
 Amount of Each Receipt this Period
 50.00
 Memo Item
 CONTRIBUTION

B. CUMMINS, JOAN, , MS.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2608 ASHLEY WOODS DRIVE
 City WESTCHESTER State IL Zip Code 60154-5908
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1735.00

Date of Receipt
 11 / 05 / 2016
Transaction ID : SA11A.478463
 Amount of Each Receipt this Period
 50.00
 Memo Item
 CONTRIBUTION

C. CUMMINS, JOAN, , MS.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2608 ASHLEY WOODS DRIVE
 City WESTCHESTER State IL Zip Code 60154-5908
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1735.00

Date of Receipt
 11 / 05 / 2016
Transaction ID : SA11A.478522
 Amount of Each Receipt this Period
 50.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 150.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 794 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. CUMMINS, JOAN, , MS.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2608 ASHLEY WOODS DRIVE
 City WESTCHESTER State IL Zip Code 60154-5908
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1735.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 05 / 2016
Transaction ID : SA11A.478527
 Amount of Each Receipt this Period
 50.00
 Memo Item
 CONTRIBUTION

B. CUNIFFE, AMY, JENSEN, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 7715 CROSSOVER DR
 City MC LEAN State VA Zip Code 22102-2507
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) EY Occupation (for Individual) PRINCIPAL
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 10000.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 24 / 2016
Transaction ID : SA11A.481119
 Amount of Each Receipt this Period
 2500.00
 Memo Item
 CONTRIBUTION

C. CUOMO, JOHN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 23 LONDON LN
 City ENDICOTT State NY Zip Code 13760-4233
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF Occupation (for Individual) JOHN P CUOMO
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 225.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 05 / 2016
Transaction ID : SA11A.478464
 Amount of Each Receipt this Period
 50.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	2600.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 795 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. CUOMO, JOHN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 23 LONDON LN
 City ENDICOTT State NY Zip Code 13760-4233
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF Occupation (for Individual) JOHN P CUOMO
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 225.00

Date of Receipt
 11 / 05 / 2016
Transaction ID : SA11A.478467
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

B. CUOMO, JOHN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 23 LONDON LN
 City ENDICOTT State NY Zip Code 13760-4233
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF Occupation (for Individual) JOHN P CUOMO
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 225.00

Date of Receipt
 11 / 05 / 2016
Transaction ID : SA11A.478473
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

C. CUOMO, JOHN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 23 LONDON LN
 City ENDICOTT State NY Zip Code 13760-4233
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF Occupation (for Individual) JOHN P CUOMO
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 225.00

Date of Receipt
 11 / 05 / 2016
Transaction ID : SA11A.478475
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶ 150.00
TOTAL This Period (last page this line number only).....▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 796 OF 4311
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. CURRAN, LINDA, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 7209 HANOVER ST.

City HANOVER PARK	State IL	Zip Code 60133-3311
----------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
375.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		28		2016

Transaction ID : SA11A.456074

Amount of Each Receipt this Period
25.00

Memo Item
CONTRIBUTION

B. CURRAN, LINDA, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 7209 HANOVER ST.

City HANOVER PARK	State IL	Zip Code 60133-3311
----------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
375.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11		04		2016

Transaction ID : SA11A.471147

Amount of Each Receipt this Period
25.00

Memo Item
CONTRIBUTION

C. CURRY, ANDREW, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1206 COUNTRY CLUB LN

City TEXARKANA	State AR	Zip Code 71854-7719
-------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) SELF EMPLOYED	Occupation (for Individual) DENTIST
--	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
10000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		24		2016

Transaction ID : SA11A.444075

Amount of Each Receipt this Period
10000.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	10050.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 797 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. CURTIN, ELLEN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 148 BRENTWOOD PLACE
 City FORT THOMAS State KY Zip Code 41075-2404
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) THOMSON REUTERS Occupation (for Individual) TRANSCRIPT EDITOR
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 24 / 2016
Transaction ID : SA11A.449377
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION

B. CURTIN, ELLEN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 148 BRENTWOOD PLACE
 City FORT THOMAS State KY Zip Code 41075-2404
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) THOMSON REUTERS Occupation (for Individual) TRANSCRIPT EDITOR
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 24 / 2016
Transaction ID : SA11A.449379
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION

C. CURTISS, FRANCES, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3747 PEACHTREE ROAD NE
 APT 1924
 City ATLANTA State GA Zip Code 30319-1337
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 28 / 2016
Transaction ID : SA11A.454710
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	300.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 798 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. CURTIS, KEVIN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 937 8TH ST
 City MANHATTAN BEACH State CA Zip Code 90266-5930
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) CURTIS Occupation (for Individual) MFG
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 10 / 25 / 2016
Transaction ID : SA11A.447863
 Amount of Each Receipt this Period 50.00
 Memo Item
CONTRIBUTION

B. CURTIS, KEVIN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 937 8TH ST
 City MANHATTAN BEACH State CA Zip Code 90266-5930
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) CURTIS Occupation (for Individual) MFG
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 10 / 27 / 2016
Transaction ID : SA11A.453165
 Amount of Each Receipt this Period 50.00
 Memo Item
CONTRIBUTION

C. CURTIS, KEVIN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 937 8TH ST
 City MANHATTAN BEACH State CA Zip Code 90266-5930
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) CURTIS Occupation (for Individual) MFG
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 11 / 01 / 2016
Transaction ID : SA11A.467418
 Amount of Each Receipt this Period 50.00
 Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	150.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 799 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. CURTIS, KEVIN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 937 8TH ST
 City MANHATTAN BEACH State CA Zip Code 90266-5930
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) CURTIS Occupation (for Individual) MFG
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 11 / 04 / 2016
Transaction ID : SA11A.474070
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

B. CURTNER, WALTER, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 8240 E. OTERO CIR.
 City CENTENNIAL State CO Zip Code 80112-3309
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 11 / 02 / 2016
Transaction ID : SA11A.469975
 Amount of Each Receipt this Period 75.00
 Memo Item CONTRIBUTION

C. CUSTER, CARYL, M., MS.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5011 MONTICELLO CT
 City MIDLAND State TX Zip Code 79705-2641
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 350.00

Date of Receipt 10 / 28 / 2016
Transaction ID : SA11A.455013
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 225.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 800 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. CUSTER, CARYL, M., MS.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5011 MONTICELLO CT
 City MIDLAND State TX Zip Code 79705-2641
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 350.00

Date of Receipt 11 / 07 / 2016
Transaction ID : SA11A.476258
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

B. CUSTER, CARYL, M., MS.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5011 MONTICELLO CT
 City MIDLAND State TX Zip Code 79705-2641
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 350.00

Date of Receipt 11 / 06 / 2016
Transaction ID : SA11A.477875
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

C. CUTHRELL, DAVID, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 17584 CERRO VERDE DRIVE
 City YORBA LINDA State CA Zip Code 92886-3862
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 355.00

Date of Receipt 10 / 26 / 2016
Transaction ID : SA11A.450046
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	200.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 801 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. CUTHRELL, DAVID, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 17584 CERRO VERDE DRIVE
 City YORBA LINDA State CA Zip Code 92886-3862
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 355.00

Date of Receipt **10 / 31 / 2016**
Transaction ID : SA11A.459156
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

B. CUTHRELL, DAVID, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 17584 CERRO VERDE DRIVE
 City YORBA LINDA State CA Zip Code 92886-3862
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 355.00

Date of Receipt **11 / 04 / 2016**
Transaction ID : SA11A.471628
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

C. CUTHRELL, DAVID, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 17584 CERRO VERDE DRIVE
 City YORBA LINDA State CA Zip Code 92886-3862
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 355.00

Date of Receipt **11 / 06 / 2016**
Transaction ID : SA11A.478214
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 125.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 802 OF 4311
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. CZER, LAWRENCE, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 418 9TH ST.
City SANTA MONICA State CA Zip Code 90402-1928
FEC ID number of contributing federal political committee. **C**
Name of Employer (for Individual) CEDARS-SINAI HEALTH SYSTEM Occupation (for Individual) HEALTHCARE
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 1050.00

Date of Receipt 10 / 26 / 2016
Transaction ID : SA11A.450043
Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

B. CZER, LAWRENCE, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 418 9TH ST.
City SANTA MONICA State CA Zip Code 90402-1928
FEC ID number of contributing federal political committee. **C**
Name of Employer (for Individual) CEDARS-SINAI HEALTH SYSTEM Occupation (for Individual) HEALTHCARE
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 1050.00

Date of Receipt 10 / 26 / 2016
Transaction ID : SA11A.450045
Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

C. CZER, LAWRENCE, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 418 9TH ST.
City SANTA MONICA State CA Zip Code 90402-1928
FEC ID number of contributing federal political committee. **C**
Name of Employer (for Individual) CEDARS-SINAI HEALTH SYSTEM Occupation (for Individual) HEALTHCARE
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 1050.00

Date of Receipt 10 / 31 / 2016
Transaction ID : SA11A.463540
Amount of Each Receipt this Period 75.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 275.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 803 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. CZER, LAWRENCE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 418 9TH ST.
 City SANTA MONICA State CA Zip Code 90402-1928
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) CEDARS-SINAI HEALTH SYSTEM Occupation (for Individual) HEALTHCARE
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1050.00

Date of Receipt 10 / 31 / 2016
Transaction ID : SA11A.463545
 Amount of Each Receipt this Period 75.00
 Memo Item CONTRIBUTION

B. CZER, LAWRENCE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 418 9TH ST.
 City SANTA MONICA State CA Zip Code 90402-1928
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) CEDARS-SINAI HEALTH SYSTEM Occupation (for Individual) HEALTHCARE
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1050.00

Date of Receipt 11 / 04 / 2016
Transaction ID : SA11A.470516
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

C. CZER, LAWRENCE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 418 9TH ST.
 City SANTA MONICA State CA Zip Code 90402-1928
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) CEDARS-SINAI HEALTH SYSTEM Occupation (for Individual) HEALTHCARE
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1050.00

Date of Receipt 11 / 03 / 2016
Transaction ID : SA11A.474441
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	175.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 804 OF 4311
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. CZER, LAWRENCE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 418 9TH ST.
 City SANTA MONICA State CA Zip Code 90402-1928
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) CEDARS-SINAI HEALTH SYSTEM Occupation (for Individual) HEALTHCARE
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1050.00

Date of Receipt 11 / 07 / 2016
Transaction ID : SA11A.475330
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

B. DABBONDANZA, ROD, M., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 12600 PARKLAND DRIVE
 City ROCKVILLE State MD Zip Code 20853-3431
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RMD FINANCIAL INC Occupation (for Individual) FINANCE
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 950.00

Date of Receipt 11 / 03 / 2016
Transaction ID : SA11A.469161
 Amount of Each Receipt this Period 200.00
 Memo Item CONTRIBUTION

C. DABNEY, SCOTT, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 8150 N CENTRAL EXPY #750
 City DALLAS State TX Zip Code 75206-1832
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) D&D AFFILIATES, LLC Occupation (for Individual) REAL ESTATE BROKER
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 700.00

Date of Receipt 10 / 21 / 2016
Transaction ID : SA11A.444431
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 350.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 805 OF 4311
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. DABNEY, SCOTT, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 8150 N CENTRAL EXPY #750

City DALLAS	State TX	Zip Code 75206-1832
----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) D&D AFFILIATES, LLC	Occupation (for Individual) REAL ESTATE BROKER
--	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
700.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		27		2016

Transaction ID : SA11A.453105

Amount of Each Receipt this Period
100.00

Memo Item
CONTRIBUTION

B. DABNEY, SCOTT, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 8150 N CENTRAL EXPY #750

City DALLAS	State TX	Zip Code 75206-1832
----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) D&D AFFILIATES, LLC	Occupation (for Individual) REAL ESTATE BROKER
--	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
700.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		31		2016

Transaction ID : SA11A.457877

Amount of Each Receipt this Period
100.00

Memo Item
CONTRIBUTION

C. DABNEY, SCOTT, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 8150 N CENTRAL EXPY #750

City DALLAS	State TX	Zip Code 75206-1832
----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) D&D AFFILIATES, LLC	Occupation (for Individual) REAL ESTATE BROKER
--	---

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
700.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11		02		2016

Transaction ID : SA11A.466239

Amount of Each Receipt this Period
50.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	250.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 806 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. DABNEY, SCOTT, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 8150 N CENTRAL EXPY #750
 City DALLAS State TX Zip Code 75206-1832
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) D&D AFFILIATES, LLC Occupation (for Individual) REAL ESTATE BROKER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 700.00

Date of Receipt 11 / 03 / 2016
Transaction ID : SA11A.468859
 Amount of Each Receipt this Period 50.00
 Memo Item
 CONTRIBUTION

B. DAGENAIS, DALLAS, L., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2931 BARKMAN DR
 City WATERFORD State MI Zip Code 48329-2527
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 485.00

Date of Receipt 10 / 20 / 2016
Transaction ID : SA11A.442086
 Amount of Each Receipt this Period 50.00
 Memo Item
 CONTRIBUTION

C. DAGENAIS, DALLAS, L., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2931 BARKMAN DR
 City WATERFORD State MI Zip Code 48329-2527
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 485.00

Date of Receipt 11 / 02 / 2016
Transaction ID : SA11A.466744
 Amount of Each Receipt this Period 25.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	125.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 807 OF 4311
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. DAGENAIS, DALLAS, L., MR.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 2931 BARKMAN DR

City WATERFORD	State MI	Zip Code 48329-2527
-------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
485.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	04	/	2016

Transaction ID : SA11A.479649

Amount of Each Receipt this Period
25.00

Memo Item CONTRIBUTION

B. DAGOSTINO, NICOLYS, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 45 TURKEY HILL ROAD SOUTH

City WESTPORT	State CT	Zip Code 06880-5520
------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
650.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	31	/	2016

Transaction ID : SA11A.458081

Amount of Each Receipt this Period
50.00

Memo Item CONTRIBUTION

C. DAGOSTINO, NICOLYS, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 45 TURKEY HILL ROAD SOUTH

City WESTPORT	State CT	Zip Code 06880-5520
------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
650.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	01	/	2016

Transaction ID : SA11A.462665

Amount of Each Receipt this Period
100.00

Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	175.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 808 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. DAGOSTINO, NICOLYS, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 45 TURKEY HILL ROAD SOUTH
 City WESTPORT State CT Zip Code 06880-5520
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 650.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 01 / 2016
Transaction ID : SA11A.462667
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION

B. DAGOSTINO, NICOLYS, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 45 TURKEY HILL ROAD SOUTH
 City WESTPORT State CT Zip Code 06880-5520
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 650.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 29 / 2016
Transaction ID : SA11A.464974
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION

C. DAGOSTINO, NICOLYS, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 45 TURKEY HILL ROAD SOUTH
 City WESTPORT State CT Zip Code 06880-5520
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 650.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 07 / 2016
Transaction ID : SA11A.475835
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	300.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 809 OF 4311
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. DAHL, MARILYN, B., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 823 MAYOWOOD ROAD SW
 APT 415
 City ROCHESTER State MN Zip Code 55902-2589
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 10 / 28 / 2016
Transaction ID : SA11A.454740
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

B. DAHL, VIVIAN, J., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 225 13TH AVENUE W
 APT 3008
 City WEST FARGO State ND Zip Code 58078-2693
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 2700.00

Date of Receipt 10 / 25 / 2016
Transaction ID : SA11A.447591
 Amount of Each Receipt this Period 2700.00
 Memo Item CONTRIBUTION

C. DAHLBERG, CHERYL, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO BOX 22
 City CAMPBELLTOWN State PA Zip Code 17010-0022
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 2000.00

Date of Receipt 10 / 31 / 2016
Transaction ID : SA11A.459195
 Amount of Each Receipt this Period 500.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 3450.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 810 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. DAHLBERG, CHERYL, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO BOX 22
 City CAMPBELLTOWN State PA Zip Code 17010-0022
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 2000.00

Date of Receipt 11 / 04 / 2016
Transaction ID : SA11A.471746
 Amount of Each Receipt this Period 500.00
 Memo Item CONTRIBUTION

B. DAHLBERG, WILLIAM, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 10200 HARBOUR PL 458
 City MUKILTEO State WA Zip Code 98275-4733
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 350.00

Date of Receipt 11 / 03 / 2016
Transaction ID : SA11A.474554
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

C. DAILEY, BENJAMIN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 848 N. RAINBOW BLVD # 2191
 City LAS VEGAS State NV Zip Code 89107-1103
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 11 / 04 / 2016
Transaction ID : SA11A.472410
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	600.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 811 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. DALE, BRUCE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2865 HAGADORN RD
 City MASON State MI Zip Code 48854-9457
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) MICHIGAN STATE UNIVERSITY Occupation (for Individual) PROFESSOR
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 225.00

Date of Receipt
 11 / 05 / 2016
Transaction ID : SA11A.478449
 Amount of Each Receipt this Period
 225.00
 Memo Item
 CONTRIBUTION

B. DALMAN, JESSIE, F., MISS,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4056 SPRING BEAUTY LANE
 City HOLLAND State MI Zip Code 49423-8815
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1900.00

Date of Receipt
 10 / 24 / 2016
Transaction ID : SA11A.449445
 Amount of Each Receipt this Period
 50.00
 Memo Item
 CONTRIBUTION

C. DALMAN, JESSIE, F., MISS,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4056 SPRING BEAUTY LANE
 City HOLLAND State MI Zip Code 49423-8815
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1900.00

Date of Receipt
 10 / 24 / 2016
Transaction ID : SA11A.449446
 Amount of Each Receipt this Period
 50.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	325.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 812 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. DALTON, TOLBERT, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 230 BROADLANDS DR
 City EATONTON State GA Zip Code 31024-5690
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt **11 / 04 / 2016**
Transaction ID : SA11A.474296
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

B. DALY, JOHN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5055 GULF OF MEXICO DRIVE
 City LONGBOAT KEY State FL Zip Code 34228-2003
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) INFORMATION REQUESTED PER BEST EFFORTS Occupation (for Individual) INFORMATION REQUESTED PER BE
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt **11 / 03 / 2016**
Transaction ID : SA11A.465572
 Amount of Each Receipt this Period 200.00
 Memo Item CONTRIBUTION

C. DALZELL, CHET, G., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 10 WEBNER PLACE
 City PALM COAST State FL Zip Code 32164-7727
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 251.00

Date of Receipt **10 / 25 / 2016**
Transaction ID : SA11A.447902
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	500.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 813 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. DAMAGHI, NADER, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 10 SHORE DRIVE
 City KINGS POINT State NY Zip Code 11024-1218
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) FIRST QUALITY Occupation (for Individual) EXECUTIVE
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date **20000.00**

Date of Receipt **11 / 03 / 2016**
Transaction ID : SA11A.465189
 Amount of Each Receipt this Period **20000.00**
 Memo Item CONTRIBUTION

B. DANIALI, SAEED, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 7821 175TH ST SW
 City EDMONDS State WA Zip Code 98026-5026
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) UNIVERSITY OF WASHINGTON Occupation (for Individual) PROFESSOR
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date **475.00**

Date of Receipt **10 / 24 / 2016**
Transaction ID : SA11A.446219
 Amount of Each Receipt this Period **50.00**
 Memo Item CONTRIBUTION

C. DANIALI, SAEED, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 7821 175TH ST SW
 City EDMONDS State WA Zip Code 98026-5026
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) UNIVERSITY OF WASHINGTON Occupation (for Individual) PROFESSOR
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date **475.00**

Date of Receipt **11 / 04 / 2016**
Transaction ID : SA11A.473030
 Amount of Each Receipt this Period **50.00**
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... **20100.00**
TOTAL This Period (last page this line number only).....

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 814 OF 4311
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. DANIEL, C, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 138 OAKHURST TRAIL

City RIDGELAND	State MS	Zip Code 39157-8608
-------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) SELF EMPLOYED	Occupation (for Individual) PHYSICIAN
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
350.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	05	/	2016

Transaction ID : SA11A.480956

Amount of Each Receipt this Period
100.00

Memo Item
CONTRIBUTION

B. DANKERT, RONALD, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 550 GALEN CIRCLE

City ANN ARBOR	State MI	Zip Code 48103-6612
-------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	02	/	2016

Transaction ID : SA11A.466909

Amount of Each Receipt this Period
25.00

Memo Item
CONTRIBUTION

C. DANKER, WILLARD, T., MR.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1645 MASTERS CT.

City SUPERIOR	State CO	Zip Code 80027-8160
------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	25	/	2016

Transaction ID : SA11A.447792

Amount of Each Receipt this Period
250.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	375.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 815 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. DANKER, WILLARD, T., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1645 MASTERS CT.
 City SUPERIOR State CO Zip Code 80027-8160
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 25 / 2016
Transaction ID : SA11A.447794
 Amount of Each Receipt this Period
 250.00
 Memo Item
 CONTRIBUTION

B. DANN, LINDA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4550 SW 74TH ST
 City MIAMI State FL Zip Code 33143-6271
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 375.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 28 / 2016
Transaction ID : SA11A.456210
 Amount of Each Receipt this Period
 25.00
 Memo Item
 CONTRIBUTION

C. DANN, LINDA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4550 SW 74TH ST
 City MIAMI State FL Zip Code 33143-6271
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 375.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 28 / 2016
Transaction ID : SA11A.456211
 Amount of Each Receipt this Period
 25.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	300.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 816 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
Team Ryan

A. DANN, LINDA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4550 SW 74TH ST
 City MIAMI State FL Zip Code 33143-6271
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 375.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 29 / 2016
Transaction ID : SA11A.460938
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION

B. DANN, LINDA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4550 SW 74TH ST
 City MIAMI State FL Zip Code 33143-6271
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 375.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 07 / 2016
Transaction ID : SA11A.480403
 Amount of Each Receipt this Period
 25.00
 Memo Item
 CONTRIBUTION

C. DANNENBAUM, JIM, D., MR,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3100 W ALABAMA ST
 City HOUSTON State TX Zip Code 77098-2004
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) DEC Occupation (for Individual) ENGINEER
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 50000.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 20 / 2016
Transaction ID : SA11A.433377
 Amount of Each Receipt this Period
 20000.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	20125.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 817 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. DAPUZZO, PETER, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 18 PILOT ROCK LANE
 City RIVERSIDE State CT Zip Code 06878-2621
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 10 / 26 / 2016
Transaction ID : SA11A.450476
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

B. DARLING, ALBERTA, H., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1325 W DEAN RD
 City MILWAUKEE State WI Zip Code 53217-2537
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) INFORMATION REQUESTED PER BEST EFFORTS Occupation (for Individual) INFORMATION REQUESTED PER BE
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt 11 / 03 / 2016
Transaction ID : SA11A.465196
 Amount of Each Receipt this Period 1000.00
 Memo Item CONTRIBUTION

C. DARLIN, BILL, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 17991 LASSEN DR
 City SANTA ANA State CA Zip Code 92705-1940
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 10 / 21 / 2016
Transaction ID : SA11A.444129
 Amount of Each Receipt this Period 300.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	1350.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 818 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. DARNELL, CONNIE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 31 POWDER VALLEY DRIVE
 City BELLEVILLE State IL Zip Code 62223-1939
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 10 / 24 / 2016
Transaction ID : SA11A.445853
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

B. DARNELL, CONNIE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 31 POWDER VALLEY DRIVE
 City BELLEVILLE State IL Zip Code 62223-1939
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 10 / 30 / 2016
Transaction ID : SA11A.459391
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

C. DARNELL, CONNIE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 31 POWDER VALLEY DRIVE
 City BELLEVILLE State IL Zip Code 62223-1939
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 11 / 07 / 2016
Transaction ID : SA11A.480082
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 75.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 819 OF 4311
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. DAROLD, ALFRED, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 25144 SUTTON COURT
 City NOVI State MI Zip Code 48374-2222
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 10 / 25 / 2016
Transaction ID : SA11A.451926
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

B. DARR, JOHN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 100 NORFOLK ST.
 City REHOBOTH BEACH State DE Zip Code 19971-2254
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1250.00

Date of Receipt 10 / 24 / 2016
Transaction ID : SA11A.449495
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

C. DARTER, SYLVIA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address BOX 462104
 City GARLAND State TX Zip Code 75046-2104
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) BUSINESS ADMIN
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 205.00

Date of Receipt 10 / 29 / 2016
Transaction ID : SA11A.460848
 Amount of Each Receipt this Period 30.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	380.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 820 OF 4311
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. DARTER, SYLVIA, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address **BOX 462104**
City **GARLAND** State **TX** Zip Code **75046-2104**
FEC ID number of contributing federal political committee. **C**
Name of Employer (for Individual) **SELF EMPLOYED** Occupation (for Individual) **BUSINESS ADMIN**
Receipt For: Primary General Other (specify) Aggregate Year-to-Date **205.00**

Date of Receipt **11 / 04 / 2016**
Transaction ID : SA11A.471851
Amount of Each Receipt this Period **25.00**
 Memo Item CONTRIBUTION

B. DAU, NEIL, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address **4881 N. WISHON AVENUE**
City **FRESNO** State **CA** Zip Code **93704-3129**
FEC ID number of contributing federal political committee. **C**
Name of Employer (for Individual) **NONE** Occupation (for Individual) **RETIRED**
Receipt For: Primary General Other (specify) Aggregate Year-to-Date **250.00**

Date of Receipt **10 / 28 / 2016**
Transaction ID : SA11A.461344
Amount of Each Receipt this Period **250.00**
 Memo Item CONTRIBUTION

C. DAUB, JOHN, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address **2305 HOLLOW VIEW DRIVE**
City **EASTON** State **PA** Zip Code **18040-7564**
FEC ID number of contributing federal political committee. **C**
Name of Employer (for Individual) **NONE** Occupation (for Individual) **RETIRED**
Receipt For: Primary General Other (specify) Aggregate Year-to-Date **750.00**

Date of Receipt **10 / 25 / 2016**
Transaction ID : SA11A.448991
Amount of Each Receipt this Period **250.00**
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... **525.00**
TOTAL This Period (last page this line number only).....

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 821 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. DAUB, JOHN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2305 HOLLOW VIEW DRIVE
 City EASTON State PA Zip Code 18040-7564
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 750.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 25 / 2016
Transaction ID : SA11A.448993
 Amount of Each Receipt this Period
 250.00
 Memo Item
 CONTRIBUTION

B. DAVID, JAMIE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 911 BRAZOS STREET
 City ROSWELL State NM Zip Code 88201-3326
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 600.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 07 / 2016
Transaction ID : SA11A.474736
 Amount of Each Receipt this Period
 250.00
 Memo Item
 CONTRIBUTION

C. DAVID, JP, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 19711 CANYON DR
 City YORBA LINDA State CA Zip Code 92886-5901
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) BHHS Occupation (for Individual) REALTOR
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 285.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 20 / 2016
Transaction ID : SA11A.442136
 Amount of Each Receipt this Period
 25.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	525.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 822 OF 4311
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. DAVID, JP, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 19711 CANYON DR

City YORBA LINDA	State CA	Zip Code 92886-5901
---------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) BHHS	Occupation (for Individual) REALTOR
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
285.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		25		2016

Transaction ID : SA11A.447999

Amount of Each Receipt this Period
30.00

Memo Item
CONTRIBUTION

B. DAVID, JP, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 19711 CANYON DR

City YORBA LINDA	State CA	Zip Code 92886-5901
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) BHHS	Occupation (for Individual) REALTOR
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
285.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		31		2016

Transaction ID : SA11A.459312

Amount of Each Receipt this Period
25.00

Memo Item
CONTRIBUTION

C. DAVID, JP, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 19711 CANYON DR

City YORBA LINDA	State CA	Zip Code 92886-5901
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) BHHS	Occupation (for Individual) REALTOR
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
285.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		31		2016

Transaction ID : SA11A.459314

Amount of Each Receipt this Period
25.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	80.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 823 OF 4311
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. DAVID, JP, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 19711 CANYON DR

City YORBA LINDA	State CA	Zip Code 92886-5901
---------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) BHHS	Occupation (for Individual) REALTOR
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
285.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
11		04		2016

Transaction ID : SA11A.470827

Amount of Each Receipt this Period
30.00

Memo Item
CONTRIBUTION

B. DAVID, JP, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 19711 CANYON DR

City YORBA LINDA	State CA	Zip Code 92886-5901
---------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) BHHS	Occupation (for Individual) REALTOR
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
285.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
11		04		2016

Transaction ID : SA11A.474236

Amount of Each Receipt this Period
25.00

Memo Item
CONTRIBUTION

C. DAVID, JP, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 19711 CANYON DR

City YORBA LINDA	State CA	Zip Code 92886-5901
---------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) BHHS	Occupation (for Individual) REALTOR
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
285.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
11		07		2016

Transaction ID : SA11A.480477

Amount of Each Receipt this Period
25.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	80.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 824 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
Team Ryan

A. DAVID, JP, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 19711 CANYON DR
 City YORBA LINDA State CA Zip Code 92886-5901
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) BHHS Occupation (for Individual) REALTOR
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 285.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 07 / 2016
Transaction ID : SA11A.480480
 Amount of Each Receipt this Period
 25.00
 Memo Item
 CONTRIBUTION

B. DAVID, ROBERT, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO BOX 4303
 City KINGMAN State AZ Zip Code 86402-4303
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 27 / 2016
Transaction ID : SA11A.457100
 Amount of Each Receipt this Period
 250.00
 Memo Item
 CONTRIBUTION

C. DAVIES, JOHN, R., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 14411 SPIREA DRIVE
 City ELK RAPIDS State MI Zip Code 49629-9562
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 03 / 2016
Transaction ID : SA11A.465353
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	375.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 825 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. DAVIES, STEPHEN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1190 125TH ROAD
 City STROMSBURG State NE Zip Code 68666-6210
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 10 / 21 / 2016
Transaction ID : SA11A.444668
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

B. DAVIES, STEPHEN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1190 125TH ROAD
 City STROMSBURG State NE Zip Code 68666-6210
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 10 / 21 / 2016
Transaction ID : SA11A.444669
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

C. DAVIES, STEPHEN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1190 125TH ROAD
 City STROMSBURG State NE Zip Code 68666-6210
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 11 / 05 / 2016
Transaction ID : SA11A.479325
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	150.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 826 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
-----------------------------	-----------------------------	-----------------------------

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NAME OF COMMITTEE (In Full)
Team Ryan

A. DAVIES, STEPHEN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1190 125TH ROAD
 City STROMSBURG State NE Zip Code 68666-6210
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 11 / 05 / 2016
Transaction ID : SA11A.479326
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

B. DAVIS, BRIAN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 17038 OCONTO AVE.
 City TINLEY PARK State IL Zip Code 60477-2618
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 10 / 26 / 2016
Transaction ID : SA11A.451292
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

C. DAVIS, BRIAN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 17038 OCONTO AVE.
 City TINLEY PARK State IL Zip Code 60477-2618
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 10 / 26 / 2016
Transaction ID : SA11A.451303
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	200.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 827 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. DAVIS, CHARLS, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1916 FERNDAL E PLACE
 City THOUSAND OAKS State CA Zip Code 91360-2138
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 350.00

Date of Receipt 10 / 25 / 2016
Transaction ID : SA11A.452199
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

B. DAVIS, CHARLS, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1916 FERNDAL E PLACE
 City THOUSAND OAKS State CA Zip Code 91360-2138
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 350.00

Date of Receipt 10 / 31 / 2016
Transaction ID : SA11A.458253
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

C. DAVIS, CHARLS, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1916 FERNDAL E PLACE
 City THOUSAND OAKS State CA Zip Code 91360-2138
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 350.00

Date of Receipt 10 / 31 / 2016
Transaction ID : SA11A.458257
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	150.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 828 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. DAVIS, CHRIS, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address **PROB 461**
 City **SOUTHERN PINES** State **NC** Zip Code **28388-**
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) **NONE** Occupation (for Individual) **RETIRED**
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ **300.00**

Date of Receipt **11 / 07 / 2016**
Transaction ID : SA11A.476564
 Amount of Each Receipt this Period **100.00**
 Memo Item CONTRIBUTION

B. DAVIS, DONALD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address **29 W PALM LN DR**
 City **REDLANDS** State **CA** Zip Code **92373-6076**
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) **NONE** Occupation (for Individual) **RETIRED**
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ **285.00**

Date of Receipt **10 / 20 / 2016**
Transaction ID : SA11A.442459
 Amount of Each Receipt this Period **25.00**
 Memo Item CONTRIBUTION

C. DAVIS, DONALD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address **29 W PALM LN DR**
 City **REDLANDS** State **CA** Zip Code **92373-6076**
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) **NONE** Occupation (for Individual) **RETIRED**
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ **285.00**

Date of Receipt **10 / 25 / 2016**
Transaction ID : SA11A.448107
 Amount of Each Receipt this Period **30.00**
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... **155.00**
TOTAL This Period (last page this line number only).....

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 829 OF 4311
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. DAVIS, DONALD, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 29 W PALM LN DR

City REDLANDS	State CA	Zip Code 92373-6076
------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
285.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		25		2016

Transaction ID : SA11A.448117

Amount of Each Receipt this Period
30.00

Memo Item CONTRIBUTION

B. DAVIS, DONALD, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 29 W PALM LN DR

City REDLANDS	State CA	Zip Code 92373-6076
------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
285.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11		04		2016

Transaction ID : SA11A.473504

Amount of Each Receipt this Period
25.00

Memo Item CONTRIBUTION

C. DAVIS, FRANCES, B., ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 2727 82ND PLACE, APT 110

City URBANDALE	State IA	Zip Code 50322-4315
-------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		21		2016

Transaction ID : SA11A.443579

Amount of Each Receipt this Period
100.00

Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	155.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 830 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
Team Ryan

A. DAVIS, MARTIN, L., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 401 SPRESSER ST
 City TAYLORVILLE State IL Zip Code 62568-1853
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) MDAVIS MGMT CO INC Occupation (for Individual) PRESIDENT
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1430.00

Date of Receipt 10 / 24 / 2016
Transaction ID : SA11A.445776
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

B. DAVIS, MARTIN, L., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 401 SPRESSER ST
 City TAYLORVILLE State IL Zip Code 62568-1853
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) MDAVIS MGMT CO INC Occupation (for Individual) PRESIDENT
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1430.00

Date of Receipt 10 / 24 / 2016
Transaction ID : SA11A.445779
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

C. DAVIS, MARTIN, L., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 401 SPRESSER ST
 City TAYLORVILLE State IL Zip Code 62568-1853
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) MDAVIS MGMT CO INC Occupation (for Individual) PRESIDENT
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1430.00

Date of Receipt 10 / 24 / 2016
Transaction ID : SA11A.445781
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	200.00
TOTAL This Period (last page this line number only).....	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 831 OF 4311
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. DAVIS, MARTIN, L., MR.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 401 SPRESSER ST

City TAYLORVILLE	State IL	Zip Code 62568-1853
---------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) MDAVIS MGMT CO INC	Occupation (for Individual) PRESIDENT
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1430.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 26 / 2016

Transaction ID : SA11A.450444

Amount of Each Receipt this Period
50.00

Memo Item
CONTRIBUTION

B. DAVIS, MARTIN, L., MR.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 401 SPRESSER ST

City TAYLORVILLE	State IL	Zip Code 62568-1853
---------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) MDAVIS MGMT CO INC	Occupation (for Individual) PRESIDENT
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1430.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 26 / 2016

Transaction ID : SA11A.450445

Amount of Each Receipt this Period
50.00

Memo Item
CONTRIBUTION

C. DAVIS, MARTIN, L., MR.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 401 SPRESSER ST

City TAYLORVILLE	State IL	Zip Code 62568-1853
---------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) MDAVIS MGMT CO INC	Occupation (for Individual) PRESIDENT
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
1430.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 26 / 2016

Transaction ID : SA11A.450452

Amount of Each Receipt this Period
50.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	150.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 832 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. DAVIS, MARTIN, L., MR.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 401 SPRESSER ST

City TAYLORVILLE	State IL	Zip Code 62568-1853
---------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) MDAVIS MGMT CO INC	Occupation (for Individual) PRESIDENT
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1430.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
11		04		2016

Transaction ID : SA11A.471342

Amount of Each Receipt this Period
100.00

Memo Item
CONTRIBUTION

B. DAVIS, NEECE, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 11160 SCARLET OAKS

City SHREVEPORT	State LA	Zip Code 71106-8381
--------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
275.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
11		04		2016

Transaction ID : SA11A.471781

Amount of Each Receipt this Period
25.00

Memo Item
CONTRIBUTION

C. DAVIS, RANDY, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 8780 PRESTIGE CT.

City RANCHO CUCAMONGA	State CA	Zip Code 91730-5138
--------------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) DAVIS DEV.	Occupation (for Individual) CONTRACTOR
---	---

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
700.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
10		27		2016

Transaction ID : SA11A.452823

Amount of Each Receipt this Period
50.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	175.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 833 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. DAVIS, RANDY, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 8780 PRESTIGE CT.

City RANCHO CUCAMONGA	State CA	Zip Code 91730-5138
--------------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) DAVIS DEV.	Occupation (for Individual) CONTRACTOR
---	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
700.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	04	/	2016

Transaction ID : SA11A.470725

Amount of Each Receipt this Period
50.00

Memo Item CONTRIBUTION

B. DAVIS, RANDY, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 8780 PRESTIGE CT.

City RANCHO CUCAMONGA	State CA	Zip Code 91730-5138
--------------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) DAVIS DEV.	Occupation (for Individual) CONTRACTOR
---	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
700.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	04	/	2016

Transaction ID : SA11A.472277

Amount of Each Receipt this Period
100.00

Memo Item CONTRIBUTION

C. DAVIS, RANDY, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 8780 PRESTIGE CT.

City RANCHO CUCAMONGA	State CA	Zip Code 91730-5138
--------------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) DAVIS DEV.	Occupation (for Individual) CONTRACTOR
---	---

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
700.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	07	/	2016

Transaction ID : SA11A.475515

Amount of Each Receipt this Period
100.00

Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	250.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 834 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. DAVIS, ROBERT, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 435 W 1130 N

City SUNSET	State UT	Zip Code 84015-3633
----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) UTAH ARMY NATIONAL GUARD	Occupation (for Individual) MILITARY ENVIRONMENTAL PROGR
---	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
275.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 23 / 2016

Transaction ID : SA11A.446613

Amount of Each Receipt this Period
10.00

Memo Item CONTRIBUTION

B. DAVIS, ROBERT, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 435 W 1130 N

City SUNSET	State UT	Zip Code 84015-3633
----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) UTAH ARMY NATIONAL GUARD	Occupation (for Individual) MILITARY ENVIRONMENTAL PROGR
---	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
275.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 26 / 2016

Transaction ID : SA11A.451066

Amount of Each Receipt this Period
25.00

Memo Item CONTRIBUTION

C. DAVIS, ROBERT, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 435 W 1130 N

City SUNSET	State UT	Zip Code 84015-3633
----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) UTAH ARMY NATIONAL GUARD	Occupation (for Individual) MILITARY ENVIRONMENTAL PROGR
---	---

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
275.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 04 / 2016

Transaction ID : SA11A.471151

Amount of Each Receipt this Period
10.00

Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	45.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 835 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
-----------------------------	-----------------------------	-----------------------------

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NAME OF COMMITTEE (In Full)
Team Ryan

A. DAVIS, ROBERT, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 435 W 1130 N
 City SUNSET State UT Zip Code 84015-3633
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) UTAH ARMY NATIONAL GUARD Occupation (for Individual) MILITARY ENVIRONMENTAL PROGR
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 275.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 04 / 2016
Transaction ID : SA11A.472520
 Amount of Each Receipt this Period
 25.00
 Memo Item
 CONTRIBUTION

B. DAVIS, ROBERT, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 435 W 1130 N
 City SUNSET State UT Zip Code 84015-3633
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) UTAH ARMY NATIONAL GUARD Occupation (for Individual) MILITARY ENVIRONMENTAL PROGR
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 275.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 08 / 2016
Transaction ID : SA11A.479774
 Amount of Each Receipt this Period
 25.00
 Memo Item
 CONTRIBUTION

C. DAVIS, RONALD, A., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2533 DEMINK ST.
 City MILFORD State MI Zip Code 48380-3947
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 23 / 2016
Transaction ID : SA11A.446489
 Amount of Each Receipt this Period
 25.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	75.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 836 OF 4311
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. DAVIS, RONALD, A., MR.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 2533 DEMINK ST.

City MILFORD	State MI	Zip Code 48380-3947
-----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
400.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		31		2016

Transaction ID : SA11A.457696

Amount of Each Receipt this Period
25.00

Memo Item
CONTRIBUTION

B. DAVIS, STEVE, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 5823 W. MARQUETTE DR

City DENVER	State CO	Zip Code 80235-3162
----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) CITY OF DENVER	Occupation (for Individual) AIRPORT MANAGER
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11		04		2016

Transaction ID : SA11A.472699

Amount of Each Receipt this Period
50.00

Memo Item
CONTRIBUTION

C. DAVIS, VICTOR, LEE, MR.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 8575 HOLMES RD
APT 43

City KANSAS CITY	State MO	Zip Code 64131-4759
---------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
223.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		31		2016

Transaction ID : SA11A.463792

Amount of Each Receipt this Period
18.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	93.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 837 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. DAVIS, VICTOR, LEE, MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 8575 HOLMES RD
 APT 43
 City KANSAS CITY State MO Zip Code 64131-4759
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 223.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 31 / 2016
Transaction ID : SA11A.463837
 Amount of Each Receipt this Period
 25.00
 Memo Item
 CONTRIBUTION

B. DAVIS, VICTOR, LEE, MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 8575 HOLMES RD
 APT 43
 City KANSAS CITY State MO Zip Code 64131-4759
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 223.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 04 / 2016
Transaction ID : SA11A.479604
 Amount of Each Receipt this Period
 25.00
 Memo Item
 CONTRIBUTION

C. DAVIS, VICTOR, LEE, MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 8575 HOLMES RD
 APT 43
 City KANSAS CITY State MO Zip Code 64131-4759
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 223.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 07 / 2016
Transaction ID : SA11A.480455
 Amount of Each Receipt this Period
 25.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 75.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 838 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. DAVIS, WAYNE, T., MR.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 9939 GOODWOOD BOULEVARD

City BATON ROUGE	State LA	Zip Code 70815-4518
---------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
300.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
11		01		2016

Transaction ID : SA11A.461873

Amount of Each Receipt this Period
100.00

Memo Item CONTRIBUTION

B. DAVIS, WINNIE, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 2112 FAIRWAY LANE

City MARSHALL	State TX	Zip Code 75672-1528
------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
300.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
11		02		2016

Transaction ID : SA11A.470257

Amount of Each Receipt this Period
300.00

Memo Item CONTRIBUTION

C. DAWSON, DENNIS, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address PO BOX 217

City ALLYN	State WA	Zip Code 98524-0217
---------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
300.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
11		02		2016

Transaction ID : SA11A.466689

Amount of Each Receipt this Period
50.00

Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	450.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 839 OF 4311
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. DAY, JANICE, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 2101 CROWSNEST DRIVE

City PALM HARBOR	State FL	Zip Code 34685-1504
---------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
455.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	02	/	2016

Transaction ID : SA11A.466200

Amount of Each Receipt this Period
25.00

Memo Item CONTRIBUTION

B. DAY, JEAN, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 4275 OWENS RD COTTAGE 403
403

City EVANS	State GA	Zip Code 30809-3084
---------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
614.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	25	/	2016

Transaction ID : SA11A.448109

Amount of Each Receipt this Period
50.00

Memo Item CONTRIBUTION

C. DAY, JEAN, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 4275 OWENS RD COTTAGE 403
403

City EVANS	State GA	Zip Code 30809-3084
---------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
614.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	28	/	2016

Transaction ID : SA11A.455165

Amount of Each Receipt this Period
100.00

Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	175.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 840 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. DAY, JEAN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4275 OWENS RD COTTAGE 403
 403
 City EVANS State GA Zip Code 30809-3084
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 614.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 28 / 2016
Transaction ID : SA11A.455166
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION

B. DAY, JEAN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4275 OWENS RD COTTAGE 403
 403
 City EVANS State GA Zip Code 30809-3084
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 614.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 28 / 2016
Transaction ID : SA11A.455173
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION

C. DAY, JEAN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4275 OWENS RD COTTAGE 403
 403
 City EVANS State GA Zip Code 30809-3084
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 614.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 03 / 2016
Transaction ID : SA11A.468583
 Amount of Each Receipt this Period
 30.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	230.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 841 OF 4311
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. DAY, JEAN, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 4275 OWENS RD COTTAGE 403
403

City EVANS State GA Zip Code 30809-3084

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
614.00

Date of Receipt
11 / 03 / 2016
Transaction ID : SA11A.468590

Amount of Each Receipt this Period
25.00

Memo Item CONTRIBUTION

B. DAY, RONALD, D., MR.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 2479 OCEAN STREET

City CARLSBAD State CA Zip Code 92008-2234

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
500.00

Date of Receipt
10 / 29 / 2016
Transaction ID : SA11A.461113

Amount of Each Receipt this Period
100.00

Memo Item CONTRIBUTION

C. DAY, RONALD, D., MR.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 2479 OCEAN STREET

City CARLSBAD State CA Zip Code 92008-2234

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
500.00

Date of Receipt
11 / 04 / 2016
Transaction ID : SA11A.472099

Amount of Each Receipt this Period
100.00

Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 225.00

TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 842 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. DE ARISTEGUI , INIGO , , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1704 GALLERIA LN SE
 City SMYRNA State GA Zip Code 30080-7528
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 212.00

Date of Receipt
 11 / 06 / 2016
Transaction ID : SA11A.478236
 Amount of Each Receipt this Period
 212.00
 Memo Item
 CONTRIBUTION

B. DE BEUKELAER, PETER, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 182 SWAN SEA LANE
 City MADISON State MS Zip Code 39110-9429
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) DBC CORP. Occupation (for Individual) PRESIDENT
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 950.00

Date of Receipt
 10 / 31 / 2016
Transaction ID : SA11A.463483
 Amount of Each Receipt this Period
 250.00
 Memo Item
 CONTRIBUTION

C. DE BLASE, GREGORY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 104 OLD CART ROIAD
 City WILLIAMSBURG State VA Zip Code 23188-7809
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 215.00

Date of Receipt
 10 / 25 / 2016
Transaction ID : SA11A.451676
 Amount of Each Receipt this Period
 30.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	492.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 843 OF 4311
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. DE BLASE, GREGORY, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 104 OLD CART ROIAD

City WILLIAMSBURG	State VA	Zip Code 23188-7809
----------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
215.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	25	/	2016

Transaction ID : SA11A.451677

Amount of Each Receipt this Period
30.00

Memo Item CONTRIBUTION

B. DE BLASE, GREGORY, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 104 OLD CART ROIAD

City WILLIAMSBURG	State VA	Zip Code 23188-7809
----------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
215.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	31	/	2016

Transaction ID : SA11A.463993

Amount of Each Receipt this Period
50.00

Memo Item CONTRIBUTION

C. DE CARDENAS, JENNIE, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1177 HILLSIDE ROAD

City PASADENA	State CA	Zip Code 91105-3307
------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
1500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	04	/	2016

Transaction ID : SA11A.471592

Amount of Each Receipt this Period
500.00

Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	580.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 844 OF 4311
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. DE FONTENAY, JEAN, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 109 PEARL STREET

City GROTON	State CT	Zip Code 06340-5763
----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
625.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	25	/	2016

Transaction ID : SA11A.447371

Amount of Each Receipt this Period
375.00

Memo Item CONTRIBUTION

B. DE LA CRUZ, CARLOS, M., ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 5 HARBOR PT

City KEY BISCAWAYNE	State FL	Zip Code 33149-1715
------------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) CC1 COMPANIES, LLC	Occupation (for Individual) EXECUTIVE
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
2000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	24	/	2016

Transaction ID : SA11A.443506

Amount of Each Receipt this Period
2000.00

Memo Item CONTRIBUTION

C. DE POL, HOWARD, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1050 CONWAY CT

City WARWICK	State PA	Zip Code 18974-6167
-----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
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Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	02	/	2016

Transaction ID : SA11A.469379

Amount of Each Receipt this Period
250.00

Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	2625.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 845 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. DE VOGEL, WILLEM, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 115 CHARLIE HILL RD
 City MILLERTON State NY Zip Code 12546-4454
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1550.00

Date of Receipt **10 / 31 / 2016**
Transaction ID : SA11A.457502
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

B. DE VOGEL, WILLEM, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 115 CHARLIE HILL RD
 City MILLERTON State NY Zip Code 12546-4454
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1550.00

Date of Receipt **11 / 04 / 2016**
Transaction ID : SA11A.472513
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

C. DEAN, EVELYN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 360 MCKENZIE DR
 City STOCKBRIDGE State GA Zip Code 30281-6702
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 344.00

Date of Receipt **10 / 27 / 2016**
Transaction ID : SA11A.453353
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	550.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 846 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
Team Ryan

A. DEAN, EVELYN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 360 MCKENZIE DR
 City STOCKBRIDGE State GA Zip Code 30281-6702
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 344.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 29 / 2016
Transaction ID : SA11A.460509
 Amount of Each Receipt this Period
 30.00
 Memo Item
 CONTRIBUTION

B. DEAN, EVELYN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 360 MCKENZIE DR
 City STOCKBRIDGE State GA Zip Code 30281-6702
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 344.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 29 / 2016
Transaction ID : SA11A.460511
 Amount of Each Receipt this Period
 30.00
 Memo Item
 CONTRIBUTION

C. DEAN, EVELYN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 360 MCKENZIE DR
 City STOCKBRIDGE State GA Zip Code 30281-6702
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 344.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 02 / 2016
Transaction ID : SA11A.466401
 Amount of Each Receipt this Period
 25.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	85.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 847 OF 4311
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. DEAN, JACK, H., DR.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 10331 N WILD CREEK DRIVE

City ORO VALLEY State AZ Zip Code 85742-8426

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
325.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 22 / 2016

Transaction ID : SA11A.446884

Amount of Each Receipt this Period
25.00

Memo Item
CONTRIBUTION

B. DEAN, JACK, H., DR.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 10331 N WILD CREEK DRIVE

City ORO VALLEY State AZ Zip Code 85742-8426

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
325.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 25 / 2016

Transaction ID : SA11A.449107

Amount of Each Receipt this Period
50.00

Memo Item
CONTRIBUTION

C. DEAN, JACK, H., DR.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 10331 N WILD CREEK DRIVE

City ORO VALLEY State AZ Zip Code 85742-8426

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
325.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 04 / 2016

Transaction ID : SA11A.472025

Amount of Each Receipt this Period
25.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶ 100.00

TOTAL This Period (last page this line number only).....▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 848 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. DEAN, JOEL, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2501 MT SOPRIS DR
 City GRAND JUNCTION State CO Zip Code 81507-1737
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) GRAND VALLEY NEUROLOGY Occupation (for Individual) PHYSICIAN
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt
 11 / 02 / 2016
Transaction ID : SA11A.469463
 Amount of Each Receipt this Period
 250.00
 Memo Item
 CONTRIBUTION

B. DEAN, RUSSELL, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 32224 S 944 PR SE
 City KENNEWICK State WA Zip Code 99338-9424
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RUSS DEAN FAMILY RV Occupation (for Individual) RV DEALER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt
 10 / 25 / 2016
Transaction ID : SA11A.447961
 Amount of Each Receipt this Period
 1000.00
 Memo Item
 CONTRIBUTION

C. DEAN, WILLIAM, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 13422 LAURINDA WAY
 City NORTH TUSTIN State CA Zip Code 92705-1926
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt
 10 / 31 / 2016
Transaction ID : SA11A.458516
 Amount of Each Receipt this Period
 25.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	1275.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 849 OF 4311
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. DEAN, WILLIAM, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 13422 LAURINDA WAY

City NORTH TUSTIN	State CA	Zip Code 92705-1926
----------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
300.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		31		2016

Transaction ID : SA11A.458559

Amount of Each Receipt this Period
25.00

Memo Item CONTRIBUTION

B. DEAN, WILLIAM, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 13422 LAURINDA WAY

City NORTH TUSTIN	State CA	Zip Code 92705-1926
----------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
300.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		30		2016

Transaction ID : SA11A.459738

Amount of Each Receipt this Period
25.00

Memo Item CONTRIBUTION

C. DEANE MD, FREDERICK, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 3696 COOK VALLEY BLVD SE

City GRAND RAPIDS	State MI	Zip Code 49546-8324
----------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
300.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11		02		2016

Transaction ID : SA11A.466102

Amount of Each Receipt this Period
100.00

Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	150.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 850 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
A. DEANE MD, FREDERICK, , ,

Mailing Address 3696 COOK VALLEY BLVD SE

City GRAND RAPIDS	State MI	Zip Code 49546-8324
----------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
300.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
11		06		2016

Transaction ID : SA11A.477521

Amount of Each Receipt this Period
100.00

Memo Item CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
B. DEATON, BILLY, , ,

Mailing Address 3979 WEST LAUREL ROAD

City LONDON	State KY	Zip Code 40741-7864
----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) LAUREL RENTALS, LLC	Occupation (for Individual) MEMBER
--	---------------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1150.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
10		31		2016

Transaction ID : SA11A.458909

Amount of Each Receipt this Period
1000.00

Memo Item CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
C. DEATON, BILLY, , ,

Mailing Address 3979 WEST LAUREL ROAD

City LONDON	State KY	Zip Code 40741-7864
----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) LAUREL RENTALS, LLC	Occupation (for Individual) MEMBER
--	---------------------------------------

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
1150.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
11		02		2016

Transaction ID : SA11A.466880

Amount of Each Receipt this Period
50.00

Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	1150.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 851 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. DEATON, BILLY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3979 WEST LAUREL ROAD
 City LONDON State KY Zip Code 40741-7864
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) LAUREL RENTALS, LLC Occupation (for Individual) MEMBER
 Receipt For: Primary General Other (specify) Aggregate Year-to-Date 1150.00

Date of Receipt **11 / 06 / 2016**
Transaction ID : SA11A.477735
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

B. DEBENEDETTI, VICTORIA, D., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO BOX 920
 City KENWOOD State CA Zip Code 95452-0920
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) DEL MONTE MEAT Occupation (for Individual) BOOKKEEPER
 Receipt For: Primary General Other (specify) Aggregate Year-to-Date 450.00

Date of Receipt **10 / 20 / 2016**
Transaction ID : SA11A.433485
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

C. DEBLASIO, PASQUALE, V., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 447 WASHINGTON AVE
 City BRIDGEVILLE State PA Zip Code 15017-2332
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) Aggregate Year-to-Date 325.00

Date of Receipt **11 / 02 / 2016**
Transaction ID : SA11A.466578
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	400.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 852 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. DEBLASIO, PASQUALE, V., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 447 WASHINGTON AVE
 City BRIDGEVILLE State PA Zip Code 15017-2332
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 325.00

Date of Receipt 11 / 02 / 2016
Transaction ID : SA11A.466598
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

B. DEBLASIO, PASQUALE, V., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 447 WASHINGTON AVE
 City BRIDGEVILLE State PA Zip Code 15017-2332
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 325.00

Date of Receipt 11 / 04 / 2016
Transaction ID : SA11A.479395
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

C. DEBROS, JANE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1049 UPPER CHURCH STREET
 City GILBERTVILLE State MA Zip Code 01031-9862
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 505.00

Date of Receipt 10 / 24 / 2016
Transaction ID : SA11A.445704
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	125.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 853 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
Team Ryan

A. DEBROS, JANE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1049 UPPER CHURCH STREET
 City GILBERTVILLE State MA Zip Code 01031-9862
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 505.00

Date of Receipt 11 / 04 / 2016
Transaction ID : SA11A.473090
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

B. DEC, WALTER, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 8 MARIGOLD LN
 City CALIFON State NJ Zip Code 07830-3337
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 10 / 31 / 2016
Transaction ID : SA11A.459087
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

C. DEEDS, JAMES, A., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 11713 WARBLER'S WAY
 City ROSCOE State IL Zip Code 61073-7539
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) INFORMATION REQUESTED PER BEST EFFORTS Occupation (for Individual) INFORMATION REQUESTED PER BEST EFFORTS
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 10 / 20 / 2016
Transaction ID : SA11A.433515
 Amount of Each Receipt this Period 500.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 775.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 854 OF 4311
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. DEEDY, CARMEN, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1956 CARRINGTON CT.

City STONE MOUNTAIN	State GA	Zip Code 30087-1446
------------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) ESCRITORA	Occupation (for Individual) WRITER
--	---------------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		24		2016

Transaction ID : SA11A.445617

Amount of Each Receipt this Period
100.00

Memo Item
CONTRIBUTION

B. DEEDY, CARMEN, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1956 CARRINGTON CT.

City STONE MOUNTAIN	State GA	Zip Code 30087-1446
------------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) ESCRITORA	Occupation (for Individual) WRITER
--	---------------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11		01		2016

Transaction ID : SA11A.462217

Amount of Each Receipt this Period
50.00

Memo Item
CONTRIBUTION

C. DEEDY, CARMEN, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1956 CARRINGTON CT.

City STONE MOUNTAIN	State GA	Zip Code 30087-1446
------------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) ESCRITORA	Occupation (for Individual) WRITER
--	---------------------------------------

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11		05		2016

Transaction ID : SA11A.479168

Amount of Each Receipt this Period
50.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	200.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 855 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
Team Ryan

A. DEERING, CARL, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 7328 GLADE TRAIL
 City KALAMAZOO State MI Zip Code 49009-5921
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) PFIZER Occupation (for Individual) SCIENTIST
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 10 / 28 / 2016
Transaction ID : SA11A.456155
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

B. DEERING, CARL, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 7328 GLADE TRAIL
 City KALAMAZOO State MI Zip Code 49009-5921
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) PFIZER Occupation (for Individual) SCIENTIST
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 11 / 04 / 2016
Transaction ID : SA11A.474200
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

C. DEGNER, MICHAEL, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 8 ROAD 350
 City FLORA VISTA State NM Zip Code 87415-9685
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) OIL & GAS EQUIPMENT CORP Occupation (for Individual) PRESIDENT
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 600.00

Date of Receipt 10 / 21 / 2016
Transaction ID : SA11A.444532
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	200.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 857 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. DEGRANGE, DONALD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 12433 CONWAY RD
 City CREVE COEUR State MO Zip Code 63141-8640
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) DONALD DEGRANGE Occupation (for Individual) PHYSICIAN
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1155.00

Date of Receipt **11 / 04 / 2016**
Transaction ID : SA11A.471926
 Amount of Each Receipt this Period 110.00
 Memo Item CONTRIBUTION

B. DEHAVEN, ROSEMARY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1113 MAJESTIC HILLS BLVD.
 City SPICEWOOD State TX Zip Code 78669-3088
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) AMERIPRISE FINANCIAL Occupation (for Individual) FINANCIAL ADVIXOR
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 395.00

Date of Receipt **10 / 30 / 2016**
Transaction ID : SA11A.460081
 Amount of Each Receipt this Period 59.00
 Memo Item CONTRIBUTION

C. DEHMLow, CARLA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2500 INDIGO LANE UNIT 109
 City GLENVIEW State IL Zip Code 60026-7799
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt **11 / 07 / 2016**
Transaction ID : SA11A.467693
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	269.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 858 OF 4311
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. DEICHMANN, BERNHARD, E., MR.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1979 SHADY LANE

City MOUNT BETHEL	State PA	Zip Code 18343-5964
----------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		27		2016

Transaction ID : SA11A.452315

Amount of Each Receipt this Period
50.00

Memo Item
CONTRIBUTION

B. DEIHL, MIKE, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 252 ROUNDUP RD

City GLEN DORA	State CA	Zip Code 91741-3842
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) DFT HOTELS	Occupation (for Individual) CONSULTANT
---	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
435.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		27		2016

Transaction ID : SA11A.453259

Amount of Each Receipt this Period
250.00

Memo Item
CONTRIBUTION

C. DEL CALVO, KATHRYN, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 12760 FLORENCE AVE

City SANTA FE SPRINGS	State CA	Zip Code 90670-3906
--------------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) FSI	Occupation (for Individual) APPAREL MANUFACTURER
--	---

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		24		2016

Transaction ID : SA11A.445901

Amount of Each Receipt this Period
250.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	550.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 859 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
Team Ryan

A. DEL TUFO, SCOTT, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 7571 PINTAIL CT
 City LITTLETON State CO Zip Code 80125-8899
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) ILUMED HEALTH Occupation (for Individual) MANAGING PARTNER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 240.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 22 / 2016
Transaction ID : SA11A.446641
 Amount of Each Receipt this Period
 25.00
 Memo Item CONTRIBUTION

B. DEL TUFO, SCOTT, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 7571 PINTAIL CT
 City LITTLETON State CO Zip Code 80125-8899
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) ILUMED HEALTH Occupation (for Individual) MANAGING PARTNER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 240.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 22 / 2016
Transaction ID : SA11A.446642
 Amount of Each Receipt this Period
 25.00
 Memo Item CONTRIBUTION

C. DEL TUFO, SCOTT, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 7571 PINTAIL CT
 City LITTLETON State CO Zip Code 80125-8899
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) ILUMED HEALTH Occupation (for Individual) MANAGING PARTNER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 240.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 30 / 2016
Transaction ID : SA11A.459824
 Amount of Each Receipt this Period
 30.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	80.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 860 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. DEL TUFO, SCOTT, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 7571 PINTAIL CT
 City LITTLETON State CO Zip Code 80125-8899
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) ILUMED HEALTH Occupation (for Individual) MANAGING PARTNER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 240.00

Date of Receipt **10 / 30 / 2016**
Transaction ID : SA11A.459828
 Amount of Each Receipt this Period 30.00
 Memo Item CONTRIBUTION

B. DEL TUFO, SCOTT, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 7571 PINTAIL CT
 City LITTLETON State CO Zip Code 80125-8899
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) ILUMED HEALTH Occupation (for Individual) MANAGING PARTNER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 240.00

Date of Receipt **11 / 04 / 2016**
Transaction ID : SA11A.479335
 Amount of Each Receipt this Period 30.00
 Memo Item CONTRIBUTION

C. DELALIO, PERRY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 338 N MAIN ST
 City SOUTHAMPTON State NY Zip Code 11968-3332
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) CONSTRUCTION
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt **10 / 31 / 2016**
Transaction ID : SA11A.458404
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	160.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 861 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
Team Ryan

A. DELALIO, PERRY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 338 N MAIN ST
 City SOUTHAMPTON State NY Zip Code 11968-3332
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) CONSTRUCTION
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt 10 / 31 / 2016
Transaction ID : SA11A.458431
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

B. DELALIO, PERRY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 338 N MAIN ST
 City SOUTHAMPTON State NY Zip Code 11968-3332
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) CONSTRUCTION
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt 10 / 29 / 2016
Transaction ID : SA11A.461124
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

C. DELALIO, PERRY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 338 N MAIN ST
 City SOUTHAMPTON State NY Zip Code 11968-3332
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) CONSTRUCTION
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt 11 / 02 / 2016
Transaction ID : SA11A.466118
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	450.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 862 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
Team Ryan

A. DELALIO, PERRY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 338 N MAIN ST
 City SOUTHAMPTON State NY Zip Code 11968-3332
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) CONSTRUCTION
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 07 / 2016
Transaction ID : SA11A.475040
 Amount of Each Receipt this Period
 200.00
 Memo Item
 CONTRIBUTION

B. DELANEY, BRIAN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 34151 HIGH KNOLL RD
 City LEWES State DE Zip Code 19958-7318
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 325.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 31 / 2016
Transaction ID : SA11A.457585
 Amount of Each Receipt this Period
 50.00
 Memo Item
 CONTRIBUTION

C. DELANEY, BRIAN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 34151 HIGH KNOLL RD
 City LEWES State DE Zip Code 19958-7318
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 325.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 30 / 2016
Transaction ID : SA11A.460060
 Amount of Each Receipt this Period
 50.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	300.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 863 OF 4311
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Team Ryan

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
A. DELANEY, BRIAN, , ,

Mailing Address 34151 HIGH KNOLL RD

City LEWES	State DE	Zip Code 19958-7318
---------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
325.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	04	/	2016

Transaction ID : SA11A.471678

Amount of Each Receipt this Period
50.00

Memo Item
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
B. DELAURENTIS, JOSEPH, , ,

Mailing Address 41 SUSSEX AVE

City SEWELL	State NJ	Zip Code 08080-1232
----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) GARDEN STATE RADIOLOGY	Occupation (for Individual) RADIOLOGIST
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	25	/	2016

Transaction ID : SA11A.451809

Amount of Each Receipt this Period
1500.00

Memo Item
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
C. DELGADO, DIXIE, , ,

Mailing Address 13132 TORRESINA TER

City BRADENTON	State FL	Zip Code 34211-8420
-------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
400.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	06	/	2016

Transaction ID : SA11A.477757

Amount of Each Receipt this Period
50.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	1600.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 864 OF 4311
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. DELONG, MAX, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 60 MISSISSIPPI RIVER BLVD N

City SAINT PAUL	State MN	Zip Code 55104-5613
--------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
950.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		26		2016

Transaction ID : SA11A.450643

Amount of Each Receipt this Period
250.00

Memo Item
CONTRIBUTION

B. DELUCA, PETER, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 609 SCARLET OAK COURT

City APPLETON	State WI	Zip Code 54915-4512
------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) INTERNATIONAL PAPER	Occupation (for Individual) PROJECT MANAGER
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
450.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		24		2016

Transaction ID : SA11A.446199

Amount of Each Receipt this Period
50.00

Memo Item
CONTRIBUTION

C. DELUCA, PETER, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 609 SCARLET OAK COURT

City APPLETON	State WI	Zip Code 54915-4512
------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) INTERNATIONAL PAPER	Occupation (for Individual) PROJECT MANAGER
--	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
450.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11		04		2016

Transaction ID : SA11A.471074

Amount of Each Receipt this Period
50.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	350.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 865 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. DELUCA, RUSSELL, , MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 320 TRADEA TARN
 City ROSWELL State GA Zip Code 30076-4448
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼ 700.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 21 / 2016
Transaction ID : SA11A.443615
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION

B. DEMARAIS, RIMA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 170 IMPERIAL AVENUE
 City WESTPORT State CT Zip Code 06880-4911
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼ 235.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 04 / 2016
Transaction ID : SA11A.474018
 Amount of Each Receipt this Period
 30.00
 Memo Item
 CONTRIBUTION

C. DEMETRIUS, JOHN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 39 WEINMANN'S BLVD.
 City WAYNE State NJ Zip Code 07470-2821
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) BUCHBINDER TUNICK & COMPANY LLP Occupation (for Individual) CPA
 Receipt For:
 Primary General
 Other (specify)
 Aggregate Year-to-Date ▼ 275.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 21 / 2016
Transaction ID : SA11A.444521
 Amount of Each Receipt this Period
 25.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	155.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 866 OF 4311
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. DEMETRIUS, JOHN, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 39 WEINMANN'S BLVD.

City WAYNE	State NJ	Zip Code 07470-2821
---------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) BUCHBINDER TUNICK & COMPANY LLP	Occupation (for Individual) CPA
--	------------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
275.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	04	/	2016

Transaction ID : SA11A.472435

Amount of Each Receipt this Period
25.00

Memo Item
CONTRIBUTION

B. DEMING, THOMAS, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 230 S. PRAIRIE AVE

City ARLINGTON HEIGHTS	State IL	Zip Code 60005-3242
---------------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
600.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	26	/	2016

Transaction ID : SA11A.451015

Amount of Each Receipt this Period
100.00

Memo Item
CONTRIBUTION

C. DEMPSEY, PHILIP, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 2264 CROYDON WALK

City SAINT LOUIS	State MO	Zip Code 63131-3256
---------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
225.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	04	/	2016

Transaction ID : SA11A.474002

Amount of Each Receipt this Period
25.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	150.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 867 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
Team Ryan

A. DENES, MARIANNE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1016 COHASSET LANE
 City KALAMAZOO State MI Zip Code 49008-2327
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 600.00

Date of Receipt **11 / 02 / 2016**
Transaction ID : SA11A.465026
 Amount of Each Receipt this Period 300.00
 Memo Item CONTRIBUTION

B. DENHAM, PHILIP, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2623 STEEPLECHASE WAY
 City NORCO State CA Zip Code 92860-4206
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 666.00

Date of Receipt **10 / 27 / 2016**
Transaction ID : SA11A.456468
 Amount of Each Receipt this Period 30.00
 Memo Item CONTRIBUTION

C. DENTON, MARK, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2304 MEDFORD COURT WEST
 City FORT WORTH State TX Zip Code 76109-1137
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) JP MORGAN CHASE Occupation (for Individual) BANKER
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt **10 / 31 / 2016**
Transaction ID : SA11A.457571
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	580.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 868 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. DENTON, PATRICIA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1600 TEXAS STREET
 920
 City FORT WORTH State TX Zip Code 76102-3400
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 337.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 26 / 2016
Transaction ID : SA11A.451336
 Amount of Each Receipt this Period
 25.00
 Memo Item
 CONTRIBUTION

B. DENTON, PATRICIA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1600 TEXAS STREET
 920
 City FORT WORTH State TX Zip Code 76102-3400
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 337.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 28 / 2016
Transaction ID : SA11A.456142
 Amount of Each Receipt this Period
 25.00
 Memo Item
 CONTRIBUTION

C. DENTON, PATRICIA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1600 TEXAS STREET
 920
 City FORT WORTH State TX Zip Code 76102-3400
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 337.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 31 / 2016
Transaction ID : SA11A.457803
 Amount of Each Receipt this Period
 25.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	75.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 869 OF 4311
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. DENTON, PATRICIA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1600 TEXAS STREET
 920
 City FORT WORTH State TX Zip Code 76102-3400
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 337.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 29 / 2016
Transaction ID : SA11A.460493
 Amount of Each Receipt this Period
 30.00
 Memo Item
 CONTRIBUTION

B. DENTON, PATRICIA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1600 TEXAS STREET
 920
 City FORT WORTH State TX Zip Code 76102-3400
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 337.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 03 / 2016
Transaction ID : SA11A.469331
 Amount of Each Receipt this Period
 5.00
 Memo Item
 CONTRIBUTION

C. DENTON, PATRICIA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1600 TEXAS STREET
 920
 City FORT WORTH State TX Zip Code 76102-3400
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 337.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 04 / 2016
Transaction ID : SA11A.473873
 Amount of Each Receipt this Period
 25.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	60.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 870 OF 4311
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. DENTON, WILLIAM, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 4325 WINDSOR PKWY

City DALLAS	State TX	Zip Code 75205-1646
----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) WILLIAM DENTON	Occupation (for Individual) LST
---	------------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1050.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		21		2016

Transaction ID : SA11A.444354

Amount of Each Receipt this Period
50.00

Memo Item
CONTRIBUTION

B. DENTON, WILLIAM, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 4325 WINDSOR PKWY

City DALLAS	State TX	Zip Code 75205-1646
----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) WILLIAM DENTON	Occupation (for Individual) LST
---	------------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1050.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		26		2016

Transaction ID : SA11A.454298

Amount of Each Receipt this Period
100.00

Memo Item
CONTRIBUTION

C. DEPIANO, NEAL, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 186 GOEL RD

City BIRMINGHAM	State AL	Zip Code 35244-3404
--------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
430.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		25		2016

Transaction ID : SA11A.452172

Amount of Each Receipt this Period
30.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	180.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 871 OF 4311
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. DEPPISCH, JACK, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address **N74 W15969 STONEWOOD DRIVE**

City MENOMONEE FALLS	State WI	Zip Code 53051-0706
--------------------------------	--------------------	-------------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) CPA	Occupation (for Individual) SALTELL, JOHNSON & APPEL
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt
10 / 26 / 2016

Transaction ID : SA11A.450755

Amount of Each Receipt this Period
250.00

Memo Item CONTRIBUTION

B. DERIEUX, SAMUEL, A., ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address **2106 CEDARFIELD LANE**

City RICHMOND	State VA	Zip Code 23233-1937
-------------------------	--------------------	-------------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
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Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
700.00

Date of Receipt
10 / 24 / 2016

Transaction ID : SA11A.444054

Amount of Each Receipt this Period
250.00

Memo Item CONTRIBUTION

C. DERRICK, JEAN, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address **828 RED LION RD
APT. 20**

City PHILADELPHIA	State PA	Zip Code 19115-1471
-----------------------------	--------------------	-------------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
--	---

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
500.00

Date of Receipt
10 / 21 / 2016

Transaction ID : SA11A.444232

Amount of Each Receipt this Period
100.00

Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	600.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 872 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
Team Ryan

A. DERRICK, JEAN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 828 RED LION RD
 APT. 20
 City PHILADELPHIA State PA Zip Code 19115-1471
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 31 / 2016
Transaction ID : SA11A.457809
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION

B. DERRICK, JEAN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 828 RED LION RD
 APT. 20
 City PHILADELPHIA State PA Zip Code 19115-1471
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 31 / 2016
Transaction ID : SA11A.457819
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION

C. DERRICK, JEAN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 828 RED LION RD
 APT. 20
 City PHILADELPHIA State PA Zip Code 19115-1471
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 30 / 2016
Transaction ID : SA11A.460002
 Amount of Each Receipt this Period
 50.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	250.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 873 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
-----------------------------	-----------------------------	-----------------------------

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NAME OF COMMITTEE (In Full)
Team Ryan

A. DERRICK, JEAN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 828 RED LION RD
 APT. 20
 City PHILADELPHIA State PA Zip Code 19115-1471
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt
 11 / 05 / 2016
Transaction ID : SA11A.478661
 Amount of Each Receipt this Period
 150.00
 Memo Item
 CONTRIBUTION

B. DESANTIS, JAMES, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 328 N. OCEAN DR. APT. PH1
 City POMPANO BEACH State FL Zip Code 33062-5111
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) DESANTIS KITCHENS AND INTERIOR
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 225.00

Date of Receipt
 10 / 30 / 2016
Transaction ID : SA11A.460118
 Amount of Each Receipt this Period
 75.00
 Memo Item
 CONTRIBUTION

C. DESANTIS, JAMES, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 328 N. OCEAN DR. APT. PH1
 City POMPANO BEACH State FL Zip Code 33062-5111
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) DESANTIS KITCHENS AND INTERIOR
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 225.00

Date of Receipt
 11 / 04 / 2016
Transaction ID : SA11A.472730
 Amount of Each Receipt this Period
 75.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	300.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 874 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. DESIDERIO, JOHN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 20 EAST 9 ST
 26B
 City NEW YORK State NY Zip Code 10003-5944
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) HARBORVIEW CONSULTANTS Occupation (for Individual) OWNER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt 10 / 24 / 2016
Transaction ID : SA11A.446211
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

B. DESIDERIO, JOHN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 20 EAST 9 ST
 26B
 City NEW YORK State NY Zip Code 10003-5944
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) HARBORVIEW CONSULTANTS Occupation (for Individual) OWNER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt 11 / 04 / 2016
Transaction ID : SA11A.473239
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

C. DESLAURIERS, ROGER, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 13 4TH ST
 City BARRINGTON State RI Zip Code 02806-1811
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 11 / 02 / 2016
Transaction ID : SA11A.465980
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	450.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 875 OF 4311
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. DESLONGCHAMPS, PAUL, R., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1074 E CIRCLE DRIVE
 City WHITEFISH BAY State WI Zip Code 53217-5363
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) WAVELAND VENTURES Occupation (for Individual) INVESTMENTS
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 2500.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 03 / 2016
Transaction ID : SA11A.465186
 Amount of Each Receipt this Period
 2500.00
 Memo Item
 CONTRIBUTION

B. DESMEDT, CLEMENT, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 12132 OLD POMERADO ROAD
 City POWAY State CA Zip Code 92064-6107
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 225.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 02 / 2016
Transaction ID : SA11A.469888
 Amount of Each Receipt this Period
 50.00
 Memo Item
 CONTRIBUTION

C. DESMEDT, CLEMENT, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 12132 OLD POMERADO ROAD
 City POWAY State CA Zip Code 92064-6107
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 225.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 02 / 2016
Transaction ID : SA11A.469889
 Amount of Each Receipt this Period
 50.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	2600.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 876 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. DESMEDT, CLEMENT, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 12132 OLD POMERADO ROAD
 City POWAY State CA Zip Code 92064-6107
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 225.00

Date of Receipt
 11 / 07 / 2016
Transaction ID : SA11A.475712
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

B. DESMEDT, CLEMENT, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 12132 OLD POMERADO ROAD
 City POWAY State CA Zip Code 92064-6107
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 225.00

Date of Receipt
 11 / 07 / 2016
Transaction ID : SA11A.475714
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

C. DESSECKER, ERIC, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4001 UPLAND TRCE
 City MARIETTA State GA Zip Code 30066-3074
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SIGMA THERMAL INC. Occupation (for Individual) SALES ENGINEER
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 1350.00

Date of Receipt
 10 / 27 / 2016
Transaction ID : SA11A.453280
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 150.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 877 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. DESSECKER, ERIC, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 4001 UPLAND TRCE

City MARIETTA	State GA	Zip Code 30066-3074
------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) SIGMA THERMAL INC.	Occupation (for Individual) SALES ENGINEER
---	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1350.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		29		2016

Transaction ID : SA11A.461072

Amount of Each Receipt this Period
100.00

Memo Item
CONTRIBUTION

B. DESSECKER, ERIC, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 4001 UPLAND TRCE

City MARIETTA	State GA	Zip Code 30066-3074
------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) SIGMA THERMAL INC.	Occupation (for Individual) SALES ENGINEER
---	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1350.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11		02		2016

Transaction ID : SA11A.466931

Amount of Each Receipt this Period
100.00

Memo Item
CONTRIBUTION

C. DESSECKER, ERIC, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 4001 UPLAND TRCE

City MARIETTA	State GA	Zip Code 30066-3074
------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) SIGMA THERMAL INC.	Occupation (for Individual) SALES ENGINEER
---	---

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
1350.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11		02		2016

Transaction ID : SA11A.466932

Amount of Each Receipt this Period
100.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	300.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 878 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. DESSECKER, ERIC, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4001 UPLAND TRCE
 City MARIETTA State GA Zip Code 30066-3074
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SIGMA THERMAL INC. Occupation (for Individual) SALES ENGINEER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1350.00

Date of Receipt 11 / 04 / 2016
Transaction ID : SA11A.472213
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

B. DETWEILER, BRUCE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1448 VANCOUVER AVE
 City BURLINGAME State CA Zip Code 94010-5536
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 10 / 27 / 2016
Transaction ID : SA11A.457063
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

C. DETWEILER, BRUCE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1448 VANCOUVER AVE
 City BURLINGAME State CA Zip Code 94010-5536
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 10 / 27 / 2016
Transaction ID : SA11A.457065
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 300.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 879 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
A. DEVERAUX, JEROME, , ,

Mailing Address 304 SOUTH 3RD

City LARAMIE	State WY	Zip Code 82070-3624
-----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
500.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 04 / 2016
Transaction ID : SA11A.472779

Amount of Each Receipt this Period
100.00

Memo Item CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
B. DEVERE, JOHN, , ,

Mailing Address 350LOIRE VALLEY DR.

City SIMI VALLEY	State CA	Zip Code 93065-8242
---------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
275.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 21 / 2016
Transaction ID : SA11A.444498

Amount of Each Receipt this Period
25.00

Memo Item CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
C. DEVERE, JOHN, , ,

Mailing Address 350LOIRE VALLEY DR.

City SIMI VALLEY	State CA	Zip Code 93065-8242
---------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
275.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 04 / 2016
Transaction ID : SA11A.471619

Amount of Each Receipt this Period
25.00

Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	150.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 880 OF 4311
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. DEVEREUX, RICHARD, B., MR.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 19 GRAMATAN COURT
City BRONXVILLE State NY Zip Code 10708-3015
FEC ID number of contributing federal political committee. **C**
Name of Employer (for Individual) WEILL CORNELL MEDICAL COLLEGE Occupation (for Individual) PHYSICIAN
Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 250.00

Date of Receipt 10 / 20 / 2016
Transaction ID : SA11A.433522
Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

B. DEVITT, BLAKE, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 3215 W. GULF DR. E102
City SANIBEL State FL Zip Code 33957-5651
FEC ID number of contributing federal political committee. **C**
Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 501.00

Date of Receipt 10 / 24 / 2016
Transaction ID : SA11A.449419
Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

C. DEVRIES, JAMES, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 15 AVENUE DE LA MER APT 2702
City PALM COAST State FL Zip Code 32137-2291
FEC ID number of contributing federal political committee. **C**
Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 2100.00

Date of Receipt 10 / 21 / 2016
Transaction ID : SA11A.444445
Amount of Each Receipt this Period 1000.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶ 1150.00
TOTAL This Period (last page this line number only).....▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 881 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
Team Ryan

A. DEVRIES, JAMES, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 15 AVENUE DE LA MER
 APT 2702
 City PALM COAST State FL Zip Code 32137-2291
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 2100.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 01 / 2016
Transaction ID : SA11A.462801
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION

B. DEW, JERRY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 702 BIRKDALE DR
 City CLAYTON State NC Zip Code 27527-8880
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 04 / 2016
Transaction ID : SA11A.471576
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION

C. DEWEY, RICHARD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 208 RIMROCK WAY
 City MISSOULA State MT Zip Code 59803-2317
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 800.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 04 / 2016
Transaction ID : SA11A.472309
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	300.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 882 OF 4311
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. DEWITT, DAVID, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 4235 N HALL STREET
City DALLAS State TX Zip Code 75219-2728
FEC ID number of contributing federal political committee. **C**
Name of Employer (for Individual) INOGEN, INC Occupation (for Individual) SALES
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 205.00

Date of Receipt 11 / 02 / 2016
Transaction ID : SA11A.466782
Amount of Each Receipt this Period 30.00
 Memo Item CONTRIBUTION

B. DEWITT, DAVID, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 4235 N HALL STREET
City DALLAS State TX Zip Code 75219-2728
FEC ID number of contributing federal political committee. **C**
Name of Employer (for Individual) INOGEN, INC Occupation (for Individual) SALES
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 205.00

Date of Receipt 11 / 02 / 2016
Transaction ID : SA11A.466799
Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

C. DEYO, SUZAN, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 30672 FOX RUN LANE
City SAN JUAN CAPISTRAN State CA Zip Code 92675-1932
FEC ID number of contributing federal political committee. **C**
Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
Receipt For: Primary General Other (specify)
Aggregate Year-to-Date ▼ 225.00

Date of Receipt 10 / 28 / 2016
Transaction ID : SA11A.461327
Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶ 80.00
TOTAL This Period (last page this line number only).....▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 883 OF 4311
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. DEYO, SUZAN, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 30672 FOX RUN LANE

City SAN JUAN CAPISTRAN	State CA	Zip Code 92675-1932
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
225.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	02	/	2016

Transaction ID : SA11A.469989

Amount of Each Receipt this Period
100.00

Memo Item CONTRIBUTION

B. DEYO, SUZAN, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 30672 FOX RUN LANE

City SAN JUAN CAPISTRAN	State CA	Zip Code 92675-1932
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
225.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	07	/	2016

Transaction ID : SA11A.480450

Amount of Each Receipt this Period
100.00

Memo Item CONTRIBUTION

C. DEYS, ESTHER, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 4300 STATE ROUTE 31

City PALMYRA	State NY	Zip Code 14522-9719
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
1063.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	25	/	2016

Transaction ID : SA11A.448092

Amount of Each Receipt this Period
30.00

Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	230.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 884 OF 4311
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. DEYS, ESTHER, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 4300 STATE ROUTE 31

City PALMYRA	State NY	Zip Code 14522-9719
-----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1063.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	26	/	2016

Transaction ID : SA11A.451382

Amount of Each Receipt this Period
30.00

Memo Item CONTRIBUTION

B. DEYS, ESTHER, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 4300 STATE ROUTE 31

City PALMYRA	State NY	Zip Code 14522-9719
-----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1063.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	27	/	2016

Transaction ID : SA11A.454121

Amount of Each Receipt this Period
50.00

Memo Item CONTRIBUTION

C. DEYS, ESTHER, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 4300 STATE ROUTE 31

City PALMYRA	State NY	Zip Code 14522-9719
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
1063.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	28	/	2016

Transaction ID : SA11A.456431

Amount of Each Receipt this Period
25.00

Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	105.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 885 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. DEYS, ESTHER, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4300 STATE ROUTE 31

City PALMYRA	State NY	Zip Code 14522-9719
-----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1063.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 31 / 2016

Transaction ID : SA11A.458702

Amount of Each Receipt this Period
25.00

Memo Item
CONTRIBUTION

B. DEYS, ESTHER, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4300 STATE ROUTE 31

City PALMYRA	State NY	Zip Code 14522-9719
-----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1063.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 31 / 2016

Transaction ID : SA11A.458709

Amount of Each Receipt this Period
25.00

Memo Item
CONTRIBUTION

C. DEYS, ESTHER, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4300 STATE ROUTE 31

City PALMYRA	State NY	Zip Code 14522-9719
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
1063.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 30 / 2016

Transaction ID : SA11A.460071

Amount of Each Receipt this Period
50.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	100.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 886 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
Team Ryan

A. DEYS, ESTHER, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4300 STATE ROUTE 31
 City PALMYRA State NY Zip Code 14522-9719
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1063.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 28 / 2016
Transaction ID : SA11A.461283
 Amount of Each Receipt this Period
 25.00
 Memo Item
 CONTRIBUTION

B. DEYS, ESTHER, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4300 STATE ROUTE 31
 City PALMYRA State NY Zip Code 14522-9719
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1063.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 28 / 2016
Transaction ID : SA11A.461284
 Amount of Each Receipt this Period
 25.00
 Memo Item
 CONTRIBUTION

C. DEYS, ESTHER, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4300 STATE ROUTE 31
 City PALMYRA State NY Zip Code 14522-9719
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1063.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 28 / 2016
Transaction ID : SA11A.461351
 Amount of Each Receipt this Period
 25.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	75.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 887 OF 4311
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. DEYS, ESTHER, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 4300 STATE ROUTE 31

City PALMYRA	State NY	Zip Code 14522-9719
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
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Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1063.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11		04		2016

Transaction ID : SA11A.471439

Amount of Each Receipt this Period
25.00

Memo Item CONTRIBUTION

B. DEYS, ESTHER, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 4300 STATE ROUTE 31

City PALMYRA	State NY	Zip Code 14522-9719
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
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Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1063.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11		04		2016

Transaction ID : SA11A.471790

Amount of Each Receipt this Period
50.00

Memo Item CONTRIBUTION

C. DEYS, ESTHER, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 4300 STATE ROUTE 31

City PALMYRA	State NY	Zip Code 14522-9719
-----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
1063.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11		04		2016

Transaction ID : SA11A.472363

Amount of Each Receipt this Period
30.00

Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	105.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 888 OF 4311
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. DEYS, ESTHER, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 4300 STATE ROUTE 31

City PALMYRA	State NY	Zip Code 14522-9719
-----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1063.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	07	/	2016

Transaction ID : SA11A.475324

Amount of Each Receipt this Period
50.00

Memo Item CONTRIBUTION

B. DEYS, ESTHER, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 4300 STATE ROUTE 31

City PALMYRA	State NY	Zip Code 14522-9719
-----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1063.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	07	/	2016

Transaction ID : SA11A.480161

Amount of Each Receipt this Period
25.00

Memo Item CONTRIBUTION

C. DEYS, ESTHER, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 4300 STATE ROUTE 31

City PALMYRA	State NY	Zip Code 14522-9719
-----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
1063.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	07	/	2016

Transaction ID : SA11A.480163

Amount of Each Receipt this Period
25.00

Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	100.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 889 OF 4311
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. DI MARCO, ATTILIO, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2164 DEER HOLLOW CIRCLE
 City LONGWOOD State FL Zip Code 32779-7004
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 355.00

Date of Receipt **10 / 27 / 2016**
Transaction ID : SA11A.452787
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

B. DI MARCO, ATTILIO, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2164 DEER HOLLOW CIRCLE
 City LONGWOOD State FL Zip Code 32779-7004
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 355.00

Date of Receipt **11 / 03 / 2016**
Transaction ID : SA11A.474419
 Amount of Each Receipt this Period 30.00
 Memo Item CONTRIBUTION

C. DIAZ, FAUSTO, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 642 VALENCIA AVE 405
 City CORAL GABLES State FL Zip Code 33134-5649
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) ALL AMERICAN CONTAINERS Occupation (for Individual) OWNER
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 15000.00

Date of Receipt **10 / 30 / 2016**
Transaction ID : SA11A.464869
 Amount of Each Receipt this Period 5000.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	5080.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 890 OF 4311
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. DIAZ, FAUSTO, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 642 VALENCIA AVE
405

City CORAL GABLES State FL Zip Code 33134-5649

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) ALL AMERICAN CONTAINERS Occupation (for Individual) OWNER

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
15000.00

Date of Receipt
M M M / D D D / Y Y Y Y Y Y
10 / 30 / 2016

Transaction ID : SA11A.464870

Amount of Each Receipt this Period
5000.00

Memo Item
CONTRIBUTION

B. DIAZ, FAUSTO, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 642 VALENCIA AVE
405

City CORAL GABLES State FL Zip Code 33134-5649

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) ALL AMERICAN CONTAINERS Occupation (for Individual) OWNER

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
15000.00

Date of Receipt
M M M / D D D / Y Y Y Y Y Y
11 / 04 / 2016

Transaction ID : SA11A.474102

Amount of Each Receipt this Period
5000.00

Memo Item
CONTRIBUTION

C. DIAZ-CRUZ, CANDIDO, F., ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 9850 SW 68TH STREET

City MIAMI State FL Zip Code 33173-4604

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) CANDIDO F DIAZ-CRUZ MD Occupation (for Individual) PHYSICIAN

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
400.00

Date of Receipt
M M M / D D D / Y Y Y Y Y Y
10 / 31 / 2016

Transaction ID : SA11A.457243

Amount of Each Receipt this Period
200.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	10200.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 891 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. DICKES, TOM, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 96 AVENUE C APT 1
 City MARATHON State FL Zip Code 33050-4051
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) CHRISTY-FOLTZ INC Occupation (for Individual) INVESTOR
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 11 / 04 / 2016
Transaction ID : SA11A.467603
 Amount of Each Receipt this Period
 200.00
 Memo Item
 CONTRIBUTION

B. DICKSON, DENNIS, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1276 SOLDIERS CREEK
 City GRANTS PASS State OR Zip Code 97526-7868
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) LIONS GATE Occupation (for Individual) MINISTER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 450.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 11 / 07 / 2016
Transaction ID : SA11A.475606
 Amount of Each Receipt this Period
 50.00
 Memo Item
 CONTRIBUTION

C. DICKSON, DENNIS, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1276 SOLDIERS CREEK
 City GRANTS PASS State OR Zip Code 97526-7868
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) LIONS GATE Occupation (for Individual) MINISTER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 450.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 11 / 07 / 2016
Transaction ID : SA11A.475612
 Amount of Each Receipt this Period
 50.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	300.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 892 OF 4311
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
Team Ryan

A. DICKSON, REGINALD, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 118 CARRIAGE HILL DR

City BATTLE CREEK	State MI	Zip Code 49017-3174
----------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
460.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		27		2016

Transaction ID : SA11A.453244

Amount of Each Receipt this Period
100.00

Memo Item CONTRIBUTION

B. DICKSON, REGINALD, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 118 CARRIAGE HILL DR

City BATTLE CREEK	State MI	Zip Code 49017-3174
----------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
460.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		30		2016

Transaction ID : SA11A.459855

Amount of Each Receipt this Period
100.00

Memo Item CONTRIBUTION

C. DICKSON, REGINALD, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 118 CARRIAGE HILL DR

City BATTLE CREEK	State MI	Zip Code 49017-3174
----------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
460.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11		04		2016

Transaction ID : SA11A.474094

Amount of Each Receipt this Period
100.00

Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	300.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 893 OF 4311
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. DIEBOLD, FRANK, J., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1724 SPRING DRIVE
 City LOUISVILLE State KY Zip Code 40205-1325
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 20 / 2016
Transaction ID : SA11A.433425
 Amount of Each Receipt this Period
 500.00
 Memo Item
 CONTRIBUTION

B. DIEDERICH, NORMAN, F., DR., PH.D.
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 9004 TIMBER EDGE DR
 City NORTH RIDGEVILLE State OH Zip Code 44039-6321
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 2100.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 23 / 2016
Transaction ID : SA11A.449614
 Amount of Each Receipt this Period
 250.00
 Memo Item
 CONTRIBUTION

C. DIEFENDERFER, JAMES, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2373 FLENTWOOD DRIVE
 2373 FLENTWOOD DRIVE
 City SARASOTA State FL Zip Code 34238-3008
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 320.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 25 / 2016
Transaction ID : SA11A.448450
 Amount of Each Receipt this Period
 50.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	800.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 894 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
Team Ryan

A. DIEFENDERFER, JAMES, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2373 FLENTWOOD DRIVE
 2373 FLENTWOOD DRIVE
 City SARASOTA State FL Zip Code 34238-3008
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 320.00

Date of Receipt 11 / 01 / 2016
Transaction ID : SA11A.462357
 Amount of Each Receipt this Period 35.00
 Memo Item CONTRIBUTION

B. DIEKMANN, REBECCA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 767 GOODRICH AVE
 City SAINT PAUL State MN Zip Code 55105-3344
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 10 / 27 / 2016
Transaction ID : SA11A.453662
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

C. DIEKMANN, REBECCA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 767 GOODRICH AVE
 City SAINT PAUL State MN Zip Code 55105-3344
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 10 / 27 / 2016
Transaction ID : SA11A.453665
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	235.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 895 OF 4311
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. DIEMAND, ERNEST, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 435 BURTS PIT RD

City FLORENCE	State MA	Zip Code 01062-3678
------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
11		02		2016

Transaction ID : SA11A.466575

Amount of Each Receipt this Period
25.00

Memo Item CONTRIBUTION

B. DIEMAND, ERNEST, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 435 BURTS PIT RD

City FLORENCE	State MA	Zip Code 01062-3678
------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
11		05		2016

Transaction ID : SA11A.479059

Amount of Each Receipt this Period
25.00

Memo Item CONTRIBUTION

C. DIERMEIER, JEFFREY, J., ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 2113 CANNA WAY

City NAPLES	State FL	Zip Code 34105-3069
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
750.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
10		28		2016

Transaction ID : SA11A.454738

Amount of Each Receipt this Period
500.00

Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	550.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 896 OF 4311
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. DIESTELHORST, RICHARD, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1308 GERBER WOODS DRIVE

City EDWARDSVILLE	State IL	Zip Code 62025-3101
----------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
825.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		24		2016

Transaction ID : SA11A.446085

Amount of Each Receipt this Period
50.00

Memo Item CONTRIBUTION

B. DIESTELHORST, RICHARD, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1308 GERBER WOODS DRIVE

City EDWARDSVILLE	State IL	Zip Code 62025-3101
----------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
825.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		21		2016

Transaction ID : SA11A.447095

Amount of Each Receipt this Period
50.00

Memo Item CONTRIBUTION

C. DIESTELHORST, RICHARD, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1308 GERBER WOODS DRIVE

City EDWARDSVILLE	State IL	Zip Code 62025-3101
----------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
825.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		29		2016

Transaction ID : SA11A.460474

Amount of Each Receipt this Period
50.00

Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	150.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 897 OF 4311
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. DIESTELHORST, RICHARD, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1308 GERBER WOODS DRIVE

City EDWARDSVILLE	State IL	Zip Code 62025-3101
----------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
825.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	01	/	2016

Transaction ID : SA11A.467325

Amount of Each Receipt this Period
50.00

Memo Item CONTRIBUTION

B. DIESTELHORST, RICHARD, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1308 GERBER WOODS DRIVE

City EDWARDSVILLE	State IL	Zip Code 62025-3101
----------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
825.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	04	/	2016

Transaction ID : SA11A.479664

Amount of Each Receipt this Period
50.00

Memo Item CONTRIBUTION

C. DIESTELHORST, RICHARD, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1308 GERBER WOODS DRIVE

City EDWARDSVILLE	State IL	Zip Code 62025-3101
----------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
825.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	07	/	2016

Transaction ID : SA11A.480282

Amount of Each Receipt this Period
50.00

Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	150.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 898 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
A. DIETRICH, JOANN, , ,

Mailing Address P.O. BOX 1200

City GRIDLEY	State CA	Zip Code 95948-1200
-----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) SELF EMPLOYED	Occupation (for Individual) FARMER
--	---------------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
600.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	02	/	2016

Transaction ID : SA11A.469578

Amount of Each Receipt this Period
100.00

Memo Item CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
B. DIETRICH, JOANN, , ,

Mailing Address P.O. BOX 1200

City GRIDLEY	State CA	Zip Code 95948-1200
-----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) SELF EMPLOYED	Occupation (for Individual) FARMER
--	---------------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
600.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	02	/	2016

Transaction ID : SA11A.469598

Amount of Each Receipt this Period
200.00

Memo Item CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
C. DIETTERLE, ROBERT, , ,

Mailing Address 824 N. MALDEN AVE.

City FULLERTON	State CA	Zip Code 92832-1235
-------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
600.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	29	/	2016

Transaction ID : SA11A.460468

Amount of Each Receipt this Period
100.00

Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	400.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 899 OF 4311
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. DIETTERLE, ROBERT, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 824 N. MALDEN AVE.

City FULLERTON	State CA	Zip Code 92832-1235
-------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
600.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	29	/	2016

Transaction ID : SA11A.460469

Amount of Each Receipt this Period
100.00

Memo Item CONTRIBUTION

B. DIETTERLE, ROBERT, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 824 N. MALDEN AVE.

City FULLERTON	State CA	Zip Code 92832-1235
-------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
600.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	02	/	2016

Transaction ID : SA11A.469421

Amount of Each Receipt this Period
50.00

Memo Item CONTRIBUTION

C. DIETTERLE, ROBERT, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 824 N. MALDEN AVE.

City FULLERTON	State CA	Zip Code 92832-1235
-------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
600.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	07	/	2016

Transaction ID : SA11A.475527

Amount of Each Receipt this Period
100.00

Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	250.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 900 OF 4311
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. DIETZE, KATHERINE, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 133 EAST 64 STREET
4B

City NEW YORK State NY Zip Code 10065-7045

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
400.00

Date of Receipt
11 / 01 / 2016
Transaction ID : SA11A.462982

Amount of Each Receipt this Period
50.00

Memo Item CONTRIBUTION

B. DIETZE, KATHERINE, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 133 EAST 64 STREET
4B

City NEW YORK State NY Zip Code 10065-7045

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
400.00

Date of Receipt
11 / 01 / 2016
Transaction ID : SA11A.462983

Amount of Each Receipt this Period
50.00

Memo Item CONTRIBUTION

C. DIGIORGIO, CHARLES, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 4079 CIRCLE CT

City MILFORD State PA Zip Code 18337-9307

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
609.00

Date of Receipt
10 / 23 / 2016
Transaction ID : SA11A.449593

Amount of Each Receipt this Period
50.00

Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 150.00

TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 901 OF 4311
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. DIGIORGIO, CHARLES, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 4079 CIRCLE CT

City MILFORD	State PA	Zip Code 18337-9307
-----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
609.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		23		2016

Transaction ID : SA11A.449594

Amount of Each Receipt this Period
50.00

Memo Item
CONTRIBUTION

B. DIGIORGIO, CHARLES, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 4079 CIRCLE CT

City MILFORD	State PA	Zip Code 18337-9307
-----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
609.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		27		2016

Transaction ID : SA11A.453275

Amount of Each Receipt this Period
25.00

Memo Item
CONTRIBUTION

C. DIGIORGIO, CHARLES, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 4079 CIRCLE CT

City MILFORD	State PA	Zip Code 18337-9307
-----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
609.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11		04		2016

Transaction ID : SA11A.473416

Amount of Each Receipt this Period
10.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	85.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 902 OF 4311
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. DILL, CHARLES, A., MR.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 807 S WARSON ROAD

City SAINT LOUIS	State MO	Zip Code 63124-1258
---------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) SELF EMPLOYED	Occupation (for Individual) INVESTOR
--	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
600.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		26		2016

Transaction ID : SA11A.447672

Amount of Each Receipt this Period
100.00

Memo Item
CONTRIBUTION

B. DILLARD, MAX, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 8117 PRESTON ROAD
300

City DALLAS	State TX	Zip Code 75225-6332
----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
550.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		21		2016

Transaction ID : SA11A.444176

Amount of Each Receipt this Period
100.00

Memo Item
CONTRIBUTION

C. DILLARD, MAX, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 8117 PRESTON ROAD
300

City DALLAS	State TX	Zip Code 75225-6332
----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
550.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		24		2016

Transaction ID : SA11A.445924

Amount of Each Receipt this Period
250.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	450.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 903 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
Team Ryan

A. DILLING, LEO, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1039 CHURCH ROAD
 City LUSBY State MD Zip Code 20657-2636
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 11 / 03 / 2016
Transaction ID : SA11A.465387
 Amount of Each Receipt this Period 500.00
 Memo Item CONTRIBUTION

B. DILLON, JAMES, M., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4502 MERGANSER CT
 City NAPLES State FL Zip Code 34119-7970
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 900.00

Date of Receipt 10 / 26 / 2016
Transaction ID : SA11A.454405
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

C. DILLON, JAMES, M., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4502 MERGANSER CT
 City NAPLES State FL Zip Code 34119-7970
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 900.00

Date of Receipt 10 / 28 / 2016
Transaction ID : SA11A.455859
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	650.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 904 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. DILLON, JAMES, M., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4502 MERGANSER CT
 City NAPLES State FL Zip Code 34119-7970
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 900.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 28 / 2016
Transaction ID : SA11A.455867
 Amount of Each Receipt this Period
 50.00
 Memo Item
 CONTRIBUTION

B. DILLON, JAMES, M., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4502 MERGANSER CT
 City NAPLES State FL Zip Code 34119-7970
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 900.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 31 / 2016
Transaction ID : SA11A.458324
 Amount of Each Receipt this Period
 25.00
 Memo Item
 CONTRIBUTION

C. DILLON, JAMES, M., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4502 MERGANSER CT
 City NAPLES State FL Zip Code 34119-7970
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 900.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 31 / 2016
Transaction ID : SA11A.458329
 Amount of Each Receipt this Period
 25.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	100.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 905 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
Team Ryan

A. DILLON, JAMES, M., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4502 MERGANSER CT
 City NAPLES State FL Zip Code 34119-7970
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 900.00

Date of Receipt
 11 / 05 / 2016
Transaction ID : SA11A.478378
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION

B. DILLON, JAMES, M., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4502 MERGANSER CT
 City NAPLES State FL Zip Code 34119-7970
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 900.00

Date of Receipt
 11 / 05 / 2016
Transaction ID : SA11A.478379
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION

C. DILLON, JAMES, M., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4502 MERGANSER CT
 City NAPLES State FL Zip Code 34119-7970
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 900.00

Date of Receipt
 11 / 05 / 2016
Transaction ID : SA11A.478380
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	300.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 906 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. DILLON, JOHN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3110 JUDSON ST #246

City GIG HARBOR	State WA	Zip Code 98335-1254
--------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 02 / 2016

Transaction ID : SA11A.469406

Amount of Each Receipt this Period
250.00

Memo Item
CONTRIBUTION

B. DILTS, FRED, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address BOX 327

City GLENDON	State WY	Zip Code 82213-0327
-----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
400.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 04 / 2016

Transaction ID : SA11A.473047

Amount of Each Receipt this Period
100.00

Memo Item
CONTRIBUTION

C. DIMASCIO, EDA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 18 COPELAND STREET

City WATERTOWN	State MA	Zip Code 02472-1604
-------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
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Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
220.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 10 / 2016

Transaction ID : SA11A.468228

Amount of Each Receipt this Period
25.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	375.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 907 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. DIMICK, JUDITH, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1737 FAIRWAY LN
 City SPANISH FORK State UT Zip Code 84660-9499
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 643.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 24 / 2016
Transaction ID : SA11A.449154
 Amount of Each Receipt this Period
 38.00
 Memo Item
 CONTRIBUTION

B. DIMICK, JUDITH, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1737 FAIRWAY LN
 City SPANISH FORK State UT Zip Code 84660-9499
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 643.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 31 / 2016
Transaction ID : SA11A.457615
 Amount of Each Receipt this Period
 25.00
 Memo Item
 CONTRIBUTION

C. DIMICK, JUDITH, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1737 FAIRWAY LN
 City SPANISH FORK State UT Zip Code 84660-9499
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 643.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 31 / 2016
Transaction ID : SA11A.457626
 Amount of Each Receipt this Period
 25.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	88.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 908 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. DINSMORE, HUGH, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 7911 E FEATHERSONG LN
 City SCOTTSDALE State AZ Zip Code 85255-6419
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt **11 / 06 / 2016**
Transaction ID : SA11A.477044
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

B. DISHMAN, CHARLES, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2520 ROBINHOOD ST 1407
 City HOUSTON State TX Zip Code 77005-2560
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 550.00

Date of Receipt **10 / 26 / 2016**
Transaction ID : SA11A.450141
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

C. DISHMAN, CHARLES, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2520 ROBINHOOD ST 1407
 City HOUSTON State TX Zip Code 77005-2560
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 550.00

Date of Receipt **11 / 03 / 2016**
Transaction ID : SA11A.469051
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	600.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 909 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name A. DISKO, MICHAEL, , ,			Date of Receipt M M M / D D D / Y Y Y Y Y Y 11 / 04 / 2016
Mailing Address 9136 LEITH DRIVE			Transaction ID : SA11A.473246
City DUBLIN	State OH	Zip Code 43017-9664	Amount of Each Receipt this Period 100.00
FEC ID number of contributing federal political committee. C			<input type="checkbox"/> Memo Item CONTRIBUTION
Name of Employer (for Individual) NONE		Occupation (for Individual) RETIRED	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 562.00		

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name B. DISTAD, RICHARD, , ,			Date of Receipt M M M / D D D / Y Y Y Y Y Y 10 / 30 / 2016
Mailing Address 17171 HIDDEN POINT DR. 17171 HIDDEN POINT DR.			Transaction ID : SA11A.460294
City CHAGRIN FALLS	State OH	Zip Code 44023-2001	Amount of Each Receipt this Period 100.00
FEC ID number of contributing federal political committee. C			<input type="checkbox"/> Memo Item CONTRIBUTION
Name of Employer (for Individual) NONE		Occupation (for Individual) RETIRED	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00		

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name C. DISTAD, RICHARD, , ,			Date of Receipt M M M / D D D / Y Y Y Y Y Y 11 / 04 / 2016
Mailing Address 17171 HIDDEN POINT DR. 17171 HIDDEN POINT DR.			Transaction ID : SA11A.470804
City CHAGRIN FALLS	State OH	Zip Code 44023-2001	Amount of Each Receipt this Period 100.00
FEC ID number of contributing federal political committee. C			<input type="checkbox"/> Memo Item CONTRIBUTION
Name of Employer (for Individual) NONE		Occupation (for Individual) RETIRED	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Aggregate Year-to-Date ▼ 500.00		

SUBTOTAL of Receipts This Page (optional).....▶	300.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 910 OF 4311
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. DITATA, RANDY, W., ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 44 REYNAL ROAD

City WHITE PLAINS	State NY	Zip Code 10605-3925
----------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) ANCE INC	Occupation (for Individual) EXEC
---	-------------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
300.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	03	/	2016

Transaction ID : SA11A.465276

Amount of Each Receipt this Period
100.00

Memo Item
CONTRIBUTION

B. DITTER, MICHAEL, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 10124 KOPACHUCK DR NW

City GIG HARBOR	State WA	Zip Code 98335-5998
--------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) SELF EMPLOYED	Occupation (for Individual) MEETING PLANNING
--	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	01	/	2016

Transaction ID : SA11A.462669

Amount of Each Receipt this Period
250.00

Memo Item
CONTRIBUTION

C. DIVANY, ROBERT, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 113 WHITEROCK AVENUE

City PLEASANT GAP	State PA	Zip Code 16823-3511
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
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Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
435.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	25	/	2016

Transaction ID : SA11A.448809

Amount of Each Receipt this Period
30.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	380.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 911 OF 4311
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. DIVANY, ROBERT, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 113 WHITEROCK AVENUE

City PLEASANT GAP	State PA	Zip Code 16823-3511
----------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
435.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		26		2016

Transaction ID : SA11A.451369

Amount of Each Receipt this Period
30.00

Memo Item CONTRIBUTION

B. DIVANY, ROBERT, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 113 WHITEROCK AVENUE

City PLEASANT GAP	State PA	Zip Code 16823-3511
----------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
435.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		30		2016

Transaction ID : SA11A.460036

Amount of Each Receipt this Period
25.00

Memo Item CONTRIBUTION

C. DIVANY, ROBERT, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 113 WHITEROCK AVENUE

City PLEASANT GAP	State PA	Zip Code 16823-3511
----------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
435.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11		04		2016

Transaction ID : SA11A.471098

Amount of Each Receipt this Period
30.00

Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	85.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 912 OF 4311
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. DIVANY, ROBERT, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 113 WHITEROCK AVENUE

City PLEASANT GAP	State PA	Zip Code 16823-3511
----------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
435.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	04	/	2016

Transaction ID : SA11A.472656

Amount of Each Receipt this Period
25.00

Memo Item CONTRIBUTION

B. DIVERIS, JOHN, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 2502 ASHBOURNE CT

City VALPARAISO	State IN	Zip Code 46385-8187
--------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) DIVERIS ORTHOPEDICS	Occupation (for Individual) ORTHOPAEDIC SURGEON
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1018.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	24	/	2016

Transaction ID : SA11A.445831

Amount of Each Receipt this Period
1000.00

Memo Item CONTRIBUTION

C. DIVERIS, JOHN, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 2502 ASHBOURNE CT

City VALPARAISO	State IN	Zip Code 46385-8187
--------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) DIVERIS ORTHOPEDICS	Occupation (for Individual) ORTHOPAEDIC SURGEON
--	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
1018.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	26	/	2016

Transaction ID : SA11A.454560

Amount of Each Receipt this Period
18.00

Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	1043.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 913 OF 4311
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. DIX, KARL, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1379 EDMUND COURT

City ATLANTA	State GA	Zip Code 30306-2236
-----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) SELF EMPLOYED	Occupation (for Individual) MR.
--	------------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
300.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	22	/	2016

Transaction ID : SA11A.446859

Amount of Each Receipt this Period
100.00

Memo Item
CONTRIBUTION

B. DIX, KARL, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1379 EDMUND COURT

City ATLANTA	State GA	Zip Code 30306-2236
-----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) SELF EMPLOYED	Occupation (for Individual) MR.
--	------------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
300.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	04	/	2016

Transaction ID : SA11A.472000

Amount of Each Receipt this Period
100.00

Memo Item
CONTRIBUTION

C. DIX, TIMOTHY, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address PO BOX 38065

City COLORADO SPRINGS	State CO	Zip Code 80937-8065
--------------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
1300.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	24	/	2016

Transaction ID : SA11A.449181

Amount of Each Receipt this Period
100.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	300.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 914 OF 4311
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. DIXON, ANDREW, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1323 SE 17TH STREET
305

City FT LAUDERDALE State FL Zip Code 33316-1707

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
500.00

Date of Receipt
10 / 25 / 2016
Transaction ID : SA11A.448790

Amount of Each Receipt this Period
250.00

Memo Item CONTRIBUTION

B. DIXON, ANDREW, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1323 SE 17TH STREET
305

City FT LAUDERDALE State FL Zip Code 33316-1707

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
500.00

Date of Receipt
10 / 25 / 2016
Transaction ID : SA11A.448794

Amount of Each Receipt this Period
250.00

Memo Item CONTRIBUTION

C. DIXON, DEBORA, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1054 WASHINGTON STREET

City BATH State ME Zip Code 04530-2743

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) CLINICAL PSYCHOLOGIST

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
275.00

Date of Receipt
10 / 26 / 2016
Transaction ID : SA11A.450276

Amount of Each Receipt this Period
50.00

Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	550.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 915 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. DIXON, DONALD, R., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2 DANILUK DRIVE
 City CAMILLUS State NY Zip Code 13031-9626
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 10 / 24 / 2016
Transaction ID : SA11A.443778
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

B. DIXON, GUY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 228 ROSNEY FARM LANE
 City DILLWYN State VA Zip Code 23936-3387
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) KYANTIC MINING CORP Occupation (for Individual) EXECUTIVE
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1250.00

Date of Receipt 10 / 31 / 2016
Transaction ID : SA11A.457229
 Amount of Each Receipt this Period 750.00
 Memo Item CONTRIBUTION

C. DIXON, HUGH, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1379 COMPTON RD
 City MURFREESBORO State TN Zip Code 37130-6822
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 325.00

Date of Receipt 10 / 26 / 2016
Transaction ID : SA11A.450717
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	850.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 916 OF 4311
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. DIXON, HUGH, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 1379 COMPTON RD
City MURFREESBORO State TN Zip Code 37130-6822
FEC ID number of contributing federal political committee. **C**
Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 325.00

Date of Receipt 10 / 27 / 2016
Transaction ID : SA11A.456581
Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

B. DIXON, JEAN, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 1120 E. MISSION RD. SPACE 106
City FALLBROOK State CA Zip Code 92028-2242
FEC ID number of contributing federal political committee. **C**
Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 530.00

Date of Receipt 10 / 20 / 2016
Transaction ID : SA11A.442570
Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

C. DIXON, JEAN, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 1120 E. MISSION RD. SPACE 106
City FALLBROOK State CA Zip Code 92028-2242
FEC ID number of contributing federal political committee. **C**
Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 530.00

Date of Receipt 10 / 26 / 2016
Transaction ID : SA11A.454672
Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶ 150.00
TOTAL This Period (last page this line number only).....▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 917 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. DIXON, JEAN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1120 E. MISSION RD.
 SPACE 106
 City FALLBROOK State CA Zip Code 92028-2242
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 530.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 31 / 2016
Transaction ID : SA11A.459284
 Amount of Each Receipt this Period
 50.00
 Memo Item
 CONTRIBUTION

B. DIXON, WILLIAM, B., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 307 S DITHRIDGE STREET
 APT 903
 City PITTSBURGH State PA Zip Code 15213-3519
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF Occupation (for Individual) ATTORNEY
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 04 / 2016
Transaction ID : SA11A.467644
 Amount of Each Receipt this Period
 50.00
 Memo Item
 CONTRIBUTION

C. DOAN, REBECCA, L., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3246 PALATINE CT.
 City THE VILLAGES State FL Zip Code 32162-7119
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 600.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 26 / 2016
Transaction ID : SA11A.450464
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	200.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 918 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. DOAN, REBECCA, L., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3246 PALATINE CT.
 City THE VILLAGES State FL Zip Code 32162-7119
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 600.00

Date of Receipt **10 / 26 / 2016**
Transaction ID : SA11A.450471
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

B. DODD, GEORGE, T., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 828 PEROLLA DR.
 City FORT WAYNE State IN Zip Code 46845-4506
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 247.00

Date of Receipt **11 / 04 / 2016**
Transaction ID : SA11A.471567
 Amount of Each Receipt this Period 30.00
 Memo Item CONTRIBUTION

C. DODGE, ANNE, N., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 110 KAULA LANE
 City BONITA SPRINGS State FL Zip Code 34134-8523
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 6750.00

Date of Receipt **11 / 08 / 2016**
Transaction ID : SA11A.479686
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	230.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 919 OF 4311
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. DODGE, MARY, M., MS.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 262 BAREFOOT BEACH BLVD
201

City BONITA SPRINGS State FL Zip Code 34134-8598

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1175.00

Date of Receipt
10 / 20 / 2016
Transaction ID : SA11A.442177

Amount of Each Receipt this Period
50.00

Memo Item CONTRIBUTION

B. DODGE, MARY, M., MS.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 262 BAREFOOT BEACH BLVD
201

City BONITA SPRINGS State FL Zip Code 34134-8598

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1175.00

Date of Receipt
10 / 20 / 2016
Transaction ID : SA11A.442182

Amount of Each Receipt this Period
50.00

Memo Item CONTRIBUTION

C. DODSON, JAMES, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 4740 SHIPPEE LANE

City MORADA State CA Zip Code 95212-1907

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
250.00

Date of Receipt
10 / 24 / 2016
Transaction ID : SA11A.449525

Amount of Each Receipt this Period
250.00

Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶ 350.00

TOTAL This Period (last page this line number only).....▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 920 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. DODSON, ROBERT, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2155 VERMONT RD
 City RANTOUL State KS Zip Code 66079-9014
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) DODSON INTERNATIONAL PARTS INC Occupation (for Individual) DODSON INTERNATIONAL
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 11 / 04 / 2016
Transaction ID : SA11A.472943
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

B. DOERFLER, GEORGE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO BOX 470
 City CUPERTINO State CA Zip Code 95015-0470
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 350.00

Date of Receipt 11 / 06 / 2016
Transaction ID : SA11A.477931
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

C. DOERFLER, GEORGE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO BOX 470
 City CUPERTINO State CA Zip Code 95015-0470
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 350.00

Date of Receipt 11 / 06 / 2016
Transaction ID : SA11A.477945
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	250.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 921 OF 4311
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. DOHMEN, ERWIN, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 5110 COUNTRY CLUB BEACH RD
City PORT WASHINGTON State WI Zip Code 53074-9642
FEC ID number of contributing federal political committee. **C**
Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 1000.00

Date of Receipt 10 / 24 / 2016
Transaction ID : SA11A.445927
Amount of Each Receipt this Period 500.00
 Memo Item CONTRIBUTION

B. DOLAN, DANIEL, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 6907 GUADALUPE TR NW
City ALBUQUERQUE State NM Zip Code 87107-6605
FEC ID number of contributing federal political committee. **C**
Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 635.00

Date of Receipt 10 / 26 / 2016
Transaction ID : SA11A.450462
Amount of Each Receipt this Period 10.00
 Memo Item CONTRIBUTION

C. DOLAN, DANIEL, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 6907 GUADALUPE TR NW
City ALBUQUERQUE State NM Zip Code 87107-6605
FEC ID number of contributing federal political committee. **C**
Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 635.00

Date of Receipt 10 / 26 / 2016
Transaction ID : SA11A.450490
Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 760.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 922 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
Team Ryan

A. DOLAN, DANIEL, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 6907 GUADALUPE TR NW
 City ALBUQUERQUE State NM Zip Code 87107-6605
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 635.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 26 / 2016
Transaction ID : SA11A.450520
 Amount of Each Receipt this Period
 250.00
 Memo Item
 CONTRIBUTION

B. DOLAN, DANIEL, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 6907 GUADALUPE TR NW
 City ALBUQUERQUE State NM Zip Code 87107-6605
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 635.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 31 / 2016
Transaction ID : SA11A.464731
 Amount of Each Receipt this Period
 25.00
 Memo Item
 CONTRIBUTION

C. DOLAN, DANIEL, D., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 70 WEST LAUREL AVENUE
 City LAKE FOREST State IL Zip Code 60045-1116
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) DOLAN MCENIRY Occupation (for Individual) INVESTMENT MANAGEMENT
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 600.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 31 / 2016
Transaction ID : SA11A.458878
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	375.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 923 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. DOLAN, PAUL, J., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 7585 TWIN LAKES TRAIL
 City CHAGRIN FALLS State OH Zip Code 44022-3946
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) INFORMATION REQUESTED PER BEST EFFORTS Occupation (for Individual) INFORMATION REQUESTED PER BE
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 5000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 11 / 08 / 2016
Transaction ID : SA11A.467913
 Amount of Each Receipt this Period
 5000.00
 Memo Item
 CONTRIBUTION

B. DOLATO, HAROLD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 7870 S PROMONTORY WAY APT H104
 City SANDY State UT Zip Code 84094-0787
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 275.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 10 / 25 / 2016
Transaction ID : SA11A.448380
 Amount of Each Receipt this Period
 25.00
 Memo Item
 CONTRIBUTION

C. DOLATO, HAROLD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 7870 S PROMONTORY WAY APT H104
 City SANDY State UT Zip Code 84094-0787
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 275.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 10 / 25 / 2016
Transaction ID : SA11A.448393
 Amount of Each Receipt this Period
 30.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	5055.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 924 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
Team Ryan

A. DOLATO, HAROLD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 7870 S PROMONTORY WAY
 APT H104
 City SANDY State UT Zip Code 84094-0787
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 275.00

Date of Receipt
 11 / 02 / 2016
Transaction ID : SA11A.469535
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

B. DOLATO, HAROLD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 7870 S PROMONTORY WAY
 APT H104
 City SANDY State UT Zip Code 84094-0787
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 275.00

Date of Receipt
 11 / 02 / 2016
Transaction ID : SA11A.469548
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

C. DOLATO, HAROLD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 7870 S PROMONTORY WAY
 APT H104
 City SANDY State UT Zip Code 84094-0787
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 275.00

Date of Receipt
 11 / 07 / 2016
Transaction ID : SA11A.480439
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	75.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 925 OF 4311
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. DOLATO, HAROLD, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 7870 S PROMONTORY WAY
APT H104

City SANDY State UT Zip Code 84094-0787

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 275.00

Date of Receipt
11 / 07 / 2016
Transaction ID : SA11A.480453

Amount of Each Receipt this Period
25.00

Memo Item CONTRIBUTION

B. DOLL, CATHERINE, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1511 MAC STREET

City GARDEN CITY State KS Zip Code 67846-6263

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt
10 / 26 / 2016
Transaction ID : SA11A.447743

Amount of Each Receipt this Period
100.00

Memo Item CONTRIBUTION

C. DOLL, CATHERINE, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1511 MAC STREET

City GARDEN CITY State KS Zip Code 67846-6263

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt
11 / 04 / 2016
Transaction ID : SA11A.467635

Amount of Each Receipt this Period
100.00

Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 225.00

TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 926 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
Team Ryan

A. DOLL, DIXON, R., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2020 BROADWAY STREET
 SUITE 200
 City SAN FRANCISCO State CA Zip Code 94115-1538
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) INVESTOR
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 2700.00

Date of Receipt **11 / 08 / 2016**
Transaction ID : SA11A.467938
 Amount of Each Receipt this Period 2700.00
 Memo Item CONTRIBUTION

B. DONAHUE, EMILY, C., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3931 OLIVER STREET
 City CHEVY CHASE State MD Zip Code 20815-3434
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) INFORMATION REQUESTED PER BEST EFFORTS Occupation (for Individual) INFORMATION REQUESTED PER BE
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 225.00

Date of Receipt **10 / 24 / 2016**
Transaction ID : SA11A.443907
 Amount of Each Receipt this Period 75.00
 Memo Item CONTRIBUTION

C. DONALDSON, THOMAS, P., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 6226 PARIMA ST
 City LONG BEACH State CA Zip Code 90803-2108
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SOUTHWEST TRAILS Occupation (for Individual) OWNER
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt **10 / 28 / 2016**
Transaction ID : SA11A.455972
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	2875.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 927 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. DONALDSON, THOMAS, P., MR.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 6226 PARIMA ST

City LONG BEACH	State CA	Zip Code 90803-2108
--------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) SOUTHWEST TRAILS	Occupation (for Individual) OWNER
---	--------------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
300.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
11 / 04 / 2016

Transaction ID : SA11A.472862

Amount of Each Receipt this Period
100.00

Memo Item
CONTRIBUTION

B. DONELSON, DAVID, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1 HALTON GREEN WAY

City GREENVILLE	State SC	Zip Code 29607-6606
--------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) DAVID DONELSON	Occupation (for Individual) PHYSICIAN
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
840.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
11 / 06 / 2016

Transaction ID : SA11A.477224

Amount of Each Receipt this Period
30.00

Memo Item
CONTRIBUTION

C. DONELSON, DAVID, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1 HALTON GREEN WAY

City GREENVILLE	State SC	Zip Code 29607-6606
--------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) DAVID DONELSON	Occupation (for Individual) PHYSICIAN
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
840.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
11 / 06 / 2016

Transaction ID : SA11A.477225

Amount of Each Receipt this Period
30.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	160.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 928 OF 4311
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
A. DONELSON, DAVID, , ,

Mailing Address **1 HALTON GREEN WAY**

City GREENVILLE	State SC	Zip Code 29607-6606
---------------------------	--------------------	-------------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) DAVID DONELSON	Occupation (for Individual) PHYSICIAN
--	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
840.00

Date of Receipt
11 / 05 / 2016

Transaction ID : SA11A.480940

Amount of Each Receipt this Period
50.00

Memo Item
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
B. DONKERSLOOT, JOHN, , ,

Mailing Address **1 MEANS BLUFF WAY**

City SHELDON	State SC	Zip Code 29941-3044
------------------------	--------------------	-------------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
--	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt
10 / 25 / 2016

Transaction ID : SA11A.447903

Amount of Each Receipt this Period
250.00

Memo Item
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
C. DONOHUE, JOHN, , ,

Mailing Address **POB 770599**

City OCALA	State FL	Zip Code 34477-0599
----------------------	--------------------	-------------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
--	---

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
1750.00

Date of Receipt
10 / 31 / 2016

Transaction ID : SA11A.458824

Amount of Each Receipt this Period
500.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	800.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 929 OF 4311
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. DOODY, ANNE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1510 OAKDALE ROAD
 City ARNOLD State MD Zip Code 21012-2210
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1673.00

Date of Receipt
 11 / 03 / 2016
Transaction ID : SA11A.469211
 Amount of Each Receipt this Period
 200.00
 Memo Item
 CONTRIBUTION

B. DOOLEY, KERRY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 6355 PEGGY ST.
 City BATON ROUGE State LA Zip Code 70808-4254
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) LOUISIANA STATE UNIVERSITY Occupation (for Individual) COLLEGE PROFESSOR
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt
 11 / 06 / 2016
Transaction ID : SA11A.477319
 Amount of Each Receipt this Period
 250.00
 Memo Item
 CONTRIBUTION

C. DORAN, HAROLD, G., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1121 STATE ROUTE 94 W
 City MURRAY State KY Zip Code 42071-4600
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt
 10 / 26 / 2016
Transaction ID : SA11A.447693
 Amount of Each Receipt this Period
 250.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 700.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 930 OF 4311
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. DOROUGH, JOHN, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 8218 MARSH POINTE DRIVE

City MONTGOMERY	State AL	Zip Code 36117-7431
--------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
300.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	07	/	2016

Transaction ID : SA11A.475290

Amount of Each Receipt this Period
100.00

Memo Item CONTRIBUTION

B. DORSO, SHARON, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 6585 OAK HILL DRIVE

City GRANITE BAY	State CA	Zip Code 95746-9636
---------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) SELF EMPLOYED	Occupation (for Individual) SELF EMPLOYED
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
450.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	29	/	2016

Transaction ID : SA11A.460828

Amount of Each Receipt this Period
250.00

Memo Item CONTRIBUTION

C. DOSS, HUGH, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 16725 TADDINGTON PLACE

City LOUISVILLE	State KY	Zip Code 40245-4293
--------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
325.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	04	/	2016

Transaction ID : SA11A.471915

Amount of Each Receipt this Period
25.00

Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	375.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 931 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. DOTSON, GERALD, L., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 757 HORIZON HILL ROAD
 City YACHATS State OR Zip Code 97498-8440
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1100.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 11 / 01 / 2016
Transaction ID : SA11A.461854
 Amount of Each Receipt this Period
 150.00
 Memo Item
 CONTRIBUTION

B. DOTSON, GERALD, L., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 757 HORIZON HILL ROAD
 City YACHATS State OR Zip Code 97498-8440
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1100.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 11 / 04 / 2016
Transaction ID : SA11A.467592
 Amount of Each Receipt this Period
 300.00
 Memo Item
 CONTRIBUTION

C. DOTY, HOWARD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1008 ARIS PEAR WAY
 City DOWNINGTOWN State PA Zip Code 19335-6300
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 225.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 11 / 04 / 2016
Transaction ID : SA11A.474206
 Amount of Each Receipt this Period
 25.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	475.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 932 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. DOUGHERTY, PATRICK, C., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4961 ROSEY VIEW STREET S
 City SALEM State OR Zip Code 97302-9440
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 11 / 01 / 2016
Transaction ID : SA11A.461773
 Amount of Each Receipt this Period 200.00
 Memo Item CONTRIBUTION

B. DOUGHERTY, RONALD, W., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 340 LAKECREST STREET NW
 City CANTON State OH Zip Code 44709-1510
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) KRUGLINK, WILKIN, GRIFFITHS & DOUGHERT Occupation (for Individual) EXECUTIVE
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 10 / 28 / 2016
Transaction ID : SA11A.454794
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

C. DOUGHERTY, RONALD, W., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 340 LAKECREST STREET NW
 City CANTON State OH Zip Code 44709-1510
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) KRUGLINK, WILKIN, GRIFFITHS & DOUGHERT Occupation (for Individual) EXECUTIVE
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 11 / 03 / 2016
Transaction ID : SA11A.465439
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	350.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 933 OF 4311
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. DOUGHTY, STEVEN, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 408 HIDEAWAY CT

City EULESS State TX Zip Code 76039-3859

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
300.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 22 / 2016

Transaction ID : SA11A.446714

Amount of Each Receipt this Period
200.00

Memo Item CONTRIBUTION

B. DOUGLAS, GEORGE, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 215 N BIRCH RD A9

City FORT LAUDERDALE State FL Zip Code 33304-4366

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
750.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 25 / 2016

Transaction ID : SA11A.448506

Amount of Each Receipt this Period
100.00

Memo Item CONTRIBUTION

C. DOUGLAS, GEORGE, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 215 N BIRCH RD A9

City FORT LAUDERDALE State FL Zip Code 33304-4366

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
750.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 25 / 2016

Transaction ID : SA11A.448510

Amount of Each Receipt this Period
100.00

Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	400.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 934 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. DOUGLAS, GEORGE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 215 N BIRCH RD
 A9
 City FORT LAUDERDALE State FL Zip Code 33304-4366
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 750.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 25 / 2016
Transaction ID : SA11A.448552
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION

B. DOUGLAS, GEORGE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 215 N BIRCH RD
 A9
 City FORT LAUDERDALE State FL Zip Code 33304-4366
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 750.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 05 / 2016
Transaction ID : SA11A.478830
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION

C. DOUGLAS, SALLIE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 606 E AMELIA ST
 City ORLANDO State FL Zip Code 32803-5320
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 25 / 2016
Transaction ID : SA11A.448044
 Amount of Each Receipt this Period
 1000.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	1200.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 935 OF 4311
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. DOUMAUX JR, ARTHUR, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1401 WILKIE DRIVE
 City CHARLESTON State WV Zip Code 25314-1730
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 600.00

Date of Receipt 11 / 04 / 2016
Transaction ID : SA11A.470361
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

B. DOWLER, DAVID, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3509 CRESCENT AVENUE
 City DALLAS State TX Zip Code 75205-3924
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) LUTHER KING CAPITAL MANAGEMENT Occupation (for Individual) PORTFOLIO MANAGER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt 11 / 01 / 2016
Transaction ID : SA11A.461869
 Amount of Each Receipt this Period 1000.00
 Memo Item CONTRIBUTION

C. DOWLING, DAVID, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 241 W FAIRVIEW WAY
 City PALATINE State IL Zip Code 60067-7900
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NORTHRUP GRUMMAN Occupation (for Individual) EXECUTIVE
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 10 / 26 / 2016
Transaction ID : SA11A.447597
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 1200.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 936 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. DOWLING, GARY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 13626 CANNADY CT
 City HOUSTON State TX Zip Code 77069-2202
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 350.00

Date of Receipt 11 / 01 / 2016
Transaction ID : SA11A.462516
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

B. DOWLING, MICHAEL, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1099 E CHAMPLAIN DRIVE SUITE A-253
 City FRESNO State CA Zip Code 93720-5030
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) DOWLING AARON Occupation (for Individual) ATTORNEY
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 11 / 04 / 2016
Transaction ID : SA11A.467539
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

C. DOWNEY, ANN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 11211 KEMPS MILL RD
 City WILLIAMSPORT State MD Zip Code 21795-3133
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 310.00

Date of Receipt 10 / 30 / 2016
Transaction ID : SA11A.459517
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	375.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 937 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. DOWNEY, ANN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 11211 KEMPS MILL RD
 City WILLIAMSPORT State MD Zip Code 21795-3133
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 310.00

Date of Receipt
 11 / 06 / 2016
Transaction ID : SA11A.478127
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

B. DOWNEY, ANN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 11211 KEMPS MILL RD
 City WILLIAMSPORT State MD Zip Code 21795-3133
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 310.00

Date of Receipt
 11 / 06 / 2016
Transaction ID : SA11A.478130
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

C. DOWNEY, ANN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 11211 KEMPS MILL RD
 City WILLIAMSPORT State MD Zip Code 21795-3133
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 310.00

Date of Receipt
 11 / 06 / 2016
Transaction ID : SA11A.478131
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	100.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 938 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
Team Ryan

A. DOWNEN , DAVID , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1889 MAPLE AVENUE UNIT W6
 City EVANSTON State IL Zip Code 60201-3169
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt
 11 / 08 / 2016
Transaction ID : SA11A.479694
 Amount of Each Receipt this Period
 50.00
 Memo Item CONTRIBUTION

B. DOWNING, HOWARD, , MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 785 SOUTH VAN ROAD
 City HOLLY State MI Zip Code 48442-8717
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 2000.00

Date of Receipt
 11 / 04 / 2016
Transaction ID : SA11A.471829
 Amount of Each Receipt this Period
 500.00
 Memo Item CONTRIBUTION

C. DOWNING, NEDRA, J., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 785 S VAN RD
 City HOLLY State MI Zip Code 48442-8717
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 985.00

Date of Receipt
 10 / 21 / 2016
Transaction ID : SA11A.444275
 Amount of Each Receipt this Period
 100.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	650.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 939 OF 4311
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. DOWNING, NEDRA, J., ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 785 S VAN RD

City HOLLY	State MI	Zip Code 48442-8717
---------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
985.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
11		07		2016

Transaction ID : SA11A.480355

Amount of Each Receipt this Period
100.00

Memo Item
CONTRIBUTION

B. DOWNING, NEDRA, J., ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 785 S VAN RD

City HOLLY	State MI	Zip Code 48442-8717
---------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
985.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
11		07		2016

Transaction ID : SA11A.480360

Amount of Each Receipt this Period
100.00

Memo Item
CONTRIBUTION

C. DOWNING, NEDRA, J., ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 785 S VAN RD

City HOLLY	State MI	Zip Code 48442-8717
---------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
985.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
11		07		2016

Transaction ID : SA11A.480363

Amount of Each Receipt this Period
100.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	300.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 940 OF 4311
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. DOWNS, SUZANNE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 445 PEACHTREE BATTLE AVENUE
 City ATLANTA State GA Zip Code 30305-4063
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 850.00

Date of Receipt 11 / 07 / 2016
Transaction ID : SA11A.474859
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

B. DOZIER, WILLIAM, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1967 PORT LOCKSLEIGH PLACE
 City NEWPORT BEACH State CA Zip Code 92660-6617
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) INFORMATION REQUESTED PER BEST EFFORTS Occupation (for Individual) INFORMATION REQUESTED PER BE
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 10 / 26 / 2016
Transaction ID : SA11A.447616
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

C. DR.MANNSFELD, SVEN-PETER, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address HILLWOOD ROAD 48
 City MOBILE State AL Zip Code 36608-2310
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 525.00

Date of Receipt 11 / 01 / 2016
Transaction ID : SA11A.462333
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶ 400.00
TOTAL This Period (last page this line number only).....▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 941 OF 4311		
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14	<input type="checkbox"/> 11c <input type="checkbox"/> 15	<input type="checkbox"/> 12 <input type="checkbox"/> 16

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NAME OF COMMITTEE (In Full)
Team Ryan

A. DR.MANNSFELD, SVEN-PETER, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address HILLWOOD ROAD 48
 City MOBILE State AL Zip Code 36608-2310
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 525.00

Date of Receipt: 11 / 04 / 2016
Transaction ID : SA11A.473912
 Amount of Each Receipt this Period: 100.00
 Memo Item CONTRIBUTION

B. DR.MANNSFELD, SVEN-PETER, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address HILLWOOD ROAD 48
 City MOBILE State AL Zip Code 36608-2310
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 525.00

Date of Receipt: 11 / 07 / 2016
Transaction ID : SA11A.480315
 Amount of Each Receipt this Period: 50.00
 Memo Item CONTRIBUTION

C. DRAGON, CHARLES, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 8 FIELD AVE
 City NANTUCKET State MA Zip Code 02554-4422
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) OPTICIAN
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 650.00

Date of Receipt: 11 / 06 / 2016
Transaction ID : SA11A.478086
 Amount of Each Receipt this Period: 250.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	400.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 942 OF 4311
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Team Ryan

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
A. DRAGON, CHARLES, , ,

Mailing Address **8 FIELD AVE**

City NANTUCKET	State MA	Zip Code 02554-4422
--------------------------	--------------------	-------------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) SELF EMPLOYED	Occupation (for Individual) OPTICIAN
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
650.00

Date of Receipt
11 / 05 / 2016

Transaction ID : SA11A.479045

Amount of Each Receipt this Period
100.00

Memo Item
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
B. DRAGON, CHARLES, , ,

Mailing Address **8 FIELD AVE**

City NANTUCKET	State MA	Zip Code 02554-4422
--------------------------	--------------------	-------------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) SELF EMPLOYED	Occupation (for Individual) OPTICIAN
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
650.00

Date of Receipt
11 / 05 / 2016

Transaction ID : SA11A.479054

Amount of Each Receipt this Period
100.00

Memo Item
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
C. DRAKE, CLAYTON, , ,

Mailing Address **5686 BISHOPS BLVD S**

City FARGO	State ND	Zip Code 58104-7253
----------------------	--------------------	-------------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
--	---

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
225.00

Date of Receipt
10 / 20 / 2016

Transaction ID : SA11A.442410

Amount of Each Receipt this Period
25.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	225.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 943 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. DRAKE, CLAYTON, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5686 BISHOPS BLVD S
 City FARGO State ND Zip Code 58104-7253
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 225.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 04 / 2016
Transaction ID : SA11A.473086
 Amount of Each Receipt this Period
 25.00
 Memo Item
 CONTRIBUTION

B. DRAKE, CLAYTON, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5686 BISHOPS BLVD S
 City FARGO State ND Zip Code 58104-7253
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 225.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 08 / 2016
Transaction ID : SA11A.479741
 Amount of Each Receipt this Period
 25.00
 Memo Item
 CONTRIBUTION

C. DRAKE, DON, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 710 R STREET SW
 City ARDMORE State OK Zip Code 73401-3525
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 205.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 27 / 2016
Transaction ID : SA11A.453243
 Amount of Each Receipt this Period
 50.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	100.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 944 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. DRAKE, DON, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 710 R STREET SW
 City ARDMORE State OK Zip Code 73401-3525
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 205.00

Date of Receipt 10 / 27 / 2016
Transaction ID : SA11A.453253
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

B. DRAKE, JANICE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address RT. 1, BOX 206
 City NOWATA State OK Zip Code 74048-9729
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 600.00

Date of Receipt 10 / 31 / 2016
Transaction ID : SA11A.463390
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

C. DRAKE, JANICE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address RT. 1, BOX 206
 City NOWATA State OK Zip Code 74048-9729
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 600.00

Date of Receipt 10 / 31 / 2016
Transaction ID : SA11A.463397
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 250.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 945 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
Team Ryan

A. DRAKE, JANICE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address RT. 1, BOX 206
 City NOWATA State OK Zip Code 74048-9729
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 600.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 11 / 06 / 2016
Transaction ID : SA11A.476826
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION

B. DRAKE, JANICE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address RT. 1, BOX 206
 City NOWATA State OK Zip Code 74048-9729
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 600.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 11 / 06 / 2016
Transaction ID : SA11A.476827
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION

C. DRAKE, JANICE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address RT. 1, BOX 206
 City NOWATA State OK Zip Code 74048-9729
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 600.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 11 / 06 / 2016
Transaction ID : SA11A.476829
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	300.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 946 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. DRAKE, JANICE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address RT. 1, BOX 206
 City NOWATA State OK Zip Code 74048-9729
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 600.00

Date of Receipt 11 / 06 / 2016
Transaction ID : SA11A.476830
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

B. DRASS, MICHAEL, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1040 EDGEWOOD DRIVE
 City DUNCANSVILLE State PA Zip Code 16635-7712
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 600.00

Date of Receipt 10 / 27 / 2016
Transaction ID : SA11A.456886
 Amount of Each Receipt this Period 350.00
 Memo Item CONTRIBUTION

C. DRASS, MICHAEL, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1040 EDGEWOOD DRIVE
 City DUNCANSVILLE State PA Zip Code 16635-7712
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 600.00

Date of Receipt 11 / 05 / 2016
Transaction ID : SA11A.478461
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	700.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 947 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. DRENNEN, BARBARA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 718 WALNUT ST
 City KENT State WA Zip Code 98030-6368
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) PEDIATRIC INTERIM CARE CENTER Occupation (for Individual) EXECUTIVE DIRECTOR
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 07 / 2016
Transaction ID : SA11A.476345
 Amount of Each Receipt this Period
 250.00
 Memo Item
 CONTRIBUTION

B. DRESCHER, MARYRUTH, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5409 PAWNEE TRAIL
 City LOUISVILLE State KY Zip Code 40207-1260
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 520.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 28 / 2016
Transaction ID : SA11A.455849
 Amount of Each Receipt this Period
 25.00
 Memo Item
 CONTRIBUTION

C. DRESCHER, MARYRUTH, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5409 PAWNEE TRAIL
 City LOUISVILLE State KY Zip Code 40207-1260
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 520.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 04 / 2016
Transaction ID : SA11A.471872
 Amount of Each Receipt this Period
 50.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	325.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 948 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
A. DRESCHER, MARYRUTH, , ,

Mailing Address 5409 PAWNEE TRAIL

City LOUISVILLE	State KY	Zip Code 40207-1260
--------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
520.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 07 / 2016

Transaction ID : SA11A.480157

Amount of Each Receipt this Period
25.00

Memo Item CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
B. DRESCHER, MARYRUTH, , ,

Mailing Address 5409 PAWNEE TRAIL

City LOUISVILLE	State KY	Zip Code 40207-1260
--------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
520.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 07 / 2016

Transaction ID : SA11A.480159

Amount of Each Receipt this Period
25.00

Memo Item CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
C. DRESSER, JOHN, , ,

Mailing Address 138 MOORINGS PARK DRIVE
O-304

City NAPLES	State FL	Zip Code 34105-2195
----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 06 / 2016

Transaction ID : SA11A.478235

Amount of Each Receipt this Period
250.00

Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	300.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 949 OF 4311
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. DREW, GEORGE, S., DR.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 243 BERRIE RD.
City AIKEN State SC Zip Code 29801-4803
FEC ID number of contributing federal political committee. **C**
Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) PHYSICIAN
Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 800.00

Date of Receipt 10 / 20 / 2016
Transaction ID : SA11A.441925
Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

B. DREW, GEORGE, S., DR.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 243 BERRIE RD.
City AIKEN State SC Zip Code 29801-4803
FEC ID number of contributing federal political committee. **C**
Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) PHYSICIAN
Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 800.00

Date of Receipt 10 / 24 / 2016
Transaction ID : SA11A.445780
Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

C. DREXLER, RENEE, B., MRS.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 155 UNDERWOOD DR 11
City ATLANTA State GA Zip Code 30328-2940
FEC ID number of contributing federal political committee. **C**
Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 250.00

Date of Receipt 10 / 20 / 2016
Transaction ID : SA11A.442145
Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 600.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 950 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. DREYER, WILLIAM, E., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 10 IRONWOOD ROAD
 City SAN ANTONIO State TX Zip Code 78212-2540
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1400.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 25 / 2016
Transaction ID : SA11A.448576
 Amount of Each Receipt this Period
 250.00
 Memo Item
 CONTRIBUTION

B. DREYER, WILLIAM, E., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 10 IRONWOOD ROAD
 City SAN ANTONIO State TX Zip Code 78212-2540
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1400.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 07 / 2016
Transaction ID : SA11A.476246
 Amount of Each Receipt this Period
 250.00
 Memo Item
 CONTRIBUTION

C. DREYER, WILLIAM, E., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 10 IRONWOOD ROAD
 City SAN ANTONIO State TX Zip Code 78212-2540
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1400.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 07 / 2016
Transaction ID : SA11A.476251
 Amount of Each Receipt this Period
 250.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	750.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 951 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. DREYER, WILLIAM, E., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 10 IRONWOOD ROAD
 City SAN ANTONIO State TX Zip Code 78212-2540
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1400.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 11 / 05 / 2016
Transaction ID : SA11A.478611
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION

B. DRIESSEN, PAUL, K., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 8760 COPELAND POND COURT
 City FAIRFAX State VA Zip Code 22031-2739
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) GLOBAL-COMM PARTNERS Occupation (for Individual) ENERGY POLICY ANALYST
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 350.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 10 / 31 / 2016
Transaction ID : SA11A.459202
 Amount of Each Receipt this Period
 50.00
 Memo Item
 CONTRIBUTION

C. DRIESSEN, PAUL, K., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 8760 COPELAND POND COURT
 City FAIRFAX State VA Zip Code 22031-2739
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) GLOBAL-COMM PARTNERS Occupation (for Individual) ENERGY POLICY ANALYST
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 350.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 11 / 04 / 2016
Transaction ID : SA11A.473849
 Amount of Each Receipt this Period
 50.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	200.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 952 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
Team Ryan

A. DRINKWATER, GENEVA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO BOX 495
 City COTTONWOOD State CA Zip Code 96022-0495
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 317.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 31 / 2016
Transaction ID : SA11A.463488
 Amount of Each Receipt this Period
 25.00
 Memo Item
 CONTRIBUTION

B. DRINKWATER, GENEVA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO BOX 495
 City COTTONWOOD State CA Zip Code 96022-0495
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 317.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 04 / 2016
Transaction ID : SA11A.474157
 Amount of Each Receipt this Period
 25.00
 Memo Item
 CONTRIBUTION

C. DRURY, DAN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1385 HELMSDALE DRIVE
 City FOREST State VA Zip Code 24551-4838
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 452.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 26 / 2016
Transaction ID : SA11A.454551
 Amount of Each Receipt this Period
 75.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶ 125.00
TOTAL This Period (last page this line number only).....▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 953 OF 4311
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. DRURY, DAN, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1385 HELMSDALE DRIVE

City FOREST	State VA	Zip Code 24551-4838
----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
452.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11		06		2016

Transaction ID : SA11A.477245

Amount of Each Receipt this Period
50.00

Memo Item
CONTRIBUTION

B. DUBEAU, JUDITH, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 8 LYLE STREET

City ATTLEBORO	State MA	Zip Code 02703-3553
-------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
216.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11		08		2016

Transaction ID : SA11A.479766

Amount of Each Receipt this Period
20.00

Memo Item
CONTRIBUTION

C. DUBEAU, JUDITH, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 8 LYLE STREET

City ATTLEBORO	State MA	Zip Code 02703-3553
-------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
216.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11		08		2016

Transaction ID : SA11A.479767

Amount of Each Receipt this Period
20.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	90.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 954 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
Team Ryan

A. DUBOC, PATSY, M., MS.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 10303 N. WESTPORT CIR.
 City MEQUON State WI Zip Code 53092-5738
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 11 / 02 / 2016
Transaction ID : SA11A.467024
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

B. DUBOIS, GRANT, E., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 215 QUINCY LANE
 City ROSWELL State GA Zip Code 30076-3975
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 312.00

Date of Receipt 10 / 25 / 2016
Transaction ID : SA11A.447914
 Amount of Each Receipt this Period 30.00
 Memo Item CONTRIBUTION

C. DUBOIS, GRANT, E., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 215 QUINCY LANE
 City ROSWELL State GA Zip Code 30076-3975
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 312.00

Date of Receipt 10 / 25 / 2016
Transaction ID : SA11A.447915
 Amount of Each Receipt this Period 30.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶ 160.00
TOTAL This Period (last page this line number only).....▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 955 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
Team Ryan

A. DUBOIS, GRANT, E., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 215 QUINCY LANE
 City ROSWELL State GA Zip Code 30076-3975
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 312.00

Date of Receipt **10 / 29 / 2016**
Transaction ID : SA11A.461068
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

B. DUBOIS, GRANT, E., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 215 QUINCY LANE
 City ROSWELL State GA Zip Code 30076-3975
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 312.00

Date of Receipt **11 / 02 / 2016**
Transaction ID : SA11A.470200
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

C. DUBOIS, GRANT, E., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 215 QUINCY LANE
 City ROSWELL State GA Zip Code 30076-3975
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 312.00

Date of Receipt **11 / 02 / 2016**
Transaction ID : SA11A.470202
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 75.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 956 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. DUBOIS, GRANT, E., MR.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 215 QUINCY LANE

City ROSWELL	State GA	Zip Code 30076-3975
-----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
312.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	04	/	2016

Transaction ID : SA11A.471433

Amount of Each Receipt this Period
25.00

Memo Item
CONTRIBUTION

B. DUBOIS, TRA, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address P.O. BOX 152

City LELAND	State MS	Zip Code 38756-0152
----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) WORLD CLASS ATHLETICS	Occupation (for Individual) SALES
--	--------------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
750.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	02	/	2016

Transaction ID : SA11A.469709

Amount of Each Receipt this Period
250.00

Memo Item
CONTRIBUTION

C. DUBOIS, TRA, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address P.O. BOX 152

City LELAND	State MS	Zip Code 38756-0152
----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) WORLD CLASS ATHLETICS	Occupation (for Individual) SALES
--	--------------------------------------

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
750.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	02	/	2016

Transaction ID : SA11A.469710

Amount of Each Receipt this Period
250.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	525.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 957 OF 4311
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. DUBOSE, VIVIAN, N., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 32 INTERLOCKEN DRIVE NE
 City ATLANTA State GA Zip Code 30342-3702
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) WHITE ELECTRICAL CONSTRUCTION COMP Occupation (for Individual) MANAGEMENT
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 1500.00

Date of Receipt 10 / 27 / 2016
Transaction ID : SA11A.452266
 Amount of Each Receipt this Period 500.00
 Memo Item CONTRIBUTION

B. DUDLEY, ROBERT, R., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2236 CONCORD AVENUE
 City MOSCOW State ID Zip Code 83843-9529
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 1000.00

Date of Receipt 11 / 03 / 2016
Transaction ID : SA11A.465286
 Amount of Each Receipt this Period 500.00
 Memo Item CONTRIBUTION

C. DUENAS, SYLVIA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 197 LEUCADENDRA DRIVE
 City CORAL GABLES State FL Zip Code 33156-2370
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) Aggregate Year-to-Date ▼ 575.00

Date of Receipt 10 / 24 / 2016
Transaction ID : SA11A.445777
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶ 1100.00
TOTAL This Period (last page this line number only).....▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 958 OF 4311
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. DUENAS, SYLVIA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 197 LEUCADENDRA DRIVE
 City CORAL GABLES State FL Zip Code 33156-2370
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 575.00

Date of Receipt **10 / 24 / 2016**
Transaction ID : SA11A.445778
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

B. DUENAS, SYLVIA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 197 LEUCADENDRA DRIVE
 City CORAL GABLES State FL Zip Code 33156-2370
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 575.00

Date of Receipt **10 / 31 / 2016**
Transaction ID : SA11A.458444
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

C. DUERRE, SUSAN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 6401 RECREATION LANE
 City FALLS CHURCH State VA Zip Code 22041-1216
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 225.00

Date of Receipt **10 / 26 / 2016**
Transaction ID : SA11A.454290
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 175.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 959 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. DUERRE, SUSAN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 6401 RECREATION LANE
 City FALLS CHURCH State VA Zip Code 22041-1216
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 225.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 02 / 2016
Transaction ID : SA11A.466871
 Amount of Each Receipt this Period
 50.00
 Memo Item
 CONTRIBUTION

B. DUERRE, SUSAN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 6401 RECREATION LANE
 City FALLS CHURCH State VA Zip Code 22041-1216
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 225.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 02 / 2016
Transaction ID : SA11A.466885
 Amount of Each Receipt this Period
 25.00
 Memo Item
 CONTRIBUTION

C. DUERSTEN, ALTHEA, L., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 30 SUTTON PLACE
 APT 2B
 City NEW YORK State NY Zip Code 10022-2383
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 27 / 2016
Transaction ID : SA11A.452321
 Amount of Each Receipt this Period
 500.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	575.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 960 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
Team Ryan

A. DFAULT, DONNA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2735 GLEN EAGLES RD
 City LAKE OSWEGO State OR Zip Code 97034-2733
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 203.00

Date of Receipt 11 / 04 / 2016
Transaction ID : SA11A.473180
 Amount of Each Receipt this Period 30.00
 Memo Item CONTRIBUTION

B. DUFFY, PATRICK, J., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3620 S PACIFIC AVENUE #321
 City SAN PEDRO State CA Zip Code 90731-6954
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) INFORMATION REQUESTED PER BEST EFFORTS Occupation (for Individual) INFORMATION REQUESTED PER BE
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 700.00

Date of Receipt 11 / 10 / 2016
Transaction ID : SA11A.468191
 Amount of Each Receipt this Period 500.00
 Memo Item CONTRIBUTION

C. DUGGAN, ROBERT, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 56 PIGEON HILL ROAD
 City WESTON State MA Zip Code 02493-1640
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) ATTORNEY
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt 10 / 26 / 2016
Transaction ID : SA11A.447640
 Amount of Each Receipt this Period 500.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	1030.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 961 OF 4311
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. DUHAIME, MICHAEL, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 515 PARKVIEW AVE

City WESTFIELD	State NJ	Zip Code 07090-2403
-------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) MERCURY	Occupation (for Individual) PUBLIC AFFAIRS
--	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
2000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		28		2016

Transaction ID : SA11A.449694

Amount of Each Receipt this Period
2000.00

Memo Item CONTRIBUTION

B. DUKE, JOANNE, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1700 3RD AVE.,W 503

City BRADENTON	State FL	Zip Code 34205-5946
-------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
450.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11		02		2016

Transaction ID : SA11A.466501

Amount of Each Receipt this Period
100.00

Memo Item CONTRIBUTION

C. DUKE, JOANNE, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1700 3RD AVE.,W 503

City BRADENTON	State FL	Zip Code 34205-5946
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
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Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
450.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11		02		2016

Transaction ID : SA11A.466507

Amount of Each Receipt this Period
100.00

Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	2200.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 962 OF 4311
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. DULIN, SANDRA, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 7066 NORWAY RD.
City SUN PRAIRIE State WI Zip Code 53590-9436
FEC ID number of contributing federal political committee. **C**
Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 400.00

Date of Receipt 10 / 24 / 2016
Transaction ID : SA11A.445574
Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

B. DULIN, SANDRA, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 7066 NORWAY RD.
City SUN PRAIRIE State WI Zip Code 53590-9436
FEC ID number of contributing federal political committee. **C**
Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 400.00

Date of Receipt 10 / 31 / 2016
Transaction ID : SA11A.464694
Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

C. DUNAGAN, THOMAS, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 3501 HOOPER WAY
City ANCHORAGE State AK Zip Code 99515-2340
FEC ID number of contributing federal political committee. **C**
Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
Receipt For: Primary General Other (specify)
Aggregate Year-to-Date ▼ 800.00

Date of Receipt 10 / 30 / 2016
Transaction ID : SA11A.460130
Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 300.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 963 OF 4311
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. DUNAGAN, THOMAS, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 3501 HOOPER WAY

City ANCHORAGE	State AK	Zip Code 99515-2340
-------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
800.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
11		04		2016

Transaction ID : SA11A.472980

Amount of Each Receipt this Period
100.00

Memo Item CONTRIBUTION

B. DUNATHAN, JAMES, R., ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 18745 HUMMINGBIRD DRIVE

City PENN VALLEY	State CA	Zip Code 95946-9692
---------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) SELF	Occupation (for Individual) INSURANCE
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
375.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
11		08		2016

Transaction ID : SA11A.468003

Amount of Each Receipt this Period
75.00

Memo Item CONTRIBUTION

C. DUNAWAY, DONALD, L., MR.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 106 MOORINGS PARK DRIVE, APT C302
APT. 302

City NAPLES	State FL	Zip Code 34105-2156
----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
3750.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
10		24		2016

Transaction ID : SA11A.444069

Amount of Each Receipt this Period
2750.00

Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	2925.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 964 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. DUNAWAY, DONALD, L., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 106 MOORINGS PARK DRIVE, APT C302
 APT. 302

City NAPLES State FL Zip Code 34105-2156

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
 3750.00

Date of Receipt
 11 / 28 / 2016
Transaction ID : SA11A.481121

Amount of Each Receipt this Period
 1000.00

Memo Item CONTRIBUTION

B. DUNCAN, J., , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 26908 MALIBU COVE COLONY DRIVE #M

City MAILIBU State CA Zip Code 90265-4321

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
 1000.00

Date of Receipt
 11 / 01 / 2016
Transaction ID : SA11A.461647

Amount of Each Receipt this Period
 1000.00

Memo Item CONTRIBUTION

C. DUNCAN, JAMES, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 3540 CASTLEGATE WYND

City LEXINGTON State KY Zip Code 40502-7701

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
 555.00

Date of Receipt
 10 / 31 / 2016
Transaction ID : SA11A.458017

Amount of Each Receipt this Period
 30.00

Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 2030.00

TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 965 OF 4311
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Team Ryan

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name A. DUNCAN, JAMES, , ,		Date of Receipt MM / DD / YYYY 10 / 31 / 2016 Transaction ID : SA11A.458030
Mailing Address 3540 CASTLEGATE WYND		Amount of Each Receipt this Period 50.00
City LEXINGTON	State KY	Zip Code 40502-7701
FEC ID number of contributing federal political committee. C		<input type="checkbox"/> Memo Item CONTRIBUTION
Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 555.00	

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name B. DUNCAN, JAMES, , ,		Date of Receipt MM / DD / YYYY 10 / 31 / 2016 Transaction ID : SA11A.458034
Mailing Address 3540 CASTLEGATE WYND		Amount of Each Receipt this Period 50.00
City LEXINGTON	State KY	Zip Code 40502-7701
FEC ID number of contributing federal political committee. C		<input type="checkbox"/> Memo Item CONTRIBUTION
Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 555.00	

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name C. DUNCAN, JAN, , ,		Date of Receipt MM / DD / YYYY 10 / 20 / 2016 Transaction ID : SA11A.433376
Mailing Address 2980 LAZY LN		Amount of Each Receipt this Period 750.00
City HOUSTON	State TX	Zip Code 77019-1302
FEC ID number of contributing federal political committee. C		<input type="checkbox"/> Memo Item CONTRIBUTION
Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Aggregate Year-to-Date ▼ 750.00	

SUBTOTAL of Receipts This Page (optional).....	850.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 966 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
Team Ryan

A. DUNCAN, JOHN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 6 OSPREY VILLAGE DRIVE
 City AMELIA ISLAND State FL Zip Code 32034-4954
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 600.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 01 / 2016
Transaction ID : SA11A.462572
 Amount of Each Receipt this Period
 200.00
 Memo Item
 CONTRIBUTION

B. DUNCAN, JOHN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 6 OSPREY VILLAGE DRIVE
 City AMELIA ISLAND State FL Zip Code 32034-4954
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 600.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 04 / 2016
Transaction ID : SA11A.473575
 Amount of Each Receipt this Period
 75.00
 Memo Item
 CONTRIBUTION

C. DUNCAN, SUE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1202 BEDFORD DR
 City MIDLAND State TX Zip Code 79701-4111
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) DUNCAN DRILLING Occupation (for Individual) CONSULTANT
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 25 / 2016
Transaction ID : SA11A.448563
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	375.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 967 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
Team Ryan

A. DUNCAN, SUE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1202 BEDFORD DR
 City MIDLAND State TX Zip Code 79701-4111
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) DUNCAN DRILLING Occupation (for Individual) CONSULTANT
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 25 / 2016
Transaction ID : SA11A.448565
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION

B. DUNCAN, SUE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1202 BEDFORD DR
 City MIDLAND State TX Zip Code 79701-4111
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) DUNCAN DRILLING Occupation (for Individual) CONSULTANT
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 04 / 2016
Transaction ID : SA11A.473669
 Amount of Each Receipt this Period
 50.00
 Memo Item
 CONTRIBUTION

C. DUNCKLEE, DONALD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 6267 SHADOW TREE LANE
 City LAKE WORTH State FL Zip Code 33463-8241
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 01 / 2016
Transaction ID : SA11A.461818
 Amount of Each Receipt this Period
 500.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	650.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 968 OF 4311
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. DUNHAM, JERRY, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 4610 STABLEHAND DR
City BATAVIA State OH Zip Code 45103-9205
FEC ID number of contributing federal political committee. **C**
Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 250.00

Date of Receipt **10 / 27 / 2016**
Transaction ID : SA11A.453098
Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

B. DUNKELMAN, DANIEL, S., DR., M.D.
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 6631 DREXEL AVENUE
City LOS ANGELES State CA Zip Code 90048-4208
FEC ID number of contributing federal political committee. **C**
Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) GENERAL SURGEON
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 250.00

Date of Receipt **11 / 07 / 2016**
Transaction ID : SA11A.467823
Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

C. DUNKU,, ELLIS, M., ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 9800 ST JULIANS LANE
City HENRICO State VA Zip Code 23238-5910
FEC ID number of contributing federal political committee. **C**
Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
Receipt For: Primary General Other (specify)
Aggregate Year-to-Date ▼ 600.00

Date of Receipt **10 / 31 / 2016**
Transaction ID : SA11A.457359
Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶ 600.00
TOTAL This Period (last page this line number only).....▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 969 OF 4311
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. DUNLOP, JOHN, L., MR.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 7550 N 16TH ST
APT 6119

City PHOENIX State AZ Zip Code 85020-4618

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
465.00

Date of Receipt
10 / 27 / 2016
Transaction ID : SA11A.456645

Amount of Each Receipt this Period
25.00

Memo Item CONTRIBUTION

B. DUNLOP, JOHN, L., MR.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 7550 N 16TH ST
APT 6119

City PHOENIX State AZ Zip Code 85020-4618

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
465.00

Date of Receipt
10 / 31 / 2016
Transaction ID : SA11A.458115

Amount of Each Receipt this Period
25.00

Memo Item CONTRIBUTION

C. DUNLOP, JOHN, L., MR.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 7550 N 16TH ST
APT 6119

City PHOENIX State AZ Zip Code 85020-4618

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
465.00

Date of Receipt
10 / 31 / 2016
Transaction ID : SA11A.458127

Amount of Each Receipt this Period
25.00

Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 75.00

TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 970 OF 4311
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
A. DUNLOP, JOHN, L., MR.,

Mailing Address 7550 N 16TH ST
APT 6119

City PHOENIX State AZ Zip Code 85020-4618

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
465.00

Date of Receipt
10 / 31 / 2016
Transaction ID : SA11A.458998

Amount of Each Receipt this Period
25.00

Memo Item CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
B. DUNN, DONALD, , ,

Mailing Address 6034 EAST VIEWMONT DRIVE

City MESA State AZ Zip Code 85215-7723

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) CORROSION ENGINEERING INC. Occupation (for Individual) OWNER

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt
10 / 31 / 2016
Transaction ID : SA11A.464790

Amount of Each Receipt this Period
250.00

Memo Item CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
C. DUNN, JOSEPH, , ,

Mailing Address 300 W ELM STREET SUITE 2314
SUITE 2314

City CONSHOHOCKEN State PA Zip Code 19428-1832

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) WRITER

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
650.00

Date of Receipt
11 / 04 / 2016
Transaction ID : SA11A.467549

Amount of Each Receipt this Period
250.00

Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 525.00

TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 971 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. DUNN, JOSEPH, M., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 116 FAIRVIEW AVENUE N, UNIT 404
 City SEATTLE State WA Zip Code 98109-5350
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 2000.00

Date of Receipt 10 / 21 / 2016
Transaction ID : SA11A.443574
 Amount of Each Receipt this Period 1000.00
 Memo Item CONTRIBUTION

B. DUNN, JOSEPH, V., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 675 APPLGATE LN
 City GRAND BLANC State MI Zip Code 48439-1668
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 215.00

Date of Receipt 10 / 27 / 2016
Transaction ID : SA11A.452993
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

C. DUNN, JOSEPH, V., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 675 APPLGATE LN
 City GRAND BLANC State MI Zip Code 48439-1668
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 215.00

Date of Receipt 10 / 29 / 2016
Transaction ID : SA11A.461005
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	1050.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 972 OF 4311
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. DUNN, JOSEPH, V., MR.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 675 APPLGATE LN

City GRAND BLANC	State MI	Zip Code 48439-1668
---------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
215.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		31		2016

Transaction ID : SA11A.464136

Amount of Each Receipt this Period
30.00

Memo Item
CONTRIBUTION

B. DUNN, MORRIS, D., MR.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1339 NOBLE HERON WAY

City NAPLES	State FL	Zip Code 34105-2791
----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
7000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		20		2016

Transaction ID : SA11A.433378

Amount of Each Receipt this Period
2000.00

Memo Item
CONTRIBUTION

C. DUNN, RICHARD, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 444 POPLAR LEAF DRIVE

City EDGEWATER	State MD	Zip Code 21037-3215
-------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		25		2016

Transaction ID : SA11A.448658

Amount of Each Receipt this Period
250.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	2280.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 973 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
Team Ryan

A. DUNN, ROBERT, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 361 MERIDIAN STREET
 City CEDARVILLE State MI Zip Code 49719-9790
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) ROBERT DUNN Occupation (for Individual) MARINE CONTRACTOR
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 225.00

Date of Receipt 11 / 06 / 2016
Transaction ID : SA11A.476951
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

B. DUNNE, SUSAN, , MS.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1 SUTTON PLACE SOUTH GC
 City NEW YORK State NY Zip Code 10022-2493
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 10 / 28 / 2016
Transaction ID : SA11A.456342
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

C. DUNNE, SUSAN, , MS.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1 SUTTON PLACE SOUTH GC
 City NEW YORK State NY Zip Code 10022-2493
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 10 / 29 / 2016
Transaction ID : SA11A.461211
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	300.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 974 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. DUNSTAN, JAMES, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4319 BRONSON BLVD
 City KALAMAZOO State MI Zip Code 49008-3211
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1600.00

Date of Receipt 10 / 29 / 2016
Transaction ID : SA11A.461120
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

B. DUNSTAN, JAMES, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4319 BRONSON BLVD
 City KALAMAZOO State MI Zip Code 49008-3211
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1600.00

Date of Receipt 11 / 04 / 2016
Transaction ID : SA11A.472985
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

C. DUONG, DENNY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 6500 EMILIE LN
 City EAST SYRACUSE State NY Zip Code 13057-1084
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) DAH NAIL LLC Occupation (for Individual) OWNER
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 10 / 25 / 2016
Transaction ID : SA11A.448861
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	300.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 975 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. DUONG, DENNY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 6500 EMILIE LN
 City EAST SYRACUSE State NY Zip Code 13057-1084
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) DAH NAIL LLC Occupation (for Individual) OWNER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 11 / 04 / 2016
Transaction ID : SA11A.471945
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

B. DUPLESSIE, WILLIAM, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO BOX 397
 City ATHOL State MA Zip Code 01331-0397
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) MSC INDUSTRIAL Occupation (for Individual) SALES MANAGER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 700.00

Date of Receipt 10 / 22 / 2016
Transaction ID : SA11A.446889
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

C. DUPLESSIE, WILLIAM, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO BOX 397
 City ATHOL State MA Zip Code 01331-0397
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) MSC INDUSTRIAL Occupation (for Individual) SALES MANAGER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 700.00

Date of Receipt 10 / 28 / 2016
Transaction ID : SA11A.455868
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	300.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 976 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. DUPLESSIE, WILLIAM, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO BOX 397
 City ATHOL State MA Zip Code 01331-0397
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) MSC INDUSTRIAL Occupation (for Individual) SALES MANAGER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 700.00

Date of Receipt 11 / 04 / 2016
Transaction ID : SA11A.472233
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

B. DUPONT, CHARLES, J., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address S 68 W 17607 EAST DRIVE
 City MUSKEGO State WI Zip Code 53150-9076
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) QUAD/GRAPHICS Occupation (for Individual) ACCOUNTANT
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 10 / 22 / 2016
Transaction ID : SA11A.446963
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

C. DUPONT, CHARLES, J., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address S 68 W 17607 EAST DRIVE
 City MUSKEGO State WI Zip Code 53150-9076
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) QUAD/GRAPHICS Occupation (for Individual) ACCOUNTANT
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 11 / 04 / 2016
Transaction ID : SA11A.473018
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	200.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 977 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
Team Ryan

A. DUPONT, DIANA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 12079 S MAGPIE PT
 City FLORAL CITY State FL Zip Code 34436-4247
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 450.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 02 / 2016
Transaction ID : SA11A.466869
 Amount of Each Receipt this Period
 50.00
 Memo Item
 CONTRIBUTION

B. DUPONT, DIANA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 12079 S MAGPIE PT
 City FLORAL CITY State FL Zip Code 34436-4247
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 450.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 02 / 2016
Transaction ID : SA11A.466870
 Amount of Each Receipt this Period
 50.00
 Memo Item
 CONTRIBUTION

C. DUPUIS, JAMES, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 100 PETROLEUM DRIVE
 City LAFAYETTE State LA Zip Code 70508-3873
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) WMDDH CPA'S Occupation (for Individual) CPA
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 07 / 2016
Transaction ID : SA11A.476341
 Amount of Each Receipt this Period
 50.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	150.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 978 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. DUPUIS, JAMES, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 100 PETROLEUM DRIVE
 City LAFAYETTE State LA Zip Code 70508-3873
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) WMDDH CPA'S Occupation (for Individual) CPA
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 11 / 07 / 2016
Transaction ID : SA11A.476346
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

B. DURAND, STEPHEN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1 SUMMER SKY CIRCLE
 City RANCHO MIRAGE State CA Zip Code 92270-1979
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 750.00

Date of Receipt 11 / 07 / 2016
Transaction ID : SA11A.475060
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

C. DURAND, STEPHEN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1 SUMMER SKY CIRCLE
 City RANCHO MIRAGE State CA Zip Code 92270-1979
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 750.00

Date of Receipt 11 / 07 / 2016
Transaction ID : SA11A.475063
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	550.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 979 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
Team Ryan

A. DURFEE, AL, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 25 ALLINDALE WAY
 City DEDHAM State MA Zip Code 02026-4201
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 359.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 05 / 2016
Transaction ID : SA11A.479116
 Amount of Each Receipt this Period
 50.00
 Memo Item
 CONTRIBUTION

B. DUTTON, CRAIG, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 635 OXBOW CRT
 City RENO State NV Zip Code 89511-6719
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 05 / 2016
Transaction ID : SA11A.478886
 Amount of Each Receipt this Period
 250.00
 Memo Item
 CONTRIBUTION

C. DUVAL, JANICE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO BOX 687
 City VERADALE State WA Zip Code 99037-0687
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 310.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 01 / 2016
Transaction ID : SA11A.462658
 Amount of Each Receipt this Period
 50.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	350.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 980 OF 4311
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. DWELLE, WALTER, A., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2912 KEOGH COURT
 City VISALIA State CA Zip Code 93291-4231
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) FLYERS ENERGY LLC Occupation (for Individual) ENERGY
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt **10 / 24 / 2016**
Transaction ID : SA11A.443873
 Amount of Each Receipt this Period 500.00
 Memo Item CONTRIBUTION

B. DXION, ROBERT, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 501 STONEGATE LANE
 City WINSTON SALEM State NC Zip Code 27104-1820
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 450.00

Date of Receipt **11 / 03 / 2016**
Transaction ID : SA11A.465354
 Amount of Each Receipt this Period 450.00
 Memo Item CONTRIBUTION

C. DYDEK, FRED, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 22105 IRON KNOLL DR.
 City KINGWOOD State TX Zip Code 77339-1445
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 550.00

Date of Receipt **10 / 30 / 2016**
Transaction ID : SA11A.460251
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	1050.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 981 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. DYDEK, FRED, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 22105 IRON KNOLL DR.
 City KINGWOOD State TX Zip Code 77339-1445
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 550.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 04 / 2016
Transaction ID : SA11A.470876
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION

B. DYER, TED, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1437 TANGLEWOOD RD
 City ABILENE State TX Zip Code 79605-4727
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) HENDRICK HEALTH SYSTEM Occupation (for Individual) MEDICAL DIRECTOR
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 600.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 25 / 2016
Transaction ID : SA11A.448582
 Amount of Each Receipt this Period
 250.00
 Memo Item
 CONTRIBUTION

C. DYER, TED, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1437 TANGLEWOOD RD
 City ABILENE State TX Zip Code 79605-4727
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) HENDRICK HEALTH SYSTEM Occupation (for Individual) MEDICAL DIRECTOR
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 600.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 25 / 2016
Transaction ID : SA11A.448584
 Amount of Each Receipt this Period
 250.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	600.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 982 OF 4311
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. DYKE, JOHN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3661 WINDTREE CIRCLE
 City EAGAN State MN Zip Code 55123-1313
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) ALL STATES AG PARTS INC Occupation (for Individual) PRESIDENT
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt 10 / 25 / 2016
Transaction ID : SA11A.447291
 Amount of Each Receipt this Period 1000.00
 Memo Item CONTRIBUTION

B. DYKHOFF, DAVID, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4425 CATLIN CIRCLE UNIT B
 City CARPINTERIA State CA Zip Code 93013-1656
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) CSA ASSOCIATES, LLC Occupation (for Individual) CONSULTANT
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 650.00

Date of Receipt 10 / 21 / 2016
Transaction ID : SA11A.447221
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

C. DZIUK, PATRICIA, E., MRS., PH.D.
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3412 STRATFORD HILLS LANE
 City AUSTIN State TX Zip Code 78746-4687
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) PSYCHOLOGIST
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt 10 / 25 / 2016
Transaction ID : SA11A.447595
 Amount of Each Receipt this Period 200.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	1300.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 983 OF 4311
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. EAGLE, NORMAN, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 528 VIA MEDIA
City PALOS VERDES ESTAT State CA Zip Code 90274-1252
FEC ID number of contributing federal political committee. **C**
Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 250.00

Date of Receipt 10 / 24 / 2016
Transaction ID : SA11A.445913
Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

B. EAGON, PHYLLIS, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 2420 N.W. MARSHALL ST. 104
City PORTLAND State OR Zip Code 97210-2972
FEC ID number of contributing federal political committee. **C**
Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 700.00

Date of Receipt 10 / 27 / 2016
Transaction ID : SA11A.456536
Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

C. EAGON, PHYLLIS, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 2420 N.W. MARSHALL ST. 104
City PORTLAND State OR Zip Code 97210-2972
FEC ID number of contributing federal political committee. **C**
Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 700.00

Date of Receipt 10 / 27 / 2016
Transaction ID : SA11A.456552
Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 450.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 984 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. EARHART, THOMAS, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 10571 GUN LAKE RD.
 City MIDDLEVILLE State MI Zip Code 49333-8785
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) EXERGY ENGINEERING Occupation (for Individual) ENGINEER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 225.00

Date of Receipt 10 / 28 / 2016
Transaction ID : SA11A.456156
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

B. EARHART, THOMAS, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 10571 GUN LAKE RD.
 City MIDDLEVILLE State MI Zip Code 49333-8785
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) EXERGY ENGINEERING Occupation (for Individual) ENGINEER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 225.00

Date of Receipt 11 / 04 / 2016
Transaction ID : SA11A.473944
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

C. EARNSHAW, JOHN, R., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO BOX 461
 City EDGEWOOD State NM Zip Code 87015-0461
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) STATE OF NEW MEXICO Occupation (for Individual) ACCOUNTANT
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 780.00

Date of Receipt 10 / 21 / 2016
Transaction ID : SA11A.443514
 Amount of Each Receipt this Period 35.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 85.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 985 OF 4311 (check only one)
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. EARNSHAW, JOHN, R., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO BOX 461

City EDGEWOOD	State NM	Zip Code 87015-0461
------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) STATE OF NEW MEXICO	Occupation (for Individual) ACCOUNTANT
--	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
780.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 23 / 2016
Transaction ID : SA11A.446319

Amount of Each Receipt this Period
110.00

Memo Item
CONTRIBUTION

B. EARNSHAW, JOHN, R., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO BOX 461

City EDGEWOOD	State NM	Zip Code 87015-0461
------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) STATE OF NEW MEXICO	Occupation (for Individual) ACCOUNTANT
--	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
780.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 28 / 2016
Transaction ID : SA11A.455673

Amount of Each Receipt this Period
108.00

Memo Item
CONTRIBUTION

C. EARNSHAW, JOHN, R., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO BOX 461

City EDGEWOOD	State NM	Zip Code 87015-0461
------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) STATE OF NEW MEXICO	Occupation (for Individual) ACCOUNTANT
--	---

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
780.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 07 / 2016
Transaction ID : SA11A.475846

Amount of Each Receipt this Period
27.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	245.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 986 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. EASON, DIANA, J., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3747 PEACHTREE ROAD NE
 APT 1624
 City ATLANTA State GA Zip Code 30319-1333
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) HOMEMAKER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 28 / 2016
Transaction ID : SA11A.454686
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION

B. EASTERBTOOK, FRANK, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 117 G STREET
 City NEWPORT BEACH State CA Zip Code 92661-1418
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) BALBOA BRANDS, INC Occupation (for Individual) PRESIDENT
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1605.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 31 / 2016
Transaction ID : SA11A.457739
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION

C. EASTERBTOOK, FRANK, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 117 G STREET
 City NEWPORT BEACH State CA Zip Code 92661-1418
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) BALBOA BRANDS, INC Occupation (for Individual) PRESIDENT
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 1605.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 04 / 2016
Transaction ID : SA11A.473574
 Amount of Each Receipt this Period
 250.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	450.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 987 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. EASTERLY, JOHN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 540 WEST SAN JOSE AVE.
 City FRESNO State CA Zip Code 93704-2316
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 11 / 07 / 2016
Transaction ID : SA11A.475536
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

B. EASTERLY, JOHN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 540 WEST SAN JOSE AVE.
 City FRESNO State CA Zip Code 93704-2316
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 11 / 07 / 2016
Transaction ID : SA11A.475544
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

C. EASTLACK, JANICE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2514 N. ROYER ST.
 City COLORADO SPRINGS State CO Zip Code 80907-7054
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) FIRST LUTHERAN CHURCH Occupation (for Individual) RECEPTIONIST
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 525.00

Date of Receipt 10 / 20 / 2016
Transaction ID : SA11A.442308
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶ 100.00
TOTAL This Period (last page this line number only).....▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 988 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
Team Ryan

A. EASTLACK, JANICE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2514 N. ROYER ST.
 City COLORADO SPRINGS State CO Zip Code 80907-7054
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) FIRST LUTHERAN CHURCH Occupation (for Individual) RECEPTIONIST
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 525.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 01 / 2016
Transaction ID : SA11A.462718
 Amount of Each Receipt this Period
 50.00
 Memo Item
 CONTRIBUTION

B. EASTLACK, JANICE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2514 N. ROYER ST.
 City COLORADO SPRINGS State CO Zip Code 80907-7054
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) FIRST LUTHERAN CHURCH Occupation (for Individual) RECEPTIONIST
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 525.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 01 / 2016
Transaction ID : SA11A.462719
 Amount of Each Receipt this Period
 50.00
 Memo Item
 CONTRIBUTION

C. EASTLACK, JANICE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2514 N. ROYER ST.
 City COLORADO SPRINGS State CO Zip Code 80907-7054
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) FIRST LUTHERAN CHURCH Occupation (for Individual) RECEPTIONIST
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 525.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 01 / 2016
Transaction ID : SA11A.462831
 Amount of Each Receipt this Period
 25.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	125.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 989 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. EASTLACK, JANICE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2514 N. ROYER ST.
 City COLORADO SPRINGS State CO Zip Code 80907-7054
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) FIRST LUTHERAN CHURCH Occupation (for Individual) RECEPTIONIST
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 525.00

Date of Receipt 11 / 04 / 2016
Transaction ID : SA11A.471775
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

B. EASTON, RANDALL, C., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 625 FIRST STREET SE SUITE 420
 City CEDAR RAPIDS State IA Zip Code 52401-2032
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) US WATER COMPANY Occupation (for Individual) US WATER COMPANY
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1810.00

Date of Receipt 10 / 23 / 2016
Transaction ID : SA11A.446529
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

C. EASTON, RANDALL, C., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 625 FIRST STREET SE SUITE 420
 City CEDAR RAPIDS State IA Zip Code 52401-2032
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) US WATER COMPANY Occupation (for Individual) US WATER COMPANY
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1810.00

Date of Receipt 11 / 04 / 2016
Transaction ID : SA11A.470980
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	225.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 990 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. EATON, KATHLEEN, M., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2611 SOUTHWICK DR
 City GREENSBORO State NC Zip Code 27455-0834
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 215.00

Date of Receipt 10 / 24 / 2016
Transaction ID : SA11A.445666
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

B. EATON, KATHLEEN, M., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2611 SOUTHWICK DR
 City GREENSBORO State NC Zip Code 27455-0834
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 215.00

Date of Receipt 10 / 25 / 2016
Transaction ID : SA11A.447983
 Amount of Each Receipt this Period 30.00
 Memo Item CONTRIBUTION

C. EATON, KATHLEEN, M., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2611 SOUTHWICK DR
 City GREENSBORO State NC Zip Code 27455-0834
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 215.00

Date of Receipt 10 / 26 / 2016
Transaction ID : SA11A.450309
 Amount of Each Receipt this Period 15.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 70.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 991 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. EATON, KATHLEEN, M., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2611 SOUTHWICK DR
 City GREENSBORO State NC Zip Code 27455-0834
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 215.00

Date of Receipt 10 / 31 / 2016
Transaction ID : SA11A.458061
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

B. EATON, KATHLEEN, M., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2611 SOUTHWICK DR
 City GREENSBORO State NC Zip Code 27455-0834
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 215.00

Date of Receipt 11 / 05 / 2016
Transaction ID : SA11A.479003
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

C. EATON, RONALD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2953 PARK DR
 City ADRIAN State MI Zip Code 49221-4142
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 10 / 22 / 2016
Transaction ID : SA11A.446697
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 150.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 992 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name A. EBBING, SUSAN, , ,		Date of Receipt MM / DD / YYYY 11 / 04 / 2016
Mailing Address 3670 BURNING TREE DRIVE		Transaction ID : SA11A.479438
City BLOOMFIELD	State MI	Zip Code 48302-1511
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 100.00
Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED	<input type="checkbox"/> Memo Item CONTRIBUTION
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00	

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name B. EBENSPERGER, JOHN, , ,		Date of Receipt MM / DD / YYYY 10 / 29 / 2016
Mailing Address 7 EMMONS CIRCLE		Transaction ID : SA11A.460502
City CAMDEN	State NY	Zip Code 13316-1147
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 25.00
Name of Employer (for Individual) MOHAWK VALLEY COMMUNITY COLLEGE	Occupation (for Individual) INSTRUCTOR/TECHNICAL ASSISTANT	<input type="checkbox"/> Memo Item CONTRIBUTION
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 225.00	

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name C. EBENSPERGER, JOHN, , ,		Date of Receipt MM / DD / YYYY 11 / 04 / 2016
Mailing Address 7 EMMONS CIRCLE		Transaction ID : SA11A.472842
City CAMDEN	State NY	Zip Code 13316-1147
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 25.00
Name of Employer (for Individual) MOHAWK VALLEY COMMUNITY COLLEGE	Occupation (for Individual) INSTRUCTOR/TECHNICAL ASSISTANT	<input type="checkbox"/> Memo Item CONTRIBUTION
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Aggregate Year-to-Date ▼ 225.00	

SUBTOTAL of Receipts This Page (optional).....▶	150.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 993 OF 4311		
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14	<input type="checkbox"/> 11c <input type="checkbox"/> 15	<input type="checkbox"/> 12 <input type="checkbox"/> 16

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NAME OF COMMITTEE (In Full)
Team Ryan

A. EBERLE, CHARLES, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 6501 MEOQUI CT. NW
 City LOS RANCHOS State NM Zip Code 87107-5613
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 5000.00

Date of Receipt 10 / 31 / 2016
Transaction ID : SA11A.458911
 Amount of Each Receipt this Period 2500.00
 Memo Item CONTRIBUTION

B. EBERSOLE, FRANCES, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 340 LAURIE AVE.
 City HUMMELSTOWN State PA Zip Code 17036-9720
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 692.00

Date of Receipt 10 / 21 / 2016
Transaction ID : SA11A.444566
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

C. EBERSOLE, FRANCES, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 340 LAURIE AVE.
 City HUMMELSTOWN State PA Zip Code 17036-9720
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 692.00

Date of Receipt 11 / 04 / 2016
Transaction ID : SA11A.472590
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	2550.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 994 OF 4311
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
A. EBERT, ROBERT, , ,

Mailing Address P.O. BOX 1698

City BRECKENRIDGE	State CO	Zip Code 80424-1698
-----------------------------	--------------------	-------------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) EBERT APPRAISAL SERVICE	Occupation (for Individual) REAL ESTATE APPRAISER
---	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
300.00

Date of Receipt
10 / 30 / 2016

Transaction ID : SA11A.460159

Amount of Each Receipt this Period
100.00

Memo Item CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
B. ECHAVE, CELIA, , ,

Mailing Address 89 SEAVER STREET

City WELLESLEY	State MA	Zip Code 02481-6725
--------------------------	--------------------	-------------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
--	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
400.00

Date of Receipt
10 / 31 / 2016

Transaction ID : SA11A.457926

Amount of Each Receipt this Period
100.00

Memo Item CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
C. ECHAVE, CELIA, , ,

Mailing Address 89 SEAVER STREET

City WELLESLEY	State MA	Zip Code 02481-6725
--------------------------	--------------------	-------------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
--	---

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
400.00

Date of Receipt
10 / 31 / 2016

Transaction ID : SA11A.457934

Amount of Each Receipt this Period
100.00

Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	300.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 995 OF 4311
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. ECHELBARGER, CAROLYN, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 23426 WOODWAY PARK RD

City WOODWAY	State WA	Zip Code 98020-6105
-----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
450.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	06	/	2016

Transaction ID : SA11A.476845

Amount of Each Receipt this Period
100.00

Memo Item CONTRIBUTION

B. ECKMAN, JACK, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 11216 EMERY STREET

City EL MONTE	State CA	Zip Code 91731-1406
------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) INFORMATION REQUESTED PER BEST EFFORTS	Occupation (for Individual) INFORMATION REQUESTED PER BE
---	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
400.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	02	/	2016

Transaction ID : SA11A.465057

Amount of Each Receipt this Period
400.00

Memo Item CONTRIBUTION

C. EDDY, WILLIAM, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 37 WINTERSET LANE

City SIMSBURY	State CT	Zip Code 06070-1720
------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
230.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	30	/	2016

Transaction ID : SA11A.459425

Amount of Each Receipt this Period
25.00

Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	525.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 996 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. EDDY, WILLIAM, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 37 WINTERSET LANE
 City SIMSBURY State CT Zip Code 06070-1720
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 230.00

Date of Receipt
 11 / 03 / 2016
Transaction ID : SA11A.468834
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

B. EDDY, WILLIAM, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 37 WINTERSET LANE
 City SIMSBURY State CT Zip Code 06070-1720
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 230.00

Date of Receipt
 11 / 05 / 2016
Transaction ID : SA11A.478360
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

C. EDELMAN, ALEXANDER, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5 LATTINGTOWN WOODS COURT
 City LOCUST VALLEY State NY Zip Code 11560-1319
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt
 10 / 22 / 2016
Transaction ID : SA11A.447005
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	100.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 997 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. EDGERLY, WILLIAM, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 32 HIGHLAND STREET
 City CAMBRIDGE State MA Zip Code 02138-2210
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt 10 / 26 / 2016
Transaction ID : SA11A.454327
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

B. EDMISTON, DIANA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4324 DANT BLVD
 City RENO State NV Zip Code 89509-7017
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 11 / 04 / 2016
Transaction ID : SA11A.471661
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

C. EDMONDS, OLGA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 6322 CITRINE ST
 City RANCHO CUCAMONGA State CA Zip Code 91701-3237
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) E DENTISTRY Occupation (for Individual) RDH
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 202.00

Date of Receipt 11 / 01 / 2016
Transaction ID : SA11A.462789
 Amount of Each Receipt this Period 32.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶ 182.00
TOTAL This Period (last page this line number only).....▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 998 OF 4311
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. EDWARDS, CARL, N., MR.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 4113 SUNFLOWER LANE

City TEMPLE	State TX	Zip Code 76502-4803
----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) SELF EMPLOYED	Occupation (for Individual) ATTORNEY
--	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
275.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		21		2016

Transaction ID : SA11A.444643

Amount of Each Receipt this Period
75.00

Memo Item
CONTRIBUTION

B. EDWARDS, DAVID, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 710 CANAL STREET

City IRVING	State TX	Zip Code 75063-6485
----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
300.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11		03		2016

Transaction ID : SA11A.469027

Amount of Each Receipt this Period
50.00

Memo Item
CONTRIBUTION

C. EDWARDS, JEAN, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 12404 SHADOW LANE

City BOWIE	State MD	Zip Code 20715-3118
---------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		20		2016

Transaction ID : SA11A.442454

Amount of Each Receipt this Period
50.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	175.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 999 OF 4311
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. EDWARDS, JEAN, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 12404 SHADOW LANE

City BOWIE	State MD	Zip Code 20715-3118
---------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	04	/	2016

Transaction ID : SA11A.473015

Amount of Each Receipt this Period
50.00

Memo Item
CONTRIBUTION

B. EDWARDS, MARCIA, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 2814 CARLISLE DR.

City NEW WINDSOR	State MD	Zip Code 21776-9709
---------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
300.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	04	/	2016

Transaction ID : SA11A.472379

Amount of Each Receipt this Period
25.00

Memo Item
CONTRIBUTION

C. EDWARDS, WILLIAM, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1498 AUTUMN SAGE CT SW

City ROCHESTER	State MN	Zip Code 55902-4401
-------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) MAYO CLINIC	Occupation (for Individual) PATHOLOGIST
--	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
430.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	22	/	2016

Transaction ID : SA11A.446666

Amount of Each Receipt this Period
50.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	125.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1000 OF 4311
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. EDWARDS, WILLIAM, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1498 AUTUMN SAGE CT SW

City ROCHESTER	State MN	Zip Code 55902-4401
-------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) MAYO CLINIC	Occupation (for Individual) PATHOLOGIST
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
430.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		31		2016

Transaction ID : SA11A.458544

Amount of Each Receipt this Period
100.00

Memo Item CONTRIBUTION

B. EDWARDS, WILLIAM, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1498 AUTUMN SAGE CT SW

City ROCHESTER	State MN	Zip Code 55902-4401
-------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) MAYO CLINIC	Occupation (for Individual) PATHOLOGIST
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
430.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11		07		2016

Transaction ID : SA11A.475305

Amount of Each Receipt this Period
50.00

Memo Item CONTRIBUTION

C. EEK, ELISABETH, G., MRS.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 2608 VIKING DRIVE

City HERNDON	State VA	Zip Code 20171-2421
-----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) LOUDOUN COUNTY PUBLIC SCHOOLS	Occupation (for Individual) SUBSTITUTE TEACHER
--	---

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
325.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11		04		2016

Transaction ID : SA11A.479398

Amount of Each Receipt this Period
50.00

Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	200.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1001 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
A. EEK, ELISABETH, G., MRS.,

Mailing Address **2608 VIKING DRIVE**

City HERNDON	State VA	Zip Code 20171-2421
------------------------	--------------------	-------------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) LOUDOUN COUNTY PUBLIC SCHOOLS	Occupation (for Individual) SUBSTITUTE TEACHER
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
325.00

Date of Receipt
11 / 04 / 2016

Transaction ID : SA11A.479402

Amount of Each Receipt this Period
50.00

Memo Item CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
B. EFUNE, MELANIE, , ,

Mailing Address **7140 E. BLUEBIRD LANE**

City PARADISE VALLEY	State AZ	Zip Code 85253-3623
--------------------------------	--------------------	-------------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NEXTGEN APARTMENTS LLC	Occupation (for Individual) DEVELOPER
--	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
2250.00

Date of Receipt
10 / 21 / 2016

Transaction ID : SA11A.444454

Amount of Each Receipt this Period
1000.00

Memo Item CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
C. EFUNE, MELANIE, , ,

Mailing Address **7140 E. BLUEBIRD LANE**

City PARADISE VALLEY	State AZ	Zip Code 85253-3623
--------------------------------	--------------------	-------------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NEXTGEN APARTMENTS LLC	Occupation (for Individual) DEVELOPER
--	---

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
2250.00

Date of Receipt
10 / 23 / 2016

Transaction ID : SA11A.446413

Amount of Each Receipt this Period
250.00

Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	1300.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1002 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. EFUNE, MELANIE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 7140 E. BLUEBIRD LANE

City PARADISE VALLEY	State AZ	Zip Code 85253-3623
-------------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NEXTGEN APARTMENTS LLC	Occupation (for Individual) DEVELOPER
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
2250.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 11 / 01 / 2016
Transaction ID : SA11A.462432

Amount of Each Receipt this Period
250.00

Memo Item
CONTRIBUTION

B. EFUNE, MELANIE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 7140 E. BLUEBIRD LANE

City PARADISE VALLEY	State AZ	Zip Code 85253-3623
-------------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NEXTGEN APARTMENTS LLC	Occupation (for Individual) DEVELOPER
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
2250.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 11 / 01 / 2016
Transaction ID : SA11A.462433

Amount of Each Receipt this Period
250.00

Memo Item
CONTRIBUTION

C. EGAN, EDWARD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2824 MAYFIELD ROAD

City WAYZATA	State MN	Zip Code 55391-2510
-----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
350.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 10 / 23 / 2016
Transaction ID : SA11A.449616

Amount of Each Receipt this Period
50.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	550.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1003 OF 4311
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. EGAN, NANCY, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address **20 SPRINGTOWN ROAD**

City WHITEHOUSE STATION	State NJ	Zip Code 08889-3349
-----------------------------------	--------------------	-------------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
--	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
284.00

Date of Receipt
10 / 22 / 2016

Transaction ID : SA11A.446998

Amount of Each Receipt this Period
25.00

Memo Item
CONTRIBUTION

B. EGAN, NANCY, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address **20 SPRINGTOWN ROAD**

City WHITEHOUSE STATION	State NJ	Zip Code 08889-3349
-----------------------------------	--------------------	-------------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
--	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
284.00

Date of Receipt
10 / 31 / 2016

Transaction ID : SA11A.464491

Amount of Each Receipt this Period
25.00

Memo Item
CONTRIBUTION

C. EGAN, NANCY, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address **20 SPRINGTOWN ROAD**

City WHITEHOUSE STATION	State NJ	Zip Code 08889-3349
-----------------------------------	--------------------	-------------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
--	---

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
284.00

Date of Receipt
10 / 31 / 2016

Transaction ID : SA11A.464494

Amount of Each Receipt this Period
25.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	75.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1004 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. EGAN, NANCY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 20 SPRINGTOWN ROAD
 City WHITEHOUSE STATION State NJ Zip Code 08889-3349
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 284.00

Date of Receipt
 11 / 04 / 2016
Transaction ID : SA11A.472242
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

B. EGELAND, BRENDA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 15759 ALEXANDERS MILL CT
 City HAYMARKET State VA Zip Code 20169-6153
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 450.00

Date of Receipt
 10 / 29 / 2016
Transaction ID : SA11A.460608
 Amount of Each Receipt this Period 200.00
 Memo Item CONTRIBUTION

C. EGELAND, BRENDA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 15759 ALEXANDERS MILL CT
 City HAYMARKET State VA Zip Code 20169-6153
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 450.00

Date of Receipt
 10 / 29 / 2016
Transaction ID : SA11A.460612
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	475.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1005 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. EGGLESTON, RICHARD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 8266 GARFIELD ANX
 City HESPERIA State MI Zip Code 49421-9572
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 220.00

Date of Receipt 11 / 05 / 2016
Transaction ID : SA11A.479008
 Amount of Each Receipt this Period 60.00
 Memo Item CONTRIBUTION

B. EGGLESTON, RICHARD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 8266 GARFIELD ANX
 City HESPERIA State MI Zip Code 49421-9572
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 220.00

Date of Receipt 11 / 07 / 2016
Transaction ID : SA11A.480645
 Amount of Each Receipt this Period 60.00
 Memo Item CONTRIBUTION

C. EGGLESTON, RICHARD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 8266 GARFIELD ANX
 City HESPERIA State MI Zip Code 49421-9572
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 220.00

Date of Receipt 11 / 07 / 2016
Transaction ID : SA11A.480649
 Amount of Each Receipt this Period 60.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	180.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1006 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. EHLE, LINDA, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 2107 26TH AVE. CT.
City GREELEY State CO Zip Code 80634-6618
FEC ID number of contributing federal political committee. **C**
Name of Employer (for Individual) TRINITY EPISCOPAL CHURCH Occupation (for Individual) MUSICIAN
Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 210.00

Date of Receipt 11 / 06 / 2016
Transaction ID : SA11A.477231
Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

B. EHLING, KATHLEEN, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 1998 RIDGE SPRING DRIVE
City THE VILLAGES State FL Zip Code 32162-1444
FEC ID number of contributing federal political committee. **C**
Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 300.00

Date of Receipt 10 / 25 / 2016
Transaction ID : SA11A.449035
Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

C. EHLING, KATHLEEN, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 1998 RIDGE SPRING DRIVE
City THE VILLAGES State FL Zip Code 32162-1444
FEC ID number of contributing federal political committee. **C**
Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 300.00

Date of Receipt 11 / 04 / 2016
Transaction ID : SA11A.471394
Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	225.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1007 OF 4311
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. EHRHARDT, PAUL, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 3552 RESERVOIR ROAD NW

City WASHINGTON	State DC	Zip Code 20007-2362
--------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
600.00

Date of Receipt
10 / 20 / 2016
Transaction ID : SA11A.442007

Amount of Each Receipt this Period
200.00

Memo Item CONTRIBUTION

B. EHRHARDT, PAUL, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 3552 RESERVOIR ROAD NW

City WASHINGTON	State DC	Zip Code 20007-2362
--------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
600.00

Date of Receipt
10 / 20 / 2016
Transaction ID : SA11A.442008

Amount of Each Receipt this Period
200.00

Memo Item CONTRIBUTION

C. EHRlich, CLIFFORD, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 9710 BEMAN WOODS WAY

City POTOMAC	State MD	Zip Code 20854-5455
-----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
850.00

Date of Receipt
10 / 22 / 2016
Transaction ID : SA11A.446812

Amount of Each Receipt this Period
250.00

Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	650.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1008 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
Team Ryan

A. EHRlich, DONNA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 171 JOHNSTON ROAD SW
 City MCDONALD State TN Zip Code 37353-5607
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) EHRlich DONNA Occupation (for Individual) SELF EMPLOYEED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 325.00

Date of Receipt
 11 / 06 / 2016
Transaction ID : SA11A.477450
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

B. EICHENBAUM, FREDERICK, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5060 GOVERNORS WALK DR
 City CANTON State GA Zip Code 30115-2403
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt
 10 / 31 / 2016
Transaction ID : SA11A.463389
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

C. EICHENBAUM, FREDERICK, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5060 GOVERNORS WALK DR
 City CANTON State GA Zip Code 30115-2403
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt
 10 / 31 / 2016
Transaction ID : SA11A.463393
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	125.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1009 OF 4311
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. EICHENBAUM, FREDERICK, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 5060 GOVERNORS WALK DR

City CANTON	State GA	Zip Code 30115-2403
----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
300.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
11		01		2016

Transaction ID : SA11A.467202

Amount of Each Receipt this Period
100.00

Memo Item CONTRIBUTION

B. EICHENBAUM, FREDERICK, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 5060 GOVERNORS WALK DR

City CANTON	State GA	Zip Code 30115-2403
----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
300.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
11		01		2016

Transaction ID : SA11A.467203

Amount of Each Receipt this Period
100.00

Memo Item CONTRIBUTION

C. EICHENBAUM, SUMIE, Y., ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 5060 GOVERNORS WALK DR

City CANTON	State GA	Zip Code 30115-2403
----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
3650.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
10		24		2016

Transaction ID : SA11A.446216

Amount of Each Receipt this Period
100.00

Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	300.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1010 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. EICHENBAUM, SUMIE, Y., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5060 GOVERNORS WALK DR
 City CANTON State GA Zip Code 30115-2403
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 3650.00

Date of Receipt 10 / 23 / 2016
Transaction ID : SA11A.446264
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

B. EICHENBAUM, SUMIE, Y., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5060 GOVERNORS WALK DR
 City CANTON State GA Zip Code 30115-2403
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 3650.00

Date of Receipt 10 / 21 / 2016
Transaction ID : SA11A.447087
 Amount of Each Receipt this Period 75.00
 Memo Item CONTRIBUTION

C. EICHENBAUM, SUMIE, Y., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5060 GOVERNORS WALK DR
 City CANTON State GA Zip Code 30115-2403
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 3650.00

Date of Receipt 10 / 21 / 2016
Transaction ID : SA11A.447089
 Amount of Each Receipt this Period 75.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 200.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1011 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. EICHENBAUM, SUMIE, Y., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5060 GOVERNORS WALK DR
 City CANTON State GA Zip Code 30115-2403
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 3650.00

Date of Receipt 10 / 21 / 2016
Transaction ID : SA11A.447103
 Amount of Each Receipt this Period 75.00
 Memo Item CONTRIBUTION

B. EICHENBAUM, SUMIE, Y., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5060 GOVERNORS WALK DR
 City CANTON State GA Zip Code 30115-2403
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 3650.00

Date of Receipt 10 / 21 / 2016
Transaction ID : SA11A.447104
 Amount of Each Receipt this Period 75.00
 Memo Item CONTRIBUTION

C. EICHENBAUM, SUMIE, Y., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5060 GOVERNORS WALK DR
 City CANTON State GA Zip Code 30115-2403
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 3650.00

Date of Receipt 10 / 21 / 2016
Transaction ID : SA11A.447107
 Amount of Each Receipt this Period 75.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	225.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1012 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. EICHENBAUM, SUMIE, Y., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5060 GOVERNORS WALK DR
 City CANTON State GA Zip Code 30115-2403
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 3650.00

Date of Receipt 10 / 27 / 2016
Transaction ID : SA11A.456560
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

B. EICHENBAUM, SUMIE, Y., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5060 GOVERNORS WALK DR
 City CANTON State GA Zip Code 30115-2403
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 3650.00

Date of Receipt 10 / 27 / 2016
Transaction ID : SA11A.456561
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

C. EICHENBAUM, SUMIE, Y., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5060 GOVERNORS WALK DR
 City CANTON State GA Zip Code 30115-2403
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 3650.00

Date of Receipt 10 / 27 / 2016
Transaction ID : SA11A.456588
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 225.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1013 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. EICHENBAUM, SUMIE, Y., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5060 GOVERNORS WALK DR
 City CANTON State GA Zip Code 30115-2403
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 3650.00

Date of Receipt **10 / 27 / 2016**
Transaction ID : SA11A.456609
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

B. EICHENBAUM, SUMIE, Y., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5060 GOVERNORS WALK DR
 City CANTON State GA Zip Code 30115-2403
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 3650.00

Date of Receipt **11 / 04 / 2016**
Transaction ID : SA11A.471341
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

C. EICHENBAUM, SUMIE, Y., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5060 GOVERNORS WALK DR
 City CANTON State GA Zip Code 30115-2403
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 3650.00

Date of Receipt **11 / 04 / 2016**
Transaction ID : SA11A.472537
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	225.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1014 OF 4311
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. EICHENBAUM, SUMIE, Y.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 5060 GOVERNORS WALK DR

City CANTON	State GA	Zip Code 30115-2403
----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
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Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
3650.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	04	/	2016

Transaction ID : SA11A.473393

Amount of Each Receipt this Period
50.00

Memo Item CONTRIBUTION

B. EICHHOLD, LOUIS, B.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 2985 KLEEMAN ROAD

City CINCINNATI	State OH	Zip Code 45211-1927
--------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
400.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	27	/	2016

Transaction ID : SA11A.453246

Amount of Each Receipt this Period
200.00

Memo Item CONTRIBUTION

C. EICHHOLD, LOUIS, B.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 2985 KLEEMAN ROAD

City CINCINNATI	State OH	Zip Code 45211-1927
--------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
400.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	04	/	2016

Transaction ID : SA11A.470945

Amount of Each Receipt this Period
200.00

Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	450.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 1015 OF 4311
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Team Ryan

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name A. EIMER, MANFRED, , MR.,		Date of Receipt MM / DD / YYYY 11 / 01 / 2016 Transaction ID : SA11A.461881
Mailing Address 200 HARBOR DRIVE UNIT 2501		Amount of Each Receipt this Period 250.00
City SAN DIEGO	State CA	Zip Code 92101-6857
FEC ID number of contributing federal political committee. C		<input type="checkbox"/> Memo Item CONTRIBUTION
Name of Employer (for Individual) RETIRED	Occupation (for Individual) RETIRED	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name B. EINHELLIG, CYNTHIA, , ,		Date of Receipt MM / DD / YYYY 10 / 28 / 2016 Transaction ID : SA11A.455818
Mailing Address 13216 W 83RD TER.		Amount of Each Receipt this Period 30.00
City LENEXA	State KS	Zip Code 66215-2856
FEC ID number of contributing federal political committee. C		<input type="checkbox"/> Memo Item CONTRIBUTION
Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 305.00	

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name C. EINHELLIG, CYNTHIA, , ,		Date of Receipt MM / DD / YYYY 11 / 02 / 2016 Transaction ID : SA11A.469655
Mailing Address 13216 W 83RD TER.		Amount of Each Receipt this Period 25.00
City LENEXA	State KS	Zip Code 66215-2856
FEC ID number of contributing federal political committee. C		<input type="checkbox"/> Memo Item CONTRIBUTION
Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Aggregate Year-to-Date ▼ 305.00	

SUBTOTAL of Receipts This Page (optional).....▶	305.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1016 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. EINHELLIG, CYNTHIA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 13216 W 83RD TER.
 City LENEXA State KS Zip Code 66215-2856
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 305.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 06 / 2016
Transaction ID : SA11A.476712
 Amount of Each Receipt this Period
 25.00
 Memo Item
 CONTRIBUTION

B. EINHELLIG, CYNTHIA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 13216 W 83RD TER.
 City LENEXA State KS Zip Code 66215-2856
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 305.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 06 / 2016
Transaction ID : SA11A.476713
 Amount of Each Receipt this Period
 25.00
 Memo Item
 CONTRIBUTION

C. EINHELLIG, CYNTHIA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 13216 W 83RD TER.
 City LENEXA State KS Zip Code 66215-2856
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 305.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 06 / 2016
Transaction ID : SA11A.476935
 Amount of Each Receipt this Period
 25.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 75.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1017 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. EINHELLIG, CYNTHIA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 13216 W 83RD TER.
 City LENEKA State KS Zip Code 66215-2856
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 305.00

Date of Receipt 11 / 06 / 2016
Transaction ID : SA11A.476938
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

B. EINHORN, STEPHEN, E., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 805 N RIVER ROAD
 City MILWAUKEE State WI Zip Code 53217-
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) EINHORN ASSOC Occupation (for Individual) PRESIDENT
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 2500.00

Date of Receipt 11 / 03 / 2016
Transaction ID : SA11A.465188
 Amount of Each Receipt this Period 2500.00
 Memo Item CONTRIBUTION

C. EINSTEIN, MARTIN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO BOX 807
 City VINELAND State NJ Zip Code 08362-0807
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) EINSTEIN ASSOCIATES Occupation (for Individual) LIFE/HEALTH INSURANCE SALES
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 10 / 31 / 2016
Transaction ID : SA11A.458658
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 2550.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1018 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. EINSTEIN, MARTIN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO BOX 807

City VINELAND	State NJ	Zip Code 08362-0807
------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) EINSTEIN ASSOCIATES	Occupation (for Individual) LIFE/HEALTH INSURANCE SALES
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
 300.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 31 / 2016
Transaction ID : SA11A.458662

Amount of Each Receipt this Period
 25.00

Memo Item CONTRIBUTION

B. EINSTEIN, MARTIN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO BOX 807

City VINELAND	State NJ	Zip Code 08362-0807
------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) EINSTEIN ASSOCIATES	Occupation (for Individual) LIFE/HEALTH INSURANCE SALES
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
 300.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 02 / 2016
Transaction ID : SA11A.466843

Amount of Each Receipt this Period
 50.00

Memo Item CONTRIBUTION

C. EINSTEIN, MARTIN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO BOX 807

City VINELAND	State NJ	Zip Code 08362-0807
------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) EINSTEIN ASSOCIATES	Occupation (for Individual) LIFE/HEALTH INSURANCE SALES
--	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
 300.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 04 / 2016
Transaction ID : SA11A.471848

Amount of Each Receipt this Period
 50.00

Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	125.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1019 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. EINSTEIN, MARTIN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO BOX 807

City VINELAND	State NJ	Zip Code 08362-0807
------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) EINSTEIN ASSOCIATES	Occupation (for Individual) LIFE/HEALTH INSURANCE SALES
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
300.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 11 / 05 / 2016
Transaction ID : SA11A.478570

Amount of Each Receipt this Period
50.00

Memo Item CONTRIBUTION

B. EISENBERG, LARRY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 308 N MCCADDEN PLACE

City LOS ANGELES	State CA	Zip Code 90004-1024
---------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) SELF EMPLOYED	Occupation (for Individual) PHYSICIAN
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
600.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 11 / 02 / 2016
Transaction ID : SA11A.465100

Amount of Each Receipt this Period
500.00

Memo Item CONTRIBUTION

C. EISERT, EDWARD, , MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 300 E 56TH ST APT 29B

City NEW YORK	State NY	Zip Code 10022-4129
------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) INFORMATION REQUESTED PER BEST EFFORTS	Occupation (for Individual) INFORMATION REQUESTED PER BES
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
500.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 10 / 28 / 2016
Transaction ID : SA11A.454747

Amount of Each Receipt this Period
500.00

Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	1050.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1020 OF 4311
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. EKLUND, LOIS, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 6 VASQUEZ TRAIL
 City CARMEL State CA Zip Code 93923-7731
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 350.00

Date of Receipt 10 / 31 / 2016
Transaction ID : SA11A.464699
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

B. ELDEN, RICHARD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2430 N. LAKEVIEW 11S
 City CHICAGO State IL Zip Code 60614-2877
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 12900.00

Date of Receipt 10 / 25 / 2016
Transaction ID : SA11A.448909
 Amount of Each Receipt this Period 2500.00
 Memo Item CONTRIBUTION

C. ELDER, DOUGLAS, , MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 7333 SCOTLAND WAY 1412
 City SARASOTA State FL Zip Code 34238-8540
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 11 / 02 / 2016
Transaction ID : SA11A.466082
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 2800.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1021 OF 4311
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. ELDER, MARI, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1691 COLINA VISTA
 City FALLBROOK State CA Zip Code 92028-3835
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 205.00

Date of Receipt 10 / 31 / 2016
Transaction ID : SA11A.458483
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

B. ELEIOTT, TERRY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 15711 KNAUFF RANCH CT
 City CYPRESS State TX Zip Code 77429-6129
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) TKE ENGINEERING & DESIGN, INC Occupation (for Individual) PRINCIPAL / ENGINEER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1500.00

Date of Receipt 10 / 21 / 2016
Transaction ID : SA11A.444508
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

C. ELEIOTT, TERRY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 15711 KNAUFF RANCH CT
 City CYPRESS State TX Zip Code 77429-6129
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) TKE ENGINEERING & DESIGN, INC Occupation (for Individual) PRINCIPAL / ENGINEER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1500.00

Date of Receipt 11 / 04 / 2016
Transaction ID : SA11A.472705
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 525.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1022 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. ELGENDY, SAMY, I., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 7610 267TH STREET
 City NEW HYDE PARK State NY Zip Code 11040-1408
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 285.00

Date of Receipt 11 / 08 / 2016
Transaction ID : SA11A.467973
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

B. ELIASSEN, JAMES, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1205 20TH ST SO
 City VIRGINIA State MN Zip Code 55792-3724
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) DENTIST
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 350.00

Date of Receipt 10 / 31 / 2016
Transaction ID : SA11A.459139
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

C. ELIASSEN, JAMES, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1205 20TH ST SO
 City VIRGINIA State MN Zip Code 55792-3724
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) DENTIST
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 350.00

Date of Receipt 11 / 04 / 2016
Transaction ID : SA11A.471242
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	200.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1023 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. ELLESTAD, BOYD, A., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 30508 SANTA LUNA DR.
 City RANCHO PALOS VERDE State CA Zip Code 90275-6318
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 440.00

Date of Receipt 11 / 04 / 2016
Transaction ID : SA11A.473396
 Amount of Each Receipt this Period 60.00
 Memo Item CONTRIBUTION

B. ELLIOTT, DONALD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 101 CASTLE GARDENS DR.
 City CASTLE HILLS State TX Zip Code 78213-1856
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 3150.00

Date of Receipt 10 / 24 / 2016
Transaction ID : SA11A.445701
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

C. ELLIOTT, DONALD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 101 CASTLE GARDENS DR.
 City CASTLE HILLS State TX Zip Code 78213-1856
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 3150.00

Date of Receipt 10 / 24 / 2016
Transaction ID : SA11A.445703
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	260.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1024 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
ELLIOTT, DONALD, , ,

Mailing Address **101 CASTLE GARDENS DR.**

City CASTLE HILLS	State TX	Zip Code 78213-1856
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
--	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
3150.00

Date of Receipt
10 / 31 / 2016

Transaction ID : SA11A.458770

Amount of Each Receipt this Period
100.00

Memo Item
CONTRIBUTION

B. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
ELLIOTT, DONALD, , ,

Mailing Address **101 CASTLE GARDENS DR.**

City CASTLE HILLS	State TX	Zip Code 78213-1856
-----------------------------	--------------------	-------------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
--	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
3150.00

Date of Receipt
10 / 31 / 2016

Transaction ID : SA11A.458826

Amount of Each Receipt this Period
250.00

Memo Item
CONTRIBUTION

C. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
ELLIOTT, DONALD, , ,

Mailing Address **101 CASTLE GARDENS DR.**

City CASTLE HILLS	State TX	Zip Code 78213-1856
-----------------------------	--------------------	-------------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
--	---

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
3150.00

Date of Receipt
10 / 30 / 2016

Transaction ID : SA11A.460262

Amount of Each Receipt this Period
100.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	450.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1025 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. ELLIOTT, DONALD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 101 CASTLE GARDENS DR.
 City CASTLE HILLS State TX Zip Code 78213-1856
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 3150.00

Date of Receipt 10 / 29 / 2016
Transaction ID : SA11A.460480
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

B. ELLIOTT, DONALD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 101 CASTLE GARDENS DR.
 City CASTLE HILLS State TX Zip Code 78213-1856
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 3150.00

Date of Receipt 10 / 29 / 2016
Transaction ID : SA11A.460488
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

C. ELLIOTT, DONALD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 101 CASTLE GARDENS DR.
 City CASTLE HILLS State TX Zip Code 78213-1856
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 3150.00

Date of Receipt 11 / 02 / 2016
Transaction ID : SA11A.470139
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	300.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1026 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
ELLIOTT, DONALD, , ,

Mailing Address 101 CASTLE GARDENS DR.

City CASTLE HILLS	State TX	Zip Code 78213-1856
----------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
3150.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 04 / 2016

Transaction ID : SA11A.471248

Amount of Each Receipt this Period
100.00

Memo Item
CONTRIBUTION

B. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
ELLIOTT, DONALD, , ,

Mailing Address 101 CASTLE GARDENS DR.

City CASTLE HILLS	State TX	Zip Code 78213-1856
----------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
3150.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 04 / 2016

Transaction ID : SA11A.473647

Amount of Each Receipt this Period
100.00

Memo Item
CONTRIBUTION

C. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
ELLIOTT, DONALD, , ,

Mailing Address 101 CASTLE GARDENS DR.

City CASTLE HILLS	State TX	Zip Code 78213-1856
----------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
3150.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 04 / 2016

Transaction ID : SA11A.473909

Amount of Each Receipt this Period
100.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	300.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1027 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. ELLIOTT, DONALD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 101 CASTLE GARDENS DR.
 City CASTLE HILLS State TX Zip Code 78213-1856
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 3150.00

Date of Receipt **11 / 06 / 2016**
Transaction ID : SA11A.478189
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

B. ELLIOTT, RAYMOND, A., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 265 MOUNTAIN VIEW AVENUE
 City DANVILLE State VA Zip Code 24541-3501
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 750.00

Date of Receipt **10 / 31 / 2016**
Transaction ID : SA11A.457310
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

C. ELLIOTT, RAYMOND, A., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 265 MOUNTAIN VIEW AVENUE
 City DANVILLE State VA Zip Code 24541-3501
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 750.00

Date of Receipt **11 / 07 / 2016**
Transaction ID : SA11A.467767
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	250.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1028 OF 4311
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. ELLIOTT, RAYMOND, A., MR.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 265 MOUNTAIN VIEW AVENUE

City DANVILLE	State VA	Zip Code 24541-3501
------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
750.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	10	/	2016

Transaction ID : SA11A.468227

Amount of Each Receipt this Period
100.00

Memo Item CONTRIBUTION

B. ELLIOTT, ROBERT, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 2123 ST. IVES COURT

City CLERMONT	State FL	Zip Code 34711-6980
------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
300.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	23	/	2016

Transaction ID : SA11A.446549

Amount of Each Receipt this Period
100.00

Memo Item CONTRIBUTION

C. ELLIOTT, ROBERT, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 2123 ST. IVES COURT

City CLERMONT	State FL	Zip Code 34711-6980
------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
300.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	04	/	2016

Transaction ID : SA11A.472032

Amount of Each Receipt this Period
100.00

Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	300.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1029 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. ELLISS, CECELIA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1486 PRAIRIE HIGH RD
 City CASTLE ROCK State CO Zip Code 80109-8008
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 775.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 29 / 2016
Transaction ID : SA11A.461244
 Amount of Each Receipt this Period
 50.00
 Memo Item
 CONTRIBUTION

B. ELLISS, CECELIA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1486 PRAIRIE HIGH RD
 City CASTLE ROCK State CO Zip Code 80109-8008
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 775.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 29 / 2016
Transaction ID : SA11A.461246
 Amount of Each Receipt this Period
 50.00
 Memo Item
 CONTRIBUTION

C. ELLIS, JEFFREY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1053 GLENHAVEN DR
 City PACIFIC PALISADES State CA Zip Code 90272-2204
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) PRUDENTIAL LIGHTING Occupation (for Individual) MANUFACTURING
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 26 / 2016
Transaction ID : SA11A.449756
 Amount of Each Receipt this Period
 500.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	600.00
TOTAL This Period (last page this line number only).....▶	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1030 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
Team Ryan

A. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
ELLIS, LYLE, , ,

Mailing Address 3344 SW WILLAMETTE AVE

City CORVALLIS	State OR	Zip Code 97333-1507
-------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
350.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 24 / 2016

Transaction ID : SA11A.449167

Amount of Each Receipt this Period
50.00

Memo Item
CONTRIBUTION

B. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
ELLIS, LYLE, , ,

Mailing Address 3344 SW WILLAMETTE AVE

City CORVALLIS	State OR	Zip Code 97333-1507
-------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
350.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 24 / 2016

Transaction ID : SA11A.449171

Amount of Each Receipt this Period
50.00

Memo Item
CONTRIBUTION

C. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
ELLIS, LYLE, , ,

Mailing Address 3344 SW WILLAMETTE AVE

City CORVALLIS	State OR	Zip Code 97333-1507
-------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
350.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 31 / 2016

Transaction ID : SA11A.464165

Amount of Each Receipt this Period
50.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	150.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1031 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
-----------------------------	-----------------------------	-----------------------------

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NAME OF COMMITTEE (In Full)
Team Ryan

A. ELLIS, RAYMOND, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1403 COLA DRIVE
 City MCLEAN State VA Zip Code 22101-3103
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RAYMOND HENRY ELLIS Occupation (for Individual) RAYMOND ELLIS CONSULTING
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 800.00

Date of Receipt 11 / 05 / 2016
Transaction ID : SA11A.478753
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

B. ELLIS, RAYMOND, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1403 COLA DRIVE
 City MCLEAN State VA Zip Code 22101-3103
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RAYMOND HENRY ELLIS Occupation (for Individual) RAYMOND ELLIS CONSULTING
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 800.00

Date of Receipt 11 / 05 / 2016
Transaction ID : SA11A.478764
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

C. ELLIS, ROBERT, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 33520 SILVER OAK DR.
 City AVON State OH Zip Code 44011-3747
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) LA ROCA GROUP LLC Occupation (for Individual) PRESIDENT
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 1250.00

Date of Receipt 10 / 24 / 2016
Transaction ID : SA11A.445705
 Amount of Each Receipt this Period 500.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	700.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1032 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. ELLWOOD, PATRICIA, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 5334 ELLWOOD RD

City BRUSLY	State LA	Zip Code 70719-2348
----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
260.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		25		2016

Transaction ID : SA11A.451428

Amount of Each Receipt this Period
30.00

Memo Item
CONTRIBUTION

B. ELLWOOD, PATRICIA, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 5334 ELLWOOD RD

City BRUSLY	State LA	Zip Code 70719-2348
----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
260.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		31		2016

Transaction ID : SA11A.457864

Amount of Each Receipt this Period
25.00

Memo Item
CONTRIBUTION

C. ELLWOOD, PATRICIA, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 5334 ELLWOOD RD

City BRUSLY	State LA	Zip Code 70719-2348
----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
260.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11		07		2016

Transaction ID : SA11A.476618

Amount of Each Receipt this Period
25.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	80.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1033 OF 4311
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. ELMER, IVAN, C., MR.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 6251 OLD DOMINION DRIVE
APT 304

City MCLEAN State VA Zip Code 22101-4807

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1144.00

Date of Receipt
11 / 01 / 2016
Transaction ID : SA11A.462861

Amount of Each Receipt this Period
50.00

Memo Item CONTRIBUTION

B. ELMER, IVAN, C., MR.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 6251 OLD DOMINION DRIVE
APT 304

City MCLEAN State VA Zip Code 22101-4807

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1144.00

Date of Receipt
11 / 03 / 2016
Transaction ID : SA11A.468771

Amount of Each Receipt this Period
100.00

Memo Item CONTRIBUTION

C. ELMER, IVAN, C., MR.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 6251 OLD DOMINION DRIVE
APT 304

City MCLEAN State VA Zip Code 22101-4807

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
1144.00

Date of Receipt
11 / 02 / 2016
Transaction ID : SA11A.469950

Amount of Each Receipt this Period
50.00

Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 200.00

TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1034 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. ELMORE, MARSHA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1005 FM 1340
 City HUNT State TX Zip Code 78024-3027
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) O/D OF WALDEMAR
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 10 / 20 / 2016
Transaction ID : SA11A.444755
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

B. ELMORE, MARSHA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1005 FM 1340
 City HUNT State TX Zip Code 78024-3027
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) O/D OF WALDEMAR
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 11 / 04 / 2016
Transaction ID : SA11A.472970
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

C. ELMS, ANITA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1700 DOTSY AVENUE
 City ODESSA State TX Zip Code 79763-2815
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) INFORMATION REQUESTED PER BEST EFFORTS Occupation (for Individual) INFORMATION REQUESTED PER BEST EFFORTS
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 11 / 03 / 2016
Transaction ID : SA11A.465599
 Amount of Each Receipt this Period 500.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	700.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1035 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. ELWOOD, DAVID, L., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3422 GROVE PLACE
 City COLUMBUS State IN Zip Code 47203-1601
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) ELWOOD STAFFING Occupation (for Individual) CHAIRMAN
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 2000.00

Date of Receipt 11 / 03 / 2016
Transaction ID : SA11A.465491
 Amount of Each Receipt this Period 500.00
 Memo Item CONTRIBUTION

B. ELY, MASON, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3963 ROAD B
 City SUPERIOR State NE Zip Code 68978-7113
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 10 / 27 / 2016
Transaction ID : SA11A.453539
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

C. EMERSON, THOMAS, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 38247 FRENCH POND
 City FARMINGTON HILLS State MI Zip Code 48331-2960
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) YFAI GLOBAL AUTO Occupation (for Individual) SENIOR MANAGER
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 10 / 26 / 2016
Transaction ID : SA11A.447685
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	1000.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1036 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. EMERSON, THOMAS, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 980 WESTERSHAM PLACE
 City MARIETTA State GA Zip Code 30064-2984
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) WELLSTAR MEDICAL GROUP Occupation (for Individual) PHYSICIAN
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt **11 / 01 / 2016**
Transaction ID : SA11A.467393
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

B. EMERY, JAMES, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2320 NORTH 52ND STREET #217
 City PHOENIX State AZ Zip Code 85008-2654
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 305.00

Date of Receipt **10 / 26 / 2016**
Transaction ID : SA11A.451302
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

C. EMERY, JAMES, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2320 NORTH 52ND STREET #217
 City PHOENIX State AZ Zip Code 85008-2654
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 305.00

Date of Receipt **11 / 01 / 2016**
Transaction ID : SA11A.462994
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	300.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1037 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. EMERY, JAMES, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2320 NORTH 52ND STREET #217
 City PHOENIX State AZ Zip Code 85008-2654
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 305.00

Date of Receipt 10 / 30 / 2016
Transaction ID : SA11A.464864
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

B. EMILIO, RITA, R., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5 PHINN AVENUE
 City BINGHAMTON State NY Zip Code 13903-2031
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 450.00

Date of Receipt 11 / 04 / 2016
Transaction ID : SA11A.467611
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

C. EMMICK, THOMAS, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 10220 NORTH 128TH STREET
 City SCOTTSDALE State AZ Zip Code 85259-5308
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 11 / 02 / 2016
Transaction ID : SA11A.465914
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 325.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1038 OF 4311
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. ENDERLE, MARK, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 508 W, BRANNON RD

City NICHOLASVILLE	State KY	Zip Code 40356-8075
-----------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) ENDERLE BESTEN DIERUF	Occupation (for Individual) ACCOUNTANT
--	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
350.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		26		2016

Transaction ID : SA11A.451091

Amount of Each Receipt this Period
50.00

Memo Item CONTRIBUTION

B. ENDERLE, MARK, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 508 W, BRANNON RD

City NICHOLASVILLE	State KY	Zip Code 40356-8075
-----------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) ENDERLE BESTEN DIERUF	Occupation (for Individual) ACCOUNTANT
--	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
350.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11		04		2016

Transaction ID : SA11A.472664

Amount of Each Receipt this Period
50.00

Memo Item CONTRIBUTION

C. ENDWEILER, GLENNA, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 2533 PRESTONWOOD DRIVE

City PLANO	State TX	Zip Code 75093-8891
---------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11		06		2016

Transaction ID : SA11A.477596

Amount of Each Receipt this Period
50.00

Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	150.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1039 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. ENDWEILER, GLENNA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2533 PRESTONWOOD DRIVE
 City PLANO State TX Zip Code 75093-8891
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 06 / 2016
Transaction ID : SA11A.477597
 Amount of Each Receipt this Period
 50.00
 Memo Item
 CONTRIBUTION

B. ENGBERG, ROBERT, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 18740 MONTE ESCONDIDO DR.
 City BUENA VISTA State CO Zip Code 81211-9138
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 203.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 04 / 2016
Transaction ID : SA11A.472898
 Amount of Each Receipt this Period
 25.00
 Memo Item
 CONTRIBUTION

C. ENGELS, ELFRIEDE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 64 LAUREL AVE.
 4
 City TRYON State NC Zip Code 28782-2778
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 256.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 04 / 2016
Transaction ID : SA11A.472758
 Amount of Each Receipt this Period
 30.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	105.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1040 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. ENGEL, GORDON, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 645 HARMONY CIRCLE

City WAYZATA	State MN	Zip Code 55391-1105
-----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) FOURSOME INC	Occupation (for Individual) OWNER
---	--------------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 29 / 2016
Transaction ID : SA11A.460930

Amount of Each Receipt this Period
100.00

Memo Item
CONTRIBUTION

B. ENGELBERT, ROGER, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 257 27TH ST.

City HERMOSA BEACH	State CA	Zip Code 90254-2438
-----------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 04 / 2016
Transaction ID : SA11A.473869

Amount of Each Receipt this Period
100.00

Memo Item
CONTRIBUTION

C. ENGLISH, KRYSZYNA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 759 GREEN ST.,

City BOONTON	State NJ	Zip Code 07005-1609
-----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
750.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 21 / 2016
Transaction ID : SA11A.447165

Amount of Each Receipt this Period
50.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	250.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1041 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. ENGLISH, KRYSZYNA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 759 GREEN ST.,
 City BOONTON State NJ Zip Code 07005-1609
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 750.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 10 / 21 / 2016
Transaction ID : SA11A.447167
 Amount of Each Receipt this Period
 50.00
 Memo Item
 CONTRIBUTION

B. ENGLISH, KRYSZYNA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 759 GREEN ST.,
 City BOONTON State NJ Zip Code 07005-1609
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 750.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 11 / 01 / 2016
Transaction ID : SA11A.462179
 Amount of Each Receipt this Period
 25.00
 Memo Item
 CONTRIBUTION

C. ENGLISH, KRYSZYNA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 759 GREEN ST.,
 City BOONTON State NJ Zip Code 07005-1609
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 750.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 11 / 01 / 2016
Transaction ID : SA11A.462180
 Amount of Each Receipt this Period
 25.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	100.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1042 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. ENGLISH, KRYSTYNA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 759 GREEN ST.,
 City BOONTON State NJ Zip Code 07005-1609
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 750.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 04 / 2016
Transaction ID : SA11A.471793
 Amount of Each Receipt this Period
 50.00
 Memo Item
 CONTRIBUTION

B. ENRILE, FERNANDO, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 14939 PORTOFINO CIRCLE
 City SAN LEANDRO State CA Zip Code 94578-1872
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SALESFORCE Occupation (for Individual) COMPLIANCE
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 205.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 04 / 2016
Transaction ID : SA11A.473809
 Amount of Each Receipt this Period
 25.00
 Memo Item
 CONTRIBUTION

C. ENSLEY, CAROLYN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 515 N. KENWOOD STREET
 APARTMENT 312
 City GLENDALE State CA Zip Code 91206-3247
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 225.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 21 / 2016
Transaction ID : SA11A.444590
 Amount of Each Receipt this Period
 25.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	100.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1043 OF 4311
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. ENSLEY, CAROLYN, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 515 N. KENWOOD STREET
APARTMENT 312

City GLENDALE State CA Zip Code 91206-3247

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
225.00

Date of Receipt
11 / 04 / 2016
Transaction ID : SA11A.472359

Amount of Each Receipt this Period
25.00

Memo Item CONTRIBUTION

B. EPSTEIN, CLIFFORD, L., MR.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 18823 AVENUE BIARRITZ

City LUTZ State FL Zip Code 33558-5309

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) RPE SOLUTIONS Occupation (for Individual) CEO

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
700.00

Date of Receipt
10 / 21 / 2016
Transaction ID : SA11A.444288

Amount of Each Receipt this Period
50.00

Memo Item CONTRIBUTION

C. EPSTEIN, CLIFFORD, L., MR.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 18823 AVENUE BIARRITZ

City LUTZ State FL Zip Code 33558-5309

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) RPE SOLUTIONS Occupation (for Individual) CEO

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
700.00

Date of Receipt
10 / 21 / 2016
Transaction ID : SA11A.444295

Amount of Each Receipt this Period
50.00

Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶ 125.00

TOTAL This Period (last page this line number only).....▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1044 OF 4311
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. EPSTEIN, CLIFFORD, L., MR.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 18823 AVENUE BIARRITZ

City LUTZ	State FL	Zip Code 33558-5309
--------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) RPE SOLUTIONS	Occupation (for Individual) CEO
--	------------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
700.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		25		2016

Transaction ID : SA11A.452018

Amount of Each Receipt this Period
50.00

Memo Item
CONTRIBUTION

B. EPSTEIN, CLIFFORD, L., MR.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 18823 AVENUE BIARRITZ

City LUTZ	State FL	Zip Code 33558-5309
--------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) RPE SOLUTIONS	Occupation (for Individual) CEO
--	------------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
700.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		25		2016

Transaction ID : SA11A.452019

Amount of Each Receipt this Period
50.00

Memo Item
CONTRIBUTION

C. EPSTEIN, CLIFFORD, L., MR.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 18823 AVENUE BIARRITZ

City LUTZ	State FL	Zip Code 33558-5309
--------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) RPE SOLUTIONS	Occupation (for Individual) CEO
--	------------------------------------

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
700.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11		08		2016

Transaction ID : SA11A.479770

Amount of Each Receipt this Period
25.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	125.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1045 OF 4311		
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14	<input type="checkbox"/> 11c <input type="checkbox"/> 15	<input type="checkbox"/> 12 <input type="checkbox"/> 16

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NAME OF COMMITTEE (In Full)
Team Ryan

A. EPSTEIN, SHERIAN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 245 DREAMCATCHER TRAIL
 City YOUNGSVILLE State NC Zip Code 27596-9281
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 10 / 25 / 2016
Transaction ID : SA11A.448817
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

B. EPSTEIN, SHERIAN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 245 DREAMCATCHER TRAIL
 City YOUNGSVILLE State NC Zip Code 27596-9281
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 10 / 25 / 2016
Transaction ID : SA11A.448820
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

C. ERD, MARYLN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 674 RANDY LN
 City WINTER PARK State FL Zip Code 32789-6139
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) WESTMINSTER WINTER PARK Occupation (for Individual) REGISTERED NURSE
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 350.00

Date of Receipt 11 / 01 / 2016
Transaction ID : SA11A.462884
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶ 125.00
TOTAL This Period (last page this line number only).....▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1046 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. ERDLER, CAROLYN, M., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3810 CAMELS VIEW
 City COLORADO SPRINGS State CO Zip Code 80904-1070
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 11 / 08 / 2016
Transaction ID : SA11A.468054
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

B. ERDMANN, GLORIA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 700 SUNSET DRIVE
 City CORAL GABLES State FL Zip Code 33143-6239
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 10 / 24 / 2016
Transaction ID : SA11A.446072
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

C. ERDMANN, GLORIA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 700 SUNSET DRIVE
 City CORAL GABLES State FL Zip Code 33143-6239
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 10 / 24 / 2016
Transaction ID : SA11A.446076
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	300.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1047 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
Team Ryan

A. ERDOES, ERVIN, G., DR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3740 N LAKE SHORE DRIVE
 APT 15A
 City CHICAGO State IL Zip Code 60613-4216
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) U OF IL Occupation (for Individual) PROFESSOR
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt 10 / 24 / 2016
Transaction ID : SA11A.444013
 Amount of Each Receipt this Period 200.00
 Memo Item CONTRIBUTION

B. ERICKSON, HUBBARD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4929 FOREST
 UNIT 4B
 City DOWNERS GROVE State IL Zip Code 60515-2888
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 750.00

Date of Receipt 10 / 28 / 2016
Transaction ID : SA11A.455524
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

C. ERICKSON, HUBBARD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4929 FOREST
 UNIT 4B
 City DOWNERS GROVE State IL Zip Code 60515-2888
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 750.00

Date of Receipt 10 / 31 / 2016
Transaction ID : SA11A.464095
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	400.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1048 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
Team Ryan

A. ERICKSON, JAMES, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 18112 CLEARWATER CIRCLE
 City HUNTINGTON BEACH State CA Zip Code 92648-1126
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 10 / 25 / 2016
Transaction ID : SA11A.447311
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

B. ERION, JUSTIN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO BOX 7509
 City LOVELAND State CO Zip Code 80537-0509
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) ARMADA HOLDINGS LLC Occupation (for Individual) REAL ESTATE
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1250.00

Date of Receipt 10 / 20 / 2016
Transaction ID : SA11A.442405
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

C. ERION, JUSTIN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO BOX 7509
 City LOVELAND State CO Zip Code 80537-0509
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) ARMADA HOLDINGS LLC Occupation (for Individual) REAL ESTATE
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 1250.00

Date of Receipt 11 / 04 / 2016
Transaction ID : SA11A.473120
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	750.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1049 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
Team Ryan

A. ERMER, DAVID, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 7827 ABERDEEN RD
 City BETHESDA State MD Zip Code 20814-1101
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) ERMER LAW GROUP PLLC Occupation (for Individual) ATTORNEY
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1662.00

Date of Receipt **10 / 24 / 2016**
Transaction ID : SA11A.445933
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

B. ERNST, RICHARD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2721 PARKERS LANDING RD.
 City MT. PLEASANT State SC Zip Code 29466-6739
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt **11 / 01 / 2016**
Transaction ID : SA11A.462741
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

C. ERVIN, PATRICIA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 599 AVON BEND ROAD
 City CHARLES TOWN State WV Zip Code 25414-4725
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 325.00

Date of Receipt **10 / 21 / 2016**
Transaction ID : SA11A.444156
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	350.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1050 OF 4311
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. ERWIN, JOHN, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 313 SOUTH 13TH

City WACO	State TX	Zip Code 76701-1818
--------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) SELF EMPLOYED	Occupation (for Individual) SELF
--	-------------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
3000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		23		2016

Transaction ID : SA11A.446552

Amount of Each Receipt this Period
1000.00

Memo Item
CONTRIBUTION

B. ERWIN, JOHN, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 313 SOUTH 13TH

City WACO	State TX	Zip Code 76701-1818
--------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) SELF EMPLOYED	Occupation (for Individual) SELF
--	-------------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
3000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11		04		2016

Transaction ID : SA11A.470968

Amount of Each Receipt this Period
1000.00

Memo Item
CONTRIBUTION

C. ESBECK, RAMONA, L., ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1801 20TH STREET UNIT B13

City AMES	State IA	Zip Code 50010-5157
--------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
450.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11		02		2016

Transaction ID : SA11A.465025

Amount of Each Receipt this Period
100.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	2100.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1051 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. ESHELMAN, JAYNE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 8446 EAST HINSDALE DR
 City CENTENNIAL State CO Zip Code 80112-1910
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) LESLIE R CAPIN MD PC Occupation (for Individual) PRACTICE ADMINISTRATOR
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 11 / 06 / 2016
Transaction ID : SA11A.477192
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

B. ESHELMAN, JAYNE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 8446 EAST HINSDALE DR
 City CENTENNIAL State CO Zip Code 80112-1910
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) LESLIE R CAPIN MD PC Occupation (for Individual) PRACTICE ADMINISTRATOR
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 11 / 06 / 2016
Transaction ID : SA11A.477199
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

C. ESKILDSEN, CHARLOTTE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 550 BAARSON BLVD
 City HELENA State MT Zip Code 59601-5460
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 700.00

Date of Receipt 10 / 29 / 2016
Transaction ID : SA11A.461090
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	300.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1052 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. ESKILDSEN, CHARLOTTE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 550 BAARSON BLVD
 City HELENA State MT Zip Code 59601-5460
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 700.00

Date of Receipt **11 / 04 / 2016**
Transaction ID : SA11A.472459
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

B. ESLER, EILEEN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 317 CRYSTAL LAKE RD
 City ENFIELD State NH Zip Code 03748-3743
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt **10 / 22 / 2016**
Transaction ID : SA11A.446964
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

C. ESLER, EILEEN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 317 CRYSTAL LAKE RD
 City ENFIELD State NH Zip Code 03748-3743
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt **11 / 04 / 2016**
Transaction ID : SA11A.472478
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶ 300.00
TOTAL This Period (last page this line number only).....▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1053 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. ESTABROOKS, ROBERT, S., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2004 AUDUBON AVE,
 MC429
 City NAPERVILLE State IL Zip Code 60563-4194
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 700.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 28 / 2016
Transaction ID : SA11A.455152
 Amount of Each Receipt this Period
 25.00
 Memo Item
 CONTRIBUTION

B. ESTABROOKS, ROBERT, S., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2004 AUDUBON AVE,
 MC429
 City NAPERVILLE State IL Zip Code 60563-4194
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 700.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 28 / 2016
Transaction ID : SA11A.455880
 Amount of Each Receipt this Period
 25.00
 Memo Item
 CONTRIBUTION

C. ESTABROOKS, ROBERT, S., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2004 AUDUBON AVE,
 MC429
 City NAPERVILLE State IL Zip Code 60563-4194
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 700.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 31 / 2016
Transaction ID : SA11A.457674
 Amount of Each Receipt this Period
 25.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 75.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1054 OF 4311
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. ESTABROOKS, ROBERT, S., MR.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 2004 AUDUBON AVE,
MC429

City NAPERVILLE State IL Zip Code 60563-4194

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 700.00

Date of Receipt 10 / 31 / 2016
Transaction ID : SA11A.457683

Amount of Each Receipt this Period 25.00

Memo Item CONTRIBUTION

B. ESTABROOKS, ROBERT, S., MR.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 2004 AUDUBON AVE,
MC429

City NAPERVILLE State IL Zip Code 60563-4194

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 700.00

Date of Receipt 10 / 31 / 2016
Transaction ID : SA11A.457686

Amount of Each Receipt this Period 25.00

Memo Item CONTRIBUTION

C. ESTABROOKS, ROBERT, S., MR.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 2004 AUDUBON AVE,
MC429

City NAPERVILLE State IL Zip Code 60563-4194

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 700.00

Date of Receipt 11 / 04 / 2016
Transaction ID : SA11A.471521

Amount of Each Receipt this Period 25.00

Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 75.00

TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1055 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. ESTABROOKS, ROBERT, S., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2004 AUDUBON AVE,
 MC429
 City NAPERVILLE State IL Zip Code 60563-4194
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 700.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 05 / 2016
Transaction ID : SA11A.478572
 Amount of Each Receipt this Period
 25.00
 Memo Item CONTRIBUTION

B. ESTABROOKS, ROBERT, S., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2004 AUDUBON AVE,
 MC429
 City NAPERVILLE State IL Zip Code 60563-4194
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 700.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 05 / 2016
Transaction ID : SA11A.478573
 Amount of Each Receipt this Period
 25.00
 Memo Item CONTRIBUTION

C. ESTABROOKS, ROBERT, S., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2004 AUDUBON AVE,
 MC429
 City NAPERVILLE State IL Zip Code 60563-4194
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 700.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 05 / 2016
Transaction ID : SA11A.479218
 Amount of Each Receipt this Period
 25.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 75.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1056 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
Team Ryan

A. ESTABROOKS, ROBERT, S., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2004 AUDUBON AVE,
 MC429
 City NAPERVILLE State IL Zip Code 60563-4194
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 700.00

Date of Receipt 11 / 04 / 2016
Transaction ID : SA11A.479581
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

B. ESTABROOKS, ROBERT, S., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2004 AUDUBON AVE,
 MC429
 City NAPERVILLE State IL Zip Code 60563-4194
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 700.00

Date of Receipt 11 / 07 / 2016
Transaction ID : SA11A.480202
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

C. ESTABROOKS, ROBERT, S., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2004 AUDUBON AVE,
 MC429
 City NAPERVILLE State IL Zip Code 60563-4194
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 700.00

Date of Receipt 11 / 07 / 2016
Transaction ID : SA11A.480211
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	75.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1057 OF 4311
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
A. ESTABROOKS, ROBERT, S., MR.,

Mailing Address 2004 AUDUBON AVE,
MC429

City NAPERVILLE State IL Zip Code 60563-4194

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
700.00

Date of Receipt
11 / 07 / 2016
Transaction ID : SA11A.480212

Amount of Each Receipt this Period
25.00

Memo Item CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
B. ESTEIN, JANA, , ,

Mailing Address 5192 ISLEWORTH COUNTRY CLUB DR

City WINDERMERE State FL Zip Code 34786-8954

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE Occupation (for Individual) HOMEMAKER

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
25000.00

Date of Receipt
10 / 24 / 2016
Transaction ID : SA11A.443499

Amount of Each Receipt this Period
25000.00

Memo Item CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
C. ESTEIN, LOTHAR, , ,

Mailing Address 5192 ISLEWORTH COUNTRY CLUB DR

City WINDERMERE State FL Zip Code 34786-8954

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) REAL ESTATE INVESTOR

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
25000.00

Date of Receipt
10 / 24 / 2016
Transaction ID : SA11A.443498

Amount of Each Receipt this Period
25000.00

Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 50025.00

TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1058 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
-----------------------------	-----------------------------	-----------------------------

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NAME OF COMMITTEE (In Full)
Team Ryan

A. ESTEP, PAMELA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 605 TALL GRASS DRIVE
 City PLEASANT HILL State MO Zip Code 64080-1944
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) TECHNICAL PROGAM MANAGER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 10 / 30 / 2016
Transaction ID : SA11A.460216
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

B. ESTEP, PAMELA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 605 TALL GRASS DRIVE
 City PLEASANT HILL State MO Zip Code 64080-1944
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) TECHNICAL PROGAM MANAGER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 11 / 04 / 2016
Transaction ID : SA11A.471109
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

C. ESTES, WILLIAM, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 48210 BIRDSONG CT.
 City SOLDOTNA State AK Zip Code 99669-9410
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 10 / 25 / 2016
Transaction ID : SA11A.448217
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	250.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1059 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. ESTES, WILLIAM, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 48210 BIRDSONG CT.
 City SOLDOTNA State AK Zip Code 99669-9410
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 25 / 2016
Transaction ID : SA11A.448232
 Amount of Each Receipt this Period
 50.00
 Memo Item
 CONTRIBUTION

B. ESTES, WILLIAM, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 48210 BIRDSONG CT.
 City SOLDOTNA State AK Zip Code 99669-9410
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 04 / 2016
Transaction ID : SA11A.471816
 Amount of Each Receipt this Period
 50.00
 Memo Item
 CONTRIBUTION

C. ESTES, WILLIAM, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 48210 BIRDSONG CT.
 City SOLDOTNA State AK Zip Code 99669-9410
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 07 / 2016
Transaction ID : SA11A.474978
 Amount of Each Receipt this Period
 50.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶ 150.00
TOTAL This Period (last page this line number only).....▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1060 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. ETHRIDE, KATE, W., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 8282 COUNTY ROAD 84
 City HEFLIN State AL Zip Code 36264-5708
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 279.00

Date of Receipt 11 / 04 / 2016
Transaction ID : SA11A.467623
 Amount of Each Receipt this Period 53.00
 Memo Item CONTRIBUTION

B. ETHRIDE, KATE, W., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 8282 COUNTY ROAD 84
 City HEFLIN State AL Zip Code 36264-5708
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 279.00

Date of Receipt 11 / 08 / 2016
Transaction ID : SA11A.468030
 Amount of Each Receipt this Period 53.00
 Memo Item CONTRIBUTION

C. EUBANKS, JOHN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1479 DEER HOLLOW DR.
 City CORONA State CA Zip Code 92882-6069
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) WMC Occupation (for Individual) RETAIL
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt 11 / 04 / 2016
Transaction ID : SA11A.472865
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	206.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1061 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. EVANS , ART , , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1698 HIBISCUS BLVD
 City MELBOURNE State FL Zip Code 32901-2639
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) FMDC Occupation (for Individual) DEVELOPMENT
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 23 / 2016
Transaction ID : SA11A.446539
 Amount of Each Receipt this Period
 100.00
 Memo Item CONTRIBUTION

B. EVANS , ART , , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1698 HIBISCUS BLVD
 City MELBOURNE State FL Zip Code 32901-2639
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) FMDC Occupation (for Individual) DEVELOPMENT
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 28 / 2016
Transaction ID : SA11A.455422
 Amount of Each Receipt this Period
 100.00
 Memo Item CONTRIBUTION

C. EVANS , ART , , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1698 HIBISCUS BLVD
 City MELBOURNE State FL Zip Code 32901-2639
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) FMDC Occupation (for Individual) DEVELOPMENT
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 28 / 2016
Transaction ID : SA11A.455423
 Amount of Each Receipt this Period
 100.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	300.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1062 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. EVANS, ART, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1698 HIBISCUS BLVD
 City MELBOURNE State FL Zip Code 32901-2639
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) FMDC Occupation (for Individual) DEVELOPMENT
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 04 / 2016
Transaction ID : SA11A.471539
 Amount of Each Receipt this Period
 100.00
 Memo Item CONTRIBUTION

B. EVANS, BRIAN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 781 S 1100 E
 City PLEASANT GROVE State UT Zip Code 84062-3170
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 240.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 27 / 2016
Transaction ID : SA11A.453872
 Amount of Each Receipt this Period
 10.00
 Memo Item CONTRIBUTION

C. EVANS, BRIAN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 781 S 1100 E
 City PLEASANT GROVE State UT Zip Code 84062-3170
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 240.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 04 / 2016
Transaction ID : SA11A.472739
 Amount of Each Receipt this Period
 10.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	120.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1063 OF 4311
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. EVANS, CHARLES, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 214 FLINTLOCK ROAD
 City CHARLESTON State WV Zip Code 25314-2480
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) CONSULTANT
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 650.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 25 / 2016
Transaction ID : SA11A.448880
 Amount of Each Receipt this Period
 50.00
 Memo Item
CONTRIBUTION

B. EVANS, CHARLES, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 214 FLINTLOCK ROAD
 City CHARLESTON State WV Zip Code 25314-2480
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) CONSULTANT
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 650.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 04 / 2016
Transaction ID : SA11A.471015
 Amount of Each Receipt this Period
 50.00
 Memo Item
CONTRIBUTION

C. EVENSON, REID, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 12575 PLYMOUTH AVE.
 252
 City BURNSVILLE State MN Zip Code 55337-
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) TRADITION CAPITAL BANK Occupation (for Individual) BANKER
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 350.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 25 / 2016
Transaction ID : SA11A.452020
 Amount of Each Receipt this Period
 250.00
 Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	350.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1064 OF 4311
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. EVERETT, ANNABELLE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 17 ARMBRUSTER COURT
 City FROSTPROOF State FL Zip Code 33843-9556
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1010.00

Date of Receipt **10 / 25 / 2016**
Transaction ID : SA11A.447382
 Amount of Each Receipt this Period 200.00
 Memo Item CONTRIBUTION

B. EVERETT, ROBERT, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 84 TIDE RUN
 City MASHPEE State MA Zip Code 02649-4015
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt **10 / 24 / 2016**
Transaction ID : SA11A.445773
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

C. EVERHART, KAREN, , MS.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 18008 SHEPHERD VALLEY ROAD
 City WILDWOOD State MO Zip Code 63038-1506
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 425.00

Date of Receipt **10 / 24 / 2016**
Transaction ID : SA11A.443790
 Amount of Each Receipt this Period 200.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 500.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1065 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. EVERIST, BARBARA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 709 TOMAR RD.
 City SIOUX FALLS State SD Zip Code 57105-7053
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt **10 / 22 / 2016**
Transaction ID : SA11A.446855
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

B. EVERIST, BARBARA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 709 TOMAR RD.
 City SIOUX FALLS State SD Zip Code 57105-7053
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt **11 / 04 / 2016**
Transaction ID : SA11A.471812
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

C. EWERT, MICHAEL, E., DR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO BOX 3906
 City CRESTLINE State CA Zip Code 92325-3906
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) DENTIST
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt **11 / 07 / 2016**
Transaction ID : SA11A.467686
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	350.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1066 OF 4311
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
Team Ryan

A. EWING, JACQUELIN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3318 PTARMIGAN DR.
 2A
 City WALNUT CREEK State CA Zip Code 94595-3172
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 10 / 26 / 2016
Transaction ID : SA11A.450586
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

B. EWING, JACQUELIN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3318 PTARMIGAN DR.
 2A
 City WALNUT CREEK State CA Zip Code 94595-3172
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 10 / 26 / 2016
Transaction ID : SA11A.450588
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

C. EWING, RONALD, L., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 136 BRONK STREET
 City MONTE VISTA State CO Zip Code 81144-1136
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 10 / 25 / 2016
Transaction ID : SA11A.447317
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	300.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1067 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. EWING, SUSAN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2062 COUNTY ROAD 413
 City UVALDE State TX Zip Code 78801-6568
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 375.00

Date of Receipt 10 / 28 / 2016
Transaction ID : SA11A.455499
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

B. EWING, SUSAN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2062 COUNTY ROAD 413
 City UVALDE State TX Zip Code 78801-6568
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 375.00

Date of Receipt 10 / 28 / 2016
Transaction ID : SA11A.455502
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

C. EWING, SUSAN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2062 COUNTY ROAD 413
 City UVALDE State TX Zip Code 78801-6568
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 375.00

Date of Receipt 10 / 27 / 2016
Transaction ID : SA11A.456734
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	100.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1068 OF 4311
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. EWING, SUSAN, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 2062 COUNTY ROAD 413

City UVALDE	State TX	Zip Code 78801-6568
----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
375.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	31	/	2016

Transaction ID : SA11A.463513

Amount of Each Receipt this Period
25.00

Memo Item CONTRIBUTION

B. EWING, SUSAN, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 2062 COUNTY ROAD 413

City UVALDE	State TX	Zip Code 78801-6568
----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
375.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	07	/	2016

Transaction ID : SA11A.475176

Amount of Each Receipt this Period
200.00

Memo Item CONTRIBUTION

C. EWING, THOMAS, A., MR.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 4628 S QUIET WAY

City GILBERT	State AZ	Zip Code 85297-0895
-----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
625.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	25	/	2016

Transaction ID : SA11A.447561

Amount of Each Receipt this Period
200.00

Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	425.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1069 OF 4311
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. EWLES, DAVID, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1789 PORT STANHOPE

City NEWPORT BEACH	State CA	Zip Code 92660-7103
-----------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) EWLES MATERIALS	Occupation (for Individual) ONWER
--	--------------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
750.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	22	/	2016

Transaction ID : SA11A.446722

Amount of Each Receipt this Period
500.00

Memo Item
CONTRIBUTION

B. EXLEY, CHARLES, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 816 BARRINGTON RD.

City GROSSE POINTE PARK	State MI	Zip Code 48230-1727
----------------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	03	/	2016

Transaction ID : SA11A.468538

Amount of Each Receipt this Period
1000.00

Memo Item
CONTRIBUTION

C. EYESTONE, MAYNARD, M., MR.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 2803 E WINGER RD

City MEAD	State WA	Zip Code 99021-9618
--------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
855.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	25	/	2016

Transaction ID : SA11A.448870

Amount of Each Receipt this Period
25.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	1525.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1070 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
Team Ryan

A. EYESTONE, MAYNARD, M., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2803 E WINGER RD
 City MEAD State WA Zip Code 99021-9618
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 855.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 28 / 2016
Transaction ID : SA11A.455284
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION

B. EYESTONE, MAYNARD, M., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2803 E WINGER RD
 City MEAD State WA Zip Code 99021-9618
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 855.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 28 / 2016
Transaction ID : SA11A.455291
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION

C. EYESTONE, MAYNARD, M., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2803 E WINGER RD
 City MEAD State WA Zip Code 99021-9618
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 855.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 28 / 2016
Transaction ID : SA11A.455292
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	300.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1071 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. EYESTONE, MAYNARD, M., MR.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 2803 E WINGER RD

City MEAD	State WA	Zip Code 99021-9618
--------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
855.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	04	/	2016

Transaction ID : SA11A.473039

Amount of Each Receipt this Period
25.00

Memo Item CONTRIBUTION

B. EZELL, ROGER, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 15475 ROBERT EZELL RD

City PERRY	State FL	Zip Code 32348-7913
---------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
255.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	04	/	2016

Transaction ID : SA11A.472528

Amount of Each Receipt this Period
30.00

Memo Item CONTRIBUTION

C. EZZELL, R. DOUGLAS, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 101 IDLE HOUR DRIVE, APT 1

City LEXINGTON	State KY	Zip Code 40502-1166
-------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) SELF EMPLOYED	Occupation (for Individual) PORTFOLIO MANAGEMENT
--	---

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
450.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	26	/	2016

Transaction ID : SA11A.447666

Amount of Each Receipt this Period
200.00

Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	255.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1072 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. FAGERSTONE, DENNIS, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 18779 FM 1630
 City FORESTBURG State TX Zip Code 76239-2304
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) CONSULTANT
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 10 / 29 / 2016
Transaction ID : SA11A.460699
 Amount of Each Receipt this Period 500.00
 Memo Item CONTRIBUTION

B. FAIRBANK, JONATHAN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 223 N GUADALUP STREET #476
 City SANTA FE State NM Zip Code 87501-1868
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt 10 / 26 / 2016
Transaction ID : SA11A.447645
 Amount of Each Receipt this Period 200.00
 Memo Item CONTRIBUTION

C. FAIRBANKS, KENNETH, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1946 WYOMING ST
 City BREMERTON State WA Zip Code 98310-4756
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 505.00

Date of Receipt 10 / 25 / 2016
Transaction ID : SA11A.449061
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	725.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1073 OF 4311
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. FAIRBANKS, KENNETH, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1946 WYOMING ST

City BREMERTON	State WA	Zip Code 98310-4756
-------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
505.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	26	/	2016

Transaction ID : SA11A.451286

Amount of Each Receipt this Period
30.00

Memo Item
CONTRIBUTION

B. FAIRBANKS, KENNETH, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1946 WYOMING ST

City BREMERTON	State WA	Zip Code 98310-4756
-------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
505.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	31	/	2016

Transaction ID : SA11A.459172

Amount of Each Receipt this Period
25.00

Memo Item
CONTRIBUTION

C. FAIRBANKS, KENNETH, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1946 WYOMING ST

City BREMERTON	State WA	Zip Code 98310-4756
-------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
505.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	30	/	2016

Transaction ID : SA11A.460017

Amount of Each Receipt this Period
25.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	80.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1074 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name A. FAIRBANKS, KENNETH, , ,		Date of Receipt MM / DD / YYYY 11 / 04 / 2016 Transaction ID : SA11A.471395
Mailing Address 1946 WYOMING ST		Amount of Each Receipt this Period 25.00
City BREMERTON	State WA	Zip Code 98310-4756
FEC ID number of contributing federal political committee. C		<input type="checkbox"/> Memo Item CONTRIBUTION
Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 505.00	

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name B. FAIRBANKS, KENNETH, , ,		Date of Receipt MM / DD / YYYY 11 / 06 / 2016 Transaction ID : SA11A.478278
Mailing Address 1946 WYOMING ST		Amount of Each Receipt this Period 25.00
City BREMERTON	State WA	Zip Code 98310-4756
FEC ID number of contributing federal political committee. C		<input type="checkbox"/> Memo Item CONTRIBUTION
Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 505.00	

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name C. FAIRBANKS, KENNETH, , ,		Date of Receipt MM / DD / YYYY 11 / 08 / 2016 Transaction ID : SA11A.479816
Mailing Address 1946 WYOMING ST		Amount of Each Receipt this Period 25.00
City BREMERTON	State WA	Zip Code 98310-4756
FEC ID number of contributing federal political committee. C		<input type="checkbox"/> Memo Item CONTRIBUTION
Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Aggregate Year-to-Date ▼ 505.00	

SUBTOTAL of Receipts This Page (optional).....▶	75.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1075 OF 4311
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. FALGOUST, QUENTIN, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 739 HWY. 308

City THIBODAUX	State LA	Zip Code 70301-7903
-------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) SELF EMPLOYED	Occupation (for Individual) PHYSICIAN
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
350.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
10		26		2016

Transaction ID : SA11A.451030

Amount of Each Receipt this Period
100.00

Memo Item
CONTRIBUTION

B. FALGOUST, QUENTIN, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 739 HWY. 308

City THIBODAUX	State LA	Zip Code 70301-7903
-------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) SELF EMPLOYED	Occupation (for Individual) PHYSICIAN
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
350.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
11		04		2016

Transaction ID : SA11A.471568

Amount of Each Receipt this Period
100.00

Memo Item
CONTRIBUTION

C. FALIC, JEROME, , MR.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 6100 HOLLYWOOD BLVD, 7TH FLOOR

City HOLLYWOOD	State FL	Zip Code 33024-7983
-------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) DUTY FREE AMERICAS INC	Occupation (for Individual) CEO
---	------------------------------------

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
18000.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
10		25		2016

Transaction ID : SA11A.445011

Amount of Each Receipt this Period
3000.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	3200.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1076 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
Team Ryan

A. FALIC, LEON, , MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 6100 HOLLYWOOD BLVD 7TH FL
 City HOLLYWOOD State FL Zip Code 33024-7983
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) FALIC GROUP Occupation (for Individual) PRESIDENT
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 18000.00

Date of Receipt 10 / 25 / 2016
Transaction ID : SA11A.445010
 Amount of Each Receipt this Period 3000.00
 Memo Item CONTRIBUTION

B. FALIC, SIMON, , MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 150 HARBOUR WAY
 City BAL HARBOUR State FL Zip Code 33154-1333
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) DUTY FREE AMERICAS INC Occupation (for Individual) CHAIRMAN
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 19000.00

Date of Receipt 10 / 25 / 2016
Transaction ID : SA11A.445012
 Amount of Each Receipt this Period 4000.00
 Memo Item CONTRIBUTION

C. FALLON, LEE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2038 N. CAPELLA CT.
 City COSTA MESA State CA Zip Code 92626-3544
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) HEALTHSOUTH Occupation (for Individual) REGIONAL DIRECTOR
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 10 / 26 / 2016
Transaction ID : SA11A.454283
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 7250.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1077 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. FALOTICO, DANIEL, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 890 AUDUBON WAY
 BW-106
 City LINCOLNSHIRE State IL Zip Code 60069-3879
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 27 / 2016
Transaction ID : SA11A.452500
 Amount of Each Receipt this Period
 100.00
 Memo Item CONTRIBUTION

B. FANNIN, LIZ, E., MS.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5024 DICKENS LANE
 City CARROLLTON State TX Zip Code 75010-4915
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 550.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 27 / 2016
Transaction ID : SA11A.453678
 Amount of Each Receipt this Period
 100.00
 Memo Item CONTRIBUTION

C. FANNIN, LIZ, E., MS.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5024 DICKENS LANE
 City CARROLLTON State TX Zip Code 75010-4915
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 550.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 27 / 2016
Transaction ID : SA11A.453681
 Amount of Each Receipt this Period
 100.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	300.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1078 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. FARID, KAREN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 300 SHIRLEY AVE.
 City STATEN ISLAND State NY Zip Code 10312-5455
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 745.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 27 / 2016
Transaction ID : SA11A.453826
 Amount of Each Receipt this Period
 75.00
 Memo Item
 CONTRIBUTION

B. FARID, KAREN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 300 SHIRLEY AVE.
 City STATEN ISLAND State NY Zip Code 10312-5455
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 745.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 29 / 2016
Transaction ID : SA11A.460863
 Amount of Each Receipt this Period
 30.00
 Memo Item
 CONTRIBUTION

C. FARID, KAREN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 300 SHIRLEY AVE.
 City STATEN ISLAND State NY Zip Code 10312-5455
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 745.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 29 / 2016
Transaction ID : SA11A.460864
 Amount of Each Receipt this Period
 30.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	135.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1079 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. FARID, KAREN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 300 SHIRLEY AVE.
 City STATEN ISLAND State NY Zip Code 10312-5455
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 745.00

Date of Receipt 10 / 29 / 2016
Transaction ID : SA11A.460882
 Amount of Each Receipt this Period 30.00
 Memo Item CONTRIBUTION

B. FARID, KAREN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 300 SHIRLEY AVE.
 City STATEN ISLAND State NY Zip Code 10312-5455
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 745.00

Date of Receipt 10 / 29 / 2016
Transaction ID : SA11A.460883
 Amount of Each Receipt this Period 30.00
 Memo Item CONTRIBUTION

C. FARID, KAREN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 300 SHIRLEY AVE.
 City STATEN ISLAND State NY Zip Code 10312-5455
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 745.00

Date of Receipt 11 / 04 / 2016
Transaction ID : SA11A.472658
 Amount of Each Receipt this Period 75.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶ 135.00
TOTAL This Period (last page this line number only).....▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1080 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. FARIES, CHARLES, E., MR., JR.
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 12535 SW IRON MT BLVD
 City PORTLAND State OR Zip Code 97219-8303
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 26 / 2016
Transaction ID : SA11A.450631
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION

B. FARIES, CHARLES, E., MR., JR.
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 12535 SW IRON MT BLVD
 City PORTLAND State OR Zip Code 97219-8303
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 26 / 2016
Transaction ID : SA11A.450636
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION

C. FARINA, JAMES, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 20 PALMA ROAD
 City SOMERS State NY Zip Code 10589-2807
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) WEST-FAIR ELECTRIC Occupation (for Individual) ELECTRIC CONTRACTOR
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 600.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 27 / 2016
Transaction ID : SA11A.453876
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	300.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1081 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
Team Ryan

A. FARINA, JAMES, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 20 PALMA ROAD
 City SOMERS State NY Zip Code 10589-2807
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) WEST-FAIR ELECTRIC Occupation (for Individual) ELECTRIC CONTRACTOR
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 600.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 11 / 04 / 2016
Transaction ID : SA11A.473662
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION

B. FARMER, BARBARA, A., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 406 OLD ORCHARD WAY
 City DICKINSON State TX Zip Code 77539-7495
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 265.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 10 / 21 / 2016
Transaction ID : SA11A.444109
 Amount of Each Receipt this Period
 20.00
 Memo Item
 CONTRIBUTION

C. FARMER, BARBARA, A., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 406 OLD ORCHARD WAY
 City DICKINSON State TX Zip Code 77539-7495
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 265.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 10 / 27 / 2016
Transaction ID : SA11A.453592
 Amount of Each Receipt this Period
 25.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	145.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1082 OF 4311
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. FARMER, BARBARA, A., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 406 OLD ORCHARD WAY
 City DICKINSON State TX Zip Code 77539-7495
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 265.00

Date of Receipt 11 / 08 / 2016
Transaction ID : SA11A.479714
 Amount of Each Receipt this Period 20.00
 Memo Item CONTRIBUTION

B. FARR, DUANE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2330 WINFIELD AVE
 City GOLDEN VALLEY State MN Zip Code 55422-3440
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 390.00

Date of Receipt 10 / 31 / 2016
Transaction ID : SA11A.463653
 Amount of Each Receipt this Period 30.00
 Memo Item CONTRIBUTION

C. FARR, GENE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 570 MCMINN ROAD
 City PORT TOWNSEND State WA Zip Code 98368-9646
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 550.00

Date of Receipt 10 / 25 / 2016
Transaction ID : SA11A.451531
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶ 300.00
TOTAL This Period (last page this line number only).....▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1083 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. FARR, JOYCE, H., MISS,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1939 WILDWOOD PLACE

City MOBILE	State AL	Zip Code 36609-2579
----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
635.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 03 / 2016

Transaction ID : SA11A.465523

Amount of Each Receipt this Period
200.00

Memo Item
CONTRIBUTION

B. FARRAR, WILLIAM, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 3 ROBERT S DRIVE

City MENLO PARK	State CA	Zip Code 94025-5543
--------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
325.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 24 / 2016

Transaction ID : SA11A.445652

Amount of Each Receipt this Period
25.00

Memo Item
CONTRIBUTION

C. FARRAR, WILLIAM, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 3 ROBERT S DRIVE

City MENLO PARK	State CA	Zip Code 94025-5543
--------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
325.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 24 / 2016

Transaction ID : SA11A.445653

Amount of Each Receipt this Period
25.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	250.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1084 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. FARRAR, WILLIAM, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3 ROBERT S DRIVE
 City MENLO PARK State CA Zip Code 94025-5543
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 325.00

Date of Receipt 11 / 02 / 2016
Transaction ID : SA11A.466427
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

B. FARRELL, ROBERT, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 651 BERING 403
 City HOUSTON State TX Zip Code 77057-2133
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt 10 / 24 / 2016
Transaction ID : SA11A.446201
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

C. FARRELL, ROBERT, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 651 BERING 403
 City HOUSTON State TX Zip Code 77057-2133
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt 10 / 26 / 2016
Transaction ID : SA11A.450947
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶ 150.00
TOTAL This Period (last page this line number only).....▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1085 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. FARRELL, ROBERT, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 651 BERING
403

City HOUSTON State TX Zip Code 77057-2133

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
400.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 26 / 2016

Transaction ID : SA11A.450956

Amount of Each Receipt this Period
50.00

Memo Item CONTRIBUTION

B. FARRELL, ROBERT, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 651 BERING
403

City HOUSTON State TX Zip Code 77057-2133

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
400.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 25 / 2016

Transaction ID : SA11A.451658

Amount of Each Receipt this Period
50.00

Memo Item CONTRIBUTION

C. FARRELL, ROBERT, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 651 BERING
403

City HOUSTON State TX Zip Code 77057-2133

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
400.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 25 / 2016

Transaction ID : SA11A.451661

Amount of Each Receipt this Period
50.00

Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	150.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1086 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. FARRELL, ROBERT, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 651 BERING 403
 City HOUSTON State TX Zip Code 77057-2133
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt 11 / 04 / 2016
Transaction ID : SA11A.471045
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

B. FARRIS, ALAN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 106 TURNBERRY WAY
 City SAN ANTONIO State TX Zip Code 78230-5651
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt 10 / 24 / 2016
Transaction ID : SA11A.449464
 Amount of Each Receipt this Period 1000.00
 Memo Item CONTRIBUTION

C. FARRIOR, STANLEY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 212 S. BICKETT ST. PO BOX 1056
 City BURGAW State NC Zip Code 28425-5057
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 10 / 27 / 2016
Transaction ID : SA11A.453458
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	1300.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1087 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. FARZAN, MARK, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 266 S CLIFFWOOD AVD

City LOS ANGELES	State CA	Zip Code 90049-3824
---------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) CPM	Occupation (for Individual) REAL ESTATE
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
400.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	04	/	2016

Transaction ID : SA11A.473123

Amount of Each Receipt this Period
100.00

Memo Item
CONTRIBUTION

B. FASSE, ARTHUR, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 3797 WINDING BROOK CIRCLE

City ROCHESTER HILLS	State MI	Zip Code 48309-4735
-------------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
428.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	25	/	2016

Transaction ID : SA11A.448434

Amount of Each Receipt this Period
30.00

Memo Item
CONTRIBUTION

C. FASSE, ARTHUR, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 3797 WINDING BROOK CIRCLE

City ROCHESTER HILLS	State MI	Zip Code 48309-4735
-------------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
428.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	25	/	2016

Transaction ID : SA11A.448532

Amount of Each Receipt this Period
50.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	180.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1088 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. FASSE, ARTHUR, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3797 WINDING BROOK CIRCLE
 City ROCHESTER HILLS State MI Zip Code 48309-4735
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 428.00

Date of Receipt 10 / 26 / 2016
Transaction ID : SA11A.450286
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

B. FASSE, ARTHUR, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3797 WINDING BROOK CIRCLE
 City ROCHESTER HILLS State MI Zip Code 48309-4735
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 428.00

Date of Receipt 10 / 31 / 2016
Transaction ID : SA11A.459161
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

C. FASSEAS, PETER, A., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3460 E FINGER ROCK ROAD
 City TUCSON State AZ Zip Code 85718-1367
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt 10 / 25 / 2016
Transaction ID : SA11A.447385
 Amount of Each Receipt this Period 1000.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶ 1075.00
TOTAL This Period (last page this line number only).....▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1089 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. FAUCHER, BOB, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 155 TEABERRY PATH
 City BOONE State NC Zip Code 28607-8511
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 700.00

Date of Receipt 10 / 31 / 2016
Transaction ID : SA11A.464382
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

B. FAULKNER, CLAUDE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2614 WHITMAN DR.
 City WILMINGTON State DE Zip Code 19808-3712
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 450.00

Date of Receipt 10 / 25 / 2016
Transaction ID : SA11A.448890
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

C. FAULKNER, CLAUDE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2614 WHITMAN DR.
 City WILMINGTON State DE Zip Code 19808-3712
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 450.00

Date of Receipt 10 / 24 / 2016
Transaction ID : SA11A.449398
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	400.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1090 OF 4311
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Team Ryan

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
A. FAULKNER, CLAUDE, , ,

Mailing Address **2614 WHITMAN DR.**

City WILMINGTON	State DE	Zip Code 19808-3712
---------------------------	--------------------	-------------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
--	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
450.00

Date of Receipt
11 / 04 / 2016

Transaction ID : SA11A.471115

Amount of Each Receipt this Period
100.00

Memo Item
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
B. FAULK, JAMES, W., ,

Mailing Address **PO BOX 406**

City LAKEWOOD	State NY	Zip Code 14750-0406
-------------------------	--------------------	-------------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) SELF EMPLOYED	Occupation (for Individual) PHYSICIAN
---	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
500.00

Date of Receipt
10 / 25 / 2016

Transaction ID : SA11A.447289

Amount of Each Receipt this Period
500.00

Memo Item
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
C. FAULKNER, ROBERT, F., MR.,

Mailing Address **3800 FRY AVENUE**

City TYLER	State TX	Zip Code 75701-9621
----------------------	--------------------	-------------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
--	---

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
600.00

Date of Receipt
10 / 27 / 2016

Transaction ID : SA11A.452299

Amount of Each Receipt this Period
200.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	800.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1091 OF 4311
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. FAULK, W., DANIEL, ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 10 NACOOCHEE PLACE

City ATLANTA	State GA	Zip Code 30305-4164
-----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) OXFORD PROPERTIES, LLC	Occupation (for Individual) APARTMENT DEVELOPMENT/CONST
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
350.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	26	/	2016

Transaction ID : SA11A.454427

Amount of Each Receipt this Period
250.00

Memo Item CONTRIBUTION

B. FAULK, W., DANIEL, ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 10 NACOOCHEE PLACE

City ATLANTA	State GA	Zip Code 30305-4164
-----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) OXFORD PROPERTIES, LLC	Occupation (for Individual) APARTMENT DEVELOPMENT/CONS'
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
350.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	01	/	2016

Transaction ID : SA11A.467330

Amount of Each Receipt this Period
100.00

Memo Item CONTRIBUTION

C. FAUST, GERALD, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 16163DEL NORTE

City POWAY	State CA	Zip Code 92064-1829
---------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) FAUST MANAGEMENT CORP	Occupation (for Individual) SPEAKER/CONSULTANT
--	---

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
282.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	30	/	2016

Transaction ID : SA11A.459416

Amount of Each Receipt this Period
50.00

Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	400.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1092 OF 4311
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. FAUST, GERALD, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 16163DEL NORTE
City POWAY State CA Zip Code 92064-1829
FEC ID number of contributing federal political committee. **C**
Name of Employer (for Individual) FAUST MANAGEMENT CORP Occupation (for Individual) SPEAKER/CONSULTANT
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 282.00

Date of Receipt 10 / 30 / 2016
Transaction ID : SA11A.459420
Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

B. FEAGLEY, JERRY, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 201W.RICHMOND ST A
City POINT RICHMOND State CA Zip Code 94801-3959
FEC ID number of contributing federal political committee. **C**
Name of Employer (for Individual) FEAGLEY MANAGEMENT Occupation (for Individual) FEAGLEYREALTORS
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 460.00

Date of Receipt 10 / 21 / 2016
Transaction ID : SA11A.444089
Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

C. FEAGLEY, JERRY, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 201W.RICHMOND ST A
City POINT RICHMOND State CA Zip Code 94801-3959
FEC ID number of contributing federal political committee. **C**
Name of Employer (for Individual) FEAGLEY MANAGEMENT Occupation (for Individual) FEAGLEYREALTORS
Receipt For: Primary General Other (specify)
Aggregate Year-to-Date ▼ 460.00

Date of Receipt 10 / 21 / 2016
Transaction ID : SA11A.444093
Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶ 100.00
TOTAL This Period (last page this line number only).....▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1093 OF 4311
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. FEAGLEY, JERRY, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 201W.RICHMOND ST A

City POINT RICHMOND	State CA	Zip Code 94801-3959
------------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) FEAGLEY MANAGEMENT	Occupation (for Individual) FEAGLEYREALTORS
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
460.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		26		2016

Transaction ID : SA11A.450762

Amount of Each Receipt this Period
50.00

Memo Item
CONTRIBUTION

B. FEAGLEY, JERRY, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 201W.RICHMOND ST A

City POINT RICHMOND	State CA	Zip Code 94801-3959
------------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) FEAGLEY MANAGEMENT	Occupation (for Individual) FEAGLEYREALTORS
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
460.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		26		2016

Transaction ID : SA11A.450780

Amount of Each Receipt this Period
50.00

Memo Item
CONTRIBUTION

C. FEAGLEY, JERRY, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 201W.RICHMOND ST A

City POINT RICHMOND	State CA	Zip Code 94801-3959
------------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) FEAGLEY MANAGEMENT	Occupation (for Individual) FEAGLEYREALTORS
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
460.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11		02		2016

Transaction ID : SA11A.466504

Amount of Each Receipt this Period
30.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	130.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1094 OF 4311
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. FEAGLEY, JERRY, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 201W.RICHMOND ST A

City POINT RICHMOND	State CA	Zip Code 94801-3959
------------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) FEAGLEY MANAGEMENT	Occupation (for Individual) FEAGLEYREALTORS
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
460.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
11		02		2016

Transaction ID : SA11A.466509

Amount of Each Receipt this Period
25.00

Memo Item
CONTRIBUTION

B. FEAGLEY, JERRY, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 201W.RICHMOND ST A

City POINT RICHMOND	State CA	Zip Code 94801-3959
------------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) FEAGLEY MANAGEMENT	Occupation (for Individual) FEAGLEYREALTORS
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
460.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
11		04		2016

Transaction ID : SA11A.472873

Amount of Each Receipt this Period
50.00

Memo Item
CONTRIBUTION

C. FEASLER, JOHN, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 2507 LARKSPUR DR

City PARK CITY	State UT	Zip Code 84060-7055
-------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
581.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
10		29		2016

Transaction ID : SA11A.460950

Amount of Each Receipt this Period
100.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	175.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1095 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. FEERER, BEN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3612 HOLIDAY AVE NE
 City ALBUQUERQUE State NM Zip Code 87111-5230
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 240.00

Date of Receipt 10 / 31 / 2016
Transaction ID : SA11A.463736
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

B. FEERER, BEN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3612 HOLIDAY AVE NE
 City ALBUQUERQUE State NM Zip Code 87111-5230
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 240.00

Date of Receipt 10 / 31 / 2016
Transaction ID : SA11A.463740
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

C. FEIGAL, LARRY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 8166 W HARMONY LN
 City PEORIA State AZ Zip Code 85382-3454
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 225.00

Date of Receipt 10 / 24 / 2016
Transaction ID : SA11A.445903
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 75.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1096 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. FEIGAL, LARRY, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 8166 W HARMONY LN

City PEORIA	State AZ	Zip Code 85382-3454
----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
225.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	01	/	2016

Transaction ID : SA11A.462242

Amount of Each Receipt this Period
25.00

Memo Item
CONTRIBUTION

B. FELDMAN, LARRY, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 195 HIGHLINE CROSSING

City SILVERTHORNE	State CO	Zip Code 80443-
----------------------	-------------	--------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) SELF EMPLOYED	Occupation (for Individual) RE DEVELOPMENT
--	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	31	/	2016

Transaction ID : SA11A.459108

Amount of Each Receipt this Period
250.00

Memo Item
CONTRIBUTION

C. FELDMAN, LARRY, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 195 HIGHLINE CROSSING

City SILVERTHORNE	State CO	Zip Code 80443-
----------------------	-------------	--------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) SELF EMPLOYED	Occupation (for Individual) RE DEVELOPMENT
--	---

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
1000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	04	/	2016

Transaction ID : SA11A.471414

Amount of Each Receipt this Period
250.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	525.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1097 OF 4311
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. FELLOWS, MARILYN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 7013 TAFLINGER RD
 City NABB State IN Zip Code 47147-9629
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 10 / 27 / 2016
Transaction ID : SA11A.453405
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

B. FELSBURG, DAVE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2902 HAMPTON PLACE COURT
 City PLANT CITY State FL Zip Code 33566-9321
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt 10 / 28 / 2016
Transaction ID : SA11A.455411
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

C. FELTEN, PAMELA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 32441 EAGALESET AVE
 City AGUA DULCE State CA Zip Code 91390-2737
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) CCI Occupation (for Individual) EXECUTIVE ASSIST
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 350.00

Date of Receipt 11 / 04 / 2016
Transaction ID : SA11A.473098
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 250.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1098 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. FENIMORE, BARBARA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 66 POWER ST
 City PORTSMOUTH State RI Zip Code 02871-4117
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 230.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 25 / 2016
Transaction ID : SA11A.451515
 Amount of Each Receipt this Period
 30.00
 Memo Item
 CONTRIBUTION

B. FENNA, BETTY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 709 WEST RIVER PARKWAY
 City CHAMPLIN State MN Zip Code 55316-1291
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 525.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 06 / 2016
Transaction ID : SA11A.477171
 Amount of Each Receipt this Period
 25.00
 Memo Item
 CONTRIBUTION

C. FENNELL, JUDITH, E., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 138 TROUT STREET
 City PALACIOS State TX Zip Code 77465-1753
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) INFORMATION REQUESTED PER BEST EFFORTS Occupation (for Individual) INFORMATION REQUESTED PER BEST EFFORTS
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 335.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 24 / 2016
Transaction ID : SA11A.443930
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 155.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1099 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. FENNELL, ROBERT, J., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1701 W BRISTOL HOLLOW ROAD
 City DUNLAP State IL Zip Code 61525-9156
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) INFORMATION REQUESTED PER BEST EFFORTS Occupation (for Individual) INFORMATION REQUESTED PER BE
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 300.00

Date of Receipt 11 / 02 / 2016
Transaction ID : SA11A.465023
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

B. FENNELL, ROBERT, J., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1701 W BRISTOL HOLLOW ROAD
 City DUNLAP State IL Zip Code 61525-9156
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) INFORMATION REQUESTED PER BEST EFFORTS Occupation (for Individual) INFORMATION REQUESTED PER BE
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 300.00

Date of Receipt 11 / 28 / 2016
Transaction ID : SA11A.481111
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

C. FENNELL, SANDRA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 6 WHALER LN
 City BERLIN State MD Zip Code 21811-1609
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 235.00

Date of Receipt 11 / 07 / 2016
Transaction ID : SA11A.476546
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 175.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1100 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. FENTON, MARTIN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 500 STEVENS
 City SOLANA BEACH State CA Zip Code 92075-2055
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SRG Occupation (for Individual) EXECUTIVE
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 10 / 25 / 2016
Transaction ID : SA11A.448433
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

B. FERDINAND, WILLIAM, V., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 31 GUINEA ROAD
 City GREENWICH State CT Zip Code 06830-3544
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 450.00

Date of Receipt 10 / 30 / 2016
Transaction ID : SA11A.459990
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

C. FERGUSON, CURTIS, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO BOX 1734
 City ATLANTA State GA Zip Code 30301-1734
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) ATLANTIC INDUSTRIES Occupation (for Individual) MANAGEMENT
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt 11 / 01 / 2016
Transaction ID : SA11A.462902
 Amount of Each Receipt this Period 500.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 700.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1101 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. FERGUSON, JOHN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2152OAKCRESTRIVE
 City LIBERTY State MO Zip Code 64068-
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) FERGUSON HOTEL DEVELOPMENT Occupation (for Individual) HOTELS
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 10 / 25 / 2016
Transaction ID : SA11A.448039
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

B. FERGUSON, PHILLIP, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 925 S. 9TH ST.
 City LANDER State WY Zip Code 82520-3651
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) CHURCH OF THE NAZARENE Occupation (for Individual) MINISTER OF THE GOSPEL
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 423.00

Date of Receipt 10 / 28 / 2016
Transaction ID : SA11A.461470
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

C. FERGUSON, PHILLIP, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 925 S. 9TH ST.
 City LANDER State WY Zip Code 82520-3651
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) CHURCH OF THE NAZARENE Occupation (for Individual) MINISTER OF THE GOSPEL
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 423.00

Date of Receipt 11 / 07 / 2016
Transaction ID : SA11A.476163
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 350.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1102 OF 4311
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. FERNANDEZ, GUILLERMO, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5441 BANYAN DR
 City CORAL GABLES State FL Zip Code 33156-2117
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) CONTINENTAL FLOWERS Occupation (for Individual) CEO
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1100.00

Date of Receipt **10 / 30 / 2016**
Transaction ID : SA11A.464912
 Amount of Each Receipt this Period 250.00
 Memo Item
 CONTRIBUTION

B. FERNANDEZ, GUILLERMO, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5441 BANYAN DR
 City CORAL GABLES State FL Zip Code 33156-2117
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) CONTINENTAL FLOWERS Occupation (for Individual) CEO
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1100.00

Date of Receipt **11 / 04 / 2016**
Transaction ID : SA11A.472134
 Amount of Each Receipt this Period 250.00
 Memo Item
 CONTRIBUTION

C. FERNANDEZ, MARTA, N., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 625 BILTMORE WAY APT 505
 City CORAL GABLES State FL Zip Code 33134-7537
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 2700.00

Date of Receipt **10 / 20 / 2016**
Transaction ID : SA11A.442241
 Amount of Each Receipt this Period 100.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 600.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1103 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. FERNANDEZ, MARTA, N., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 625 BILTMORE WAY
 APT 505
 City CORAL GABLES State FL Zip Code 33134-7537
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 2700.00

Date of Receipt **11 / 04 / 2016**
Transaction ID : SA11A.473283
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

B. FERNANDEZ, MIGUEL, B., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 121 ALHAMBRA PLZ STE 1100
 City CORAL GABLES State FL Zip Code 33134-4522
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) MBF HEALTHCARE PARTNERS Occupation (for Individual) EXECUTIVE
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 25000.00

Date of Receipt **10 / 24 / 2016**
Transaction ID : SA11A.443453
 Amount of Each Receipt this Period 25000.00
 Memo Item CONTRIBUTION

C. FERNANDEZ, RAMON, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 156 TIKI LANE
 City PITTSBURG State CA Zip Code 94565-5424
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 265.00

Date of Receipt **10 / 26 / 2016**
Transaction ID : SA11A.451322
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 25125.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1104 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. FERNANDEZ, RAMON, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 156 TIKI LANE

City PITTSBURG	State CA	Zip Code 94565-5424
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE
 Occupation (for Individual) RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
 265.00

Date of Receipt
 11 / 02 / 2016
Transaction ID : SA11A.465768

Amount of Each Receipt this Period
 25.00

Memo Item
 CONTRIBUTION

B. FERNANDEZ, RAMON, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 156 TIKI LANE

City PITTSBURG	State CA	Zip Code 94565-5424
-------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE
 Occupation (for Individual) RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
 265.00

Date of Receipt
 11 / 04 / 2016
Transaction ID : SA11A.470757

Amount of Each Receipt this Period
 25.00

Memo Item
 CONTRIBUTION

C. FERNANDEZ, RAUL, J., MR., JR.
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2401 PENN AVE NW STE 480

City WASHINGTON	State DC	Zip Code 20037-1730
--------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) MONUMENTAL SPORTS & ENTERTAINMENT
 Occupation (for Individual) VICE CHAIRMAN

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
 50000.00

Date of Receipt
 10 / 25 / 2016
Transaction ID : SA11A.444912

Amount of Each Receipt this Period
 50000.00

Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	50050.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 1105 OF 4311
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. FERNANDEZ, RODOLFO, J., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 6960 SW 92 ST
 City MIAMI State FL Zip Code 33156-1665
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) INFORMATION REQUESTED PER BEST EFFORTS Occupation (for Individual) INFORMATION REQUESTED PER BE
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 500.00

Date of Receipt 10 / 24 / 2016
Transaction ID : SA11A.443508
 Amount of Each Receipt this Period 500.00
 Memo Item CONTRIBUTION

B. FERRER, PACIFICO, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 7515 MAGNOLIA SHADOWS LANE
 City HOUSTON State TX Zip Code 77095-4054
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) CITGO PETROLEUM CORPORATION Occupation (for Individual) FINANCIAL ANALYST
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 225.00

Date of Receipt 10 / 21 / 2016
Transaction ID : SA11A.444514
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

C. FERRER, PACIFICO, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 7515 MAGNOLIA SHADOWS LANE
 City HOUSTON State TX Zip Code 77095-4054
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) CITGO PETROLEUM CORPORATION Occupation (for Individual) FINANCIAL ANALYST
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 225.00

Date of Receipt 11 / 04 / 2016
Transaction ID : SA11A.471641
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	550.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1106 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. FERRIS, DAVID, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5210 HAMPSHIRE DRIVE
 City MINNEAPOLIS State MN Zip Code 55419-1432
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) CARGILL Occupation (for Individual) FINANCE
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 11 / 01 / 2016
Transaction ID : SA11A.467195
 Amount of Each Receipt this Period 250.00
 Memo Item
CONTRIBUTION

B. FERRIER, EDWARD, CORDA, MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 24521 PEACHLAND AVENUE
 City NEWHALL State CA Zip Code 91321-3458
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) INFORMATION REQUESTED PER BEST EFFORTS Occupation (for Individual) INFORMATION REQUESTED PER BE
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt 11 / 01 / 2016
Transaction ID : SA11A.461852
 Amount of Each Receipt this Period 500.00
 Memo Item
CONTRIBUTION

C. FERRILL, JOAN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2001 FORT DRIVE
 City ALEXANDRIA State VA Zip Code 22307-1133
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) PHILANTHROPIST/ACTIVIST
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt 10 / 28 / 2016
Transaction ID : SA11A.454818
 Amount of Each Receipt this Period 1000.00
 Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	1750.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1107 OF 4311
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. FERRIER, MARIA, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 5526 KING RICHARD

City SAN ANTONIO	State TX	Zip Code 78229-5241
---------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
550.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		24		2016

Transaction ID : SA11A.449497

Amount of Each Receipt this Period
25.00

Memo Item
CONTRIBUTION

B. FERRIER, MARIA, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 5526 KING RICHARD

City SAN ANTONIO	State TX	Zip Code 78229-5241
---------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
550.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		26		2016

Transaction ID : SA11A.450012

Amount of Each Receipt this Period
25.00

Memo Item
CONTRIBUTION

C. FERRIER, MARIA, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 5526 KING RICHARD

City SAN ANTONIO	State TX	Zip Code 78229-5241
---------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
550.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		26		2016

Transaction ID : SA11A.450014

Amount of Each Receipt this Period
25.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	75.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1108 OF 4311
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. FERRIER, MARIA, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 5526 KING RICHARD

City SAN ANTONIO	State TX	Zip Code 78229-5241
---------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
550.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11		02		2016

Transaction ID : SA11A.466654

Amount of Each Receipt this Period
25.00

Memo Item CONTRIBUTION

B. FERRIER, MARIA, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 5526 KING RICHARD

City SAN ANTONIO	State TX	Zip Code 78229-5241
---------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
550.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11		03		2016

Transaction ID : SA11A.468935

Amount of Each Receipt this Period
25.00

Memo Item CONTRIBUTION

C. FERRIER, MARIA, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 5526 KING RICHARD

City SAN ANTONIO	State TX	Zip Code 78229-5241
---------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
550.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11		04		2016

Transaction ID : SA11A.472983

Amount of Each Receipt this Period
25.00

Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	75.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1109 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
Team Ryan

A. FERRIES, SARAH, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 6 LONE WOOD COURT
 City NAPA State CA Zip Code 94558-4659
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) PHYSICIAN
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 07 / 2016
Transaction ID : SA11A.467807
 Amount of Each Receipt this Period
 1000.00
 Memo Item
 CONTRIBUTION

B. FERRY, KEVIN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 65 ROOSEVELT ST.
 City BABYLON State NY Zip Code 11702-1833
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 275.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 27 / 2016
Transaction ID : SA11A.453557
 Amount of Each Receipt this Period
 25.00
 Memo Item
 CONTRIBUTION

C. FETKO, JON, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2408 ELMSRING WAY
 City LEXINGTON State KY Zip Code 40515-
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 207.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 27 / 2016
Transaction ID : SA11A.454089
 Amount of Each Receipt this Period
 50.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	1075.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1110 OF 4311
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. FETTIG, ROBERT, P., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address N2425 MAIN ROAD
 City LAKE GENEVA State WI Zip Code 53147-3808
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) TANKCRAFT CORP. WALWORTH Occupation (for Individual) BUSINESS MANAGER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 2500.00

Date of Receipt 11 / 03 / 2016
Transaction ID : SA11A.465184
 Amount of Each Receipt this Period 2500.00
 Memo Item CONTRIBUTION

B. FEULNER, EDWIN, J., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 470 S. UNION STREET
 City ALEXANDRIA State VA Zip Code 22314-3826
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) FEULNER & ASSOCIATES, LLC Occupation (for Individual) CONSULTANT
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 10 / 25 / 2016
Transaction ID : SA11A.448477
 Amount of Each Receipt this Period 500.00
 Memo Item CONTRIBUTION

C. FEYGIN, HELEN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 853 HILLSIDE AVE
 City MOUNTAINSIDE State NJ Zip Code 07092-2534
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) INTUISCENT LLC Occupation (for Individual) PERFUMERY
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 225.00

Date of Receipt 11 / 04 / 2016
Transaction ID : SA11A.473389
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	3050.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1111 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. FIEDLER, JEFFERY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4573 NORTH OAKVIEW
 City CHICAGO State IL Zip Code 60656-4135
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) CONSULTANT
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 350.00

Date of Receipt 10 / 31 / 2016
Transaction ID : SA11A.457918
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

B. FIEDLER, JEFFERY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4573 NORTH OAKVIEW
 City CHICAGO State IL Zip Code 60656-4135
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) CONSULTANT
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 350.00

Date of Receipt 11 / 05 / 2016
Transaction ID : SA11A.478520
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

C. FIEDLER, JEFFERY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4573 NORTH OAKVIEW
 City CHICAGO State IL Zip Code 60656-4135
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) CONSULTANT
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 350.00

Date of Receipt 11 / 08 / 2016
Transaction ID : SA11A.479818
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 75.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1112 OF 4311
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. FIELDEN, DIANNE, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 19834 CREEKSHORE DRIVE

City KATY	State TX	Zip Code 77449-4388
--------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) HEWLETT-PACKARD	Occupation (for Individual) DOCUMENTATION PROGRAM MANA
--	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
355.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		25		2016

Transaction ID : SA11A.448716

Amount of Each Receipt this Period
50.00

Memo Item CONTRIBUTION

B. FIELDEN, DIANNE, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 19834 CREEKSHORE DRIVE

City KATY	State TX	Zip Code 77449-4388
--------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) HEWLETT-PACKARD	Occupation (for Individual) DOCUMENTATION PROGRAM MANA
--	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
355.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		31		2016

Transaction ID : SA11A.464502

Amount of Each Receipt this Period
30.00

Memo Item CONTRIBUTION

C. FIELDEN, DIANNE, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 19834 CREEKSHORE DRIVE

City KATY	State TX	Zip Code 77449-4388
--------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) HEWLETT-PACKARD	Occupation (for Individual) DOCUMENTATION PROGRAM MANA
--	---

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
355.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11		04		2016

Transaction ID : SA11A.471061

Amount of Each Receipt this Period
50.00

Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	130.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1113 OF 4311
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. FIELDEN, DIANNE, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 19834 CREEKSHORE DRIVE

City KATY	State TX	Zip Code 77449-4388
--------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) HEWLETT-PACKARD	Occupation (for Individual) DOCUMENTATION PROGRAM MANA
--	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
355.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	04	/	2016

Transaction ID : SA11A.471644

Amount of Each Receipt this Period
25.00

Memo Item CONTRIBUTION

B. FIELDMAN, JOEL, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 40 TURF LANE

City ROSLYN HEIGHTS	State NY	Zip Code 11577-2738
------------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) JB FIELDMAN	Occupation (for Individual) PHYSICIAN
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
2750.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	22	/	2016

Transaction ID : SA11A.446847

Amount of Each Receipt this Period
100.00

Memo Item CONTRIBUTION

C. FIELDMAN, JOEL, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 40 TURF LANE

City ROSLYN HEIGHTS	State NY	Zip Code 11577-2738
------------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) JB FIELDMAN	Occupation (for Individual) PHYSICIAN
--	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
2750.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	25	/	2016

Transaction ID : SA11A.451445

Amount of Each Receipt this Period
250.00

Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	375.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1114 OF 4311
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. FIELDMAN, JOEL, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 40 TURF LANE

City ROSLYN HEIGHTS	State NY	Zip Code 11577-2738
------------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) JB FIELDMAN	Occupation (for Individual) PHYSICIAN
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
2750.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		25		2016

Transaction ID : SA11A.451461

Amount of Each Receipt this Period
250.00

Memo Item
CONTRIBUTION

B. FIELDMAN, JOEL, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 40 TURF LANE

City ROSLYN HEIGHTS	State NY	Zip Code 11577-2738
------------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) JB FIELDMAN	Occupation (for Individual) PHYSICIAN
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
2750.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		31		2016

Transaction ID : SA11A.458572

Amount of Each Receipt this Period
250.00

Memo Item
CONTRIBUTION

C. FIELDMAN, JOEL, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 40 TURF LANE

City ROSLYN HEIGHTS	State NY	Zip Code 11577-2738
------------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) JB FIELDMAN	Occupation (for Individual) PHYSICIAN
--	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
2750.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11		01		2016

Transaction ID : SA11A.463064

Amount of Each Receipt this Period
100.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	600.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1115 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
Team Ryan

A. FIELDMAN, JOEL, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 40 TURF LANE
 City ROSLYN HEIGHTS State NY Zip Code 11577-2738
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) JB FIELDMAN Occupation (for Individual) PHYSICIAN
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 2750.00

Date of Receipt 11 / 04 / 2016
Transaction ID : SA11A.471933
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

B. FIELDS, KATHERINE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2060 LONGDEN CIRCLE
 City LOS ALTOS State CA Zip Code 94024-6768
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 10 / 25 / 2016
Transaction ID : SA11A.448943
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

C. FIELD, SCOTT, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 823 JACQUELINE DRIVE
 City HUNTSVILLE State AL Zip Code 35802-3254
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) PEDIATRICIAN
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 325.00

Date of Receipt 10 / 27 / 2016
Transaction ID : SA11A.453583
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	400.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1116 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
Team Ryan

A. FIELD, SCOTT, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 823 JACQUELINE DRIVE
 City HUNTSVILLE State AL Zip Code 35802-3254
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) PEDIATRICIAN
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 325.00

Date of Receipt 10 / 27 / 2016
Transaction ID : SA11A.453596
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

B. FIELD, SCOTT, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 823 JACQUELINE DRIVE
 City HUNTSVILLE State AL Zip Code 35802-3254
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) PEDIATRICIAN
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 325.00

Date of Receipt 11 / 07 / 2016
Transaction ID : SA11A.480023
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

C. FIFE, NANCY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 10101 N. ARABIAN TRAIL UNIT 1029
 City SCOTTSDALE State AZ Zip Code 85258-6227
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 10 / 31 / 2016
Transaction ID : SA11A.457481
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	125.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1117 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. FIFE, NANCY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 10101 N. ARABIAN TRAIL UNIT 1029

City SCOTTSDALE	State AZ	Zip Code 85258-6227
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 31 / 2016
Transaction ID : SA11A.457486

Amount of Each Receipt this Period
25.00

Memo Item
CONTRIBUTION

B. FIFE, NANCY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 10101 N. ARABIAN TRAIL UNIT 1029

City SCOTTSDALE	State AZ	Zip Code 85258-6227
--------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 31 / 2016
Transaction ID : SA11A.463964

Amount of Each Receipt this Period
25.00

Memo Item
CONTRIBUTION

C. FIFE, NANCY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 10101 N. ARABIAN TRAIL UNIT 1029

City SCOTTSDALE	State AZ	Zip Code 85258-6227
--------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 07 / 2016
Transaction ID : SA11A.480122

Amount of Each Receipt this Period
25.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	75.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1118 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
Team Ryan

A. FIFE, NANCY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 10101 N. ARABIAN TRAIL UNIT 1029
 City SCOTTSDALE State AZ Zip Code 85258-6227
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 07 / 2016
Transaction ID : SA11A.480126
 Amount of Each Receipt this Period
 25.00
 Memo Item
 CONTRIBUTION

B. FIFE, NANCY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 10101 N. ARABIAN TRAIL UNIT 1029
 City SCOTTSDALE State AZ Zip Code 85258-6227
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 07 / 2016
Transaction ID : SA11A.480128
 Amount of Each Receipt this Period
 25.00
 Memo Item
 CONTRIBUTION

C. FIFIELD, STEVEN, D., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 600 W JACKSON BOULEVARD STE 600
 City CHICAGO State IL Zip Code 60661-5677
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) FIFIELD REALTY CORP Occupation (for Individual) CEO
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 2700.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 31 / 2016
Transaction ID : SA11A.457355
 Amount of Each Receipt this Period
 2700.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	2750.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1119 OF 4311
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. FIKSE, EVERETT, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 376 ROBERT AVENUE

City RIPON	State CA	Zip Code 95366-2823
---------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
400.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		21		2016

Transaction ID : SA11A.444304

Amount of Each Receipt this Period
25.00

Memo Item
CONTRIBUTION

B. FIKSE, EVERETT, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 376 ROBERT AVENUE

City RIPON	State CA	Zip Code 95366-2823
---------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
400.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		25		2016

Transaction ID : SA11A.448257

Amount of Each Receipt this Period
25.00

Memo Item
CONTRIBUTION

C. FIKSE, EVERETT, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 376 ROBERT AVENUE

City RIPON	State CA	Zip Code 95366-2823
---------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
400.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		28		2016

Transaction ID : SA11A.455530

Amount of Each Receipt this Period
25.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	75.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1120 OF 4311
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. FIKSE, EVERETT, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 376 ROBERT AVENUE

City RIPON	State CA	Zip Code 95366-2823
---------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
400.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	28	/	2016

Transaction ID : SA11A.455532

Amount of Each Receipt this Period
25.00

Memo Item
CONTRIBUTION

B. FIKSE, EVERETT, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 376 ROBERT AVENUE

City RIPON	State CA	Zip Code 95366-2823
---------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
400.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	02	/	2016

Transaction ID : SA11A.466344

Amount of Each Receipt this Period
25.00

Memo Item
CONTRIBUTION

C. FIKSE, EVERETT, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 376 ROBERT AVENUE

City RIPON	State CA	Zip Code 95366-2823
---------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
400.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	02	/	2016

Transaction ID : SA11A.466390

Amount of Each Receipt this Period
25.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	75.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1121 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. FIKSE, EVERETT, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 376 ROBERT AVENUE
 City RIPON State CA Zip Code 95366-2823
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 07 / 2016
Transaction ID : SA11A.476193
 Amount of Each Receipt this Period
 25.00
 Memo Item CONTRIBUTION

B. FILIP, DONALD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4249 BAKERS FARM PLACE
 City ATLANTA State GA Zip Code 30339-4804
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 275.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 31 / 2016
Transaction ID : SA11A.458480
 Amount of Each Receipt this Period
 250.00
 Memo Item CONTRIBUTION

C. FILIP, DONALD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4249 BAKERS FARM PLACE
 City ATLANTA State GA Zip Code 30339-4804
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 275.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 03 / 2016
Transaction ID : SA11A.468696
 Amount of Each Receipt this Period
 25.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	300.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1122 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. FILOSA, ANTHONY, J., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 601 SIERRA VISTA DR.
 City TRUTH OR CONSEQUEN State NM Zip Code 87901-1543
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt 10 / 30 / 2016
Transaction ID : SA11A.460319
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

B. FILOTEO, HARRIET, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO BOX 776
 City LEBEC State CA Zip Code 93243-0776
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) WEST KERN COMUNITY COLLEGE Occupation (for Individual) RETIRED TEACHER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 530.00

Date of Receipt 10 / 22 / 2016
Transaction ID : SA11A.446716
 Amount of Each Receipt this Period 110.00
 Memo Item CONTRIBUTION

C. FILOTEO, HARRIET, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO BOX 776
 City LEBEC State CA Zip Code 93243-0776
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) WEST KERN COMUNITY COLLEGE Occupation (for Individual) RETIRED TEACHER
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 530.00

Date of Receipt 10 / 22 / 2016
Transaction ID : SA11A.446717
 Amount of Each Receipt this Period 110.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	320.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1123 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. FILOTEO, HARRIET, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO BOX 776
 City LEBEC State CA Zip Code 93243-0776
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) WEST KERN COMUNITY COLLEGE Occupation (for Individual) RETIRED TEACHER
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 530.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 11 / 04 / 2016
Transaction ID : SA11A.471050
 Amount of Each Receipt this Period
 110.00
 Memo Item
 CONTRIBUTION

B. FILOTEO, HARRIET, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO BOX 776
 City LEBEC State CA Zip Code 93243-0776
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) WEST KERN COMUNITY COLLEGE Occupation (for Individual) RETIRED TEACHER
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 530.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 11 / 07 / 2016
Transaction ID : SA11A.475384
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION

C. FILOTEO, HARRIET, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO BOX 776
 City LEBEC State CA Zip Code 93243-0776
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) WEST KERN COMUNITY COLLEGE Occupation (for Individual) RETIRED TEACHER
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 530.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 11 / 07 / 2016
Transaction ID : SA11A.475386
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	310.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1124 OF 4311
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. FINCH, RAY, N., ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 9401 STONEBRIDGE

City COLLEGE STATION	State TX	Zip Code 77845-9346
-------------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) INFORMATION REQUESTED PER BEST EFFORTS	Occupation (for Individual) INFORMATION REQUESTED PER BE
---	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
400.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
10		25		2016

Transaction ID : SA11A.447522

Amount of Each Receipt this Period
200.00

Memo Item
CONTRIBUTION

B. FINDLAY, GARY, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1299 TRAIL VIEW PL

City NIPOMO	State CA	Zip Code 93444-6663
----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
500.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
11		02		2016

Transaction ID : SA11A.470142

Amount of Each Receipt this Period
100.00

Memo Item
CONTRIBUTION

C. FINDLAY, GARY, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1299 TRAIL VIEW PL

City NIPOMO	State CA	Zip Code 93444-6663
----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
500.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
11		03		2016

Transaction ID : SA11A.474577

Amount of Each Receipt this Period
100.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	400.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1125 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. FINE, JAMES, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 7608 N 127TH E AVE
 City OWASSO State OK Zip Code 74055-7943
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 525.00

Date of Receipt 10 / 28 / 2016
Transaction ID : SA11A.456132
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

B. FINN, BERTRAM, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO BOX 123 APT 11W
 City JEFFERSONVILLE State VT Zip Code 05464-0123
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 10 / 29 / 2016
Transaction ID : SA11A.464982
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

C. FINNEY, BRANDON, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 7501 E THOMPSON PEAK PKWY 155
 City SCOTTSDALE State AZ Zip Code 85255-4525
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 10 / 30 / 2016
Transaction ID : SA11A.460209
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	250.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1126 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
Team Ryan

A. FINNEY, MARK, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 7602 16TH AVE NW
 City BRADENTON State FL Zip Code 34209-1019
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SUNCOAST ELECTRIC OF MANATEE, INC. Occupation (for Individual) OWNER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 525.00

Date of Receipt 10 / 22 / 2016
Transaction ID : SA11A.446904
 Amount of Each Receipt this Period 100.00
 Memo Item
 CONTRIBUTION

B. FINNEY, MARK, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 7602 16TH AVE NW
 City BRADENTON State FL Zip Code 34209-1019
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SUNCOAST ELECTRIC OF MANATEE, INC. Occupation (for Individual) OWNER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 525.00

Date of Receipt 10 / 25 / 2016
Transaction ID : SA11A.452175
 Amount of Each Receipt this Period 100.00
 Memo Item
 CONTRIBUTION

C. FINNEY, MARK, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 7602 16TH AVE NW
 City BRADENTON State FL Zip Code 34209-1019
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SUNCOAST ELECTRIC OF MANATEE, INC. Occupation (for Individual) OWNER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 525.00

Date of Receipt 10 / 25 / 2016
Transaction ID : SA11A.452177
 Amount of Each Receipt this Period 100.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	300.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1127 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
Team Ryan

A. FINOCCHARIO, ARTHUR, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3 ROBIN DRIVE
 City ROCHESTER State NY Zip Code 14618-4824
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) B & L WHOLESALE WHOLESALE Occupation (for Individual) VP
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 11 / 04 / 2016
Transaction ID : SA11A.470503
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

B. FIOLA, SHARON, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4602 GARDEN GROVE
 City COLUMBIA State MO Zip Code 65203-9735
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1081.00

Date of Receipt 10 / 22 / 2016
Transaction ID : SA11A.449648
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

C. FIOLA, SHARON, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4602 GARDEN GROVE
 City COLUMBIA State MO Zip Code 65203-9735
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1081.00

Date of Receipt 10 / 22 / 2016
Transaction ID : SA11A.449649
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	450.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1128 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
Team Ryan

A. FIRESTONE, JOHN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 349 FAIRFIELD AVENUE
 City GRETNA State LA Zip Code 70056-7004
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) PHYSICIAN
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 10 / 25 / 2016
Transaction ID : SA11A.448223
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

B. FIRESTONE, JOHN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 349 FAIRFIELD AVENUE
 City GRETNA State LA Zip Code 70056-7004
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) PHYSICIAN
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 10 / 25 / 2016
Transaction ID : SA11A.448224
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

C. FIRESTONE, JOHN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 349 FAIRFIELD AVENUE
 City GRETNA State LA Zip Code 70056-7004
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) PHYSICIAN
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 11 / 04 / 2016
Transaction ID : SA11A.470895
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	300.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1129 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
Team Ryan

A. FIRMAGE, JOHN, H., , JR
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1552 ARLINGTON DRIVE
 City SALT LAKE CITY State UT Zip Code 84103-4428
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 750.00

Date of Receipt 10 / 31 / 2016
Transaction ID : SA11A.457287
 Amount of Each Receipt this Period 750.00
 Memo Item CONTRIBUTION

B. FIRTH, BRIAN, G., DR., M.D.
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1497 BROOKFIELD RD
 City YARDLEY State PA Zip Code 19067-3931
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 10 / 26 / 2016
Transaction ID : SA11A.447760
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

C. FIRTH, BRIAN, G., DR., M.D.
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1497 BROOKFIELD RD
 City YARDLEY State PA Zip Code 19067-3931
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 10 / 26 / 2016
Transaction ID : SA11A.450804
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 1050.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1130 OF 4311
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
Team Ryan

A. FISCHER, DENNIS, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1807 HILL GROVE LANE

City LINCOLN	State CA	Zip Code 95648-8672
-----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
350.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	28	/	2016

Transaction ID : SA11A.456157

Amount of Each Receipt this Period
25.00

Memo Item CONTRIBUTION

B. FISCHER, DENNIS, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1807 HILL GROVE LANE

City LINCOLN	State CA	Zip Code 95648-8672
-----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
350.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	01	/	2016

Transaction ID : SA11A.462445

Amount of Each Receipt this Period
25.00

Memo Item CONTRIBUTION

C. FISCHER, DENNIS, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1807 HILL GROVE LANE

City LINCOLN	State CA	Zip Code 95648-8672
-----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
350.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	04	/	2016

Transaction ID : SA11A.474176

Amount of Each Receipt this Period
25.00

Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	75.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1131 OF 4311
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name A. FISCHER, FRED, , ,		Date of Receipt M M M / D D D / Y Y Y Y Y Y 10 / 26 / 2016
Mailing Address N21W4260 CUMBERLAND DR. 27E		Transaction ID : SA11A.451077
City PEWAUKEE	State WI	Zip Code 53072-
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 50.00
Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED	<input type="checkbox"/> Memo Item CONTRIBUTION
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 375.00	

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name B. FISCHER, FRED, , ,		Date of Receipt M M M / D D D / Y Y Y Y Y Y 11 / 04 / 2016
Mailing Address N21W4260 CUMBERLAND DR. 27E		Transaction ID : SA11A.472754
City PEWAUKEE	State WI	Zip Code 53072-
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 50.00
Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED	<input type="checkbox"/> Memo Item CONTRIBUTION
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 375.00	

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name C. FISCUS, ROBERT, L., MR.,		Date of Receipt M M M / D D D / Y Y Y Y Y Y 11 / 03 / 2016
Mailing Address 86 CRICKET LANE		Transaction ID : SA11A.465389
City SHELTON	State CT	Zip Code 06484-3430
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 250.00
Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED	<input type="checkbox"/> Memo Item CONTRIBUTION
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Aggregate Year-to-Date ▼ 950.00	

SUBTOTAL of Receipts This Page (optional).....▶	350.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1132 OF 4311
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. FISH, GREG, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1416 ROBINHOOD LANE

City LA GRANGE PARK	State IL	Zip Code 60526-5316
------------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) TRIMEGA	Occupation (for Individual) PURCHASING
--	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
242.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		24		2016

Transaction ID : SA11A.445589

Amount of Each Receipt this Period
30.00

Memo Item
CONTRIBUTION

B. FISH, GREG, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1416 ROBINHOOD LANE

City LA GRANGE PARK	State IL	Zip Code 60526-5316
------------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) TRIMEGA	Occupation (for Individual) PURCHASING
--	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
242.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		24		2016

Transaction ID : SA11A.445593

Amount of Each Receipt this Period
30.00

Memo Item
CONTRIBUTION

C. FISH, GREG, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1416 ROBINHOOD LANE

City LA GRANGE PARK	State IL	Zip Code 60526-5316
------------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) TRIMEGA	Occupation (for Individual) PURCHASING
--	---

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
242.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11		02		2016

Transaction ID : SA11A.470173

Amount of Each Receipt this Period
25.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	85.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1133 OF 4311
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. FISHER, GREGORY, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1009 HIGHLAND WAY

City ROCK SPRINGS	State WY	Zip Code 82901-5823
----------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
382.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		31		2016

Transaction ID : SA11A.458948

Amount of Each Receipt this Period
100.00

Memo Item
CONTRIBUTION

B. FISHER, GREGORY, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1009 HIGHLAND WAY

City ROCK SPRINGS	State WY	Zip Code 82901-5823
----------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
382.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		31		2016

Transaction ID : SA11A.458965

Amount of Each Receipt this Period
100.00

Memo Item
CONTRIBUTION

C. FISHER, JUELLE, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 6200 ST. HELENA ROAD

City SANTA ROSA	State CA	Zip Code 95404-9692
--------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
413.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11		04		2016

Transaction ID : SA11A.471728

Amount of Each Receipt this Period
59.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	259.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1134 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
Team Ryan

A. FISHER, KAY, E., MS.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1102 S. 12TH AVE W
 City NEWTON State IA Zip Code 50208-5211
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 220.00

Date of Receipt 10 / 28 / 2016
Transaction ID : SA11A.455293
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

B. FISHER, KAY, E., MS.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1102 S. 12TH AVE W
 City NEWTON State IA Zip Code 50208-5211
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 220.00

Date of Receipt 10 / 28 / 2016
Transaction ID : SA11A.455308
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

C. FISHER, KRISTINA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3001 NW 13TH ST
 City ANKENY State IA Zip Code 50023-9138
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) WELLS FARGO Occupation (for Individual) UNDERWRITER
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 11 / 07 / 2016
Transaction ID : SA11A.475043
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	75.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1135 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
Team Ryan

A. FISHER, KRISTINA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3001 NW 13TH ST
 City ANKENY State IA Zip Code 50023-9138
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) WELLS FARGO Occupation (for Individual) UNDERWRITER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt **11 / 07 / 2016**
Transaction ID : SA11A.475045
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

B. FISHER, LAUREN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 805 LA PARA AVE
 City PALO ALTO State CA Zip Code 94306-2648
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 350.00

Date of Receipt **10 / 24 / 2016**
Transaction ID : SA11A.445658
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

C. FISHER, MARLENE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 105 E BRIDGES DR
 City LANDRUM State SC Zip Code 29356-1805
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 232.00

Date of Receipt **10 / 21 / 2016**
Transaction ID : SA11A.447245
 Amount of Each Receipt this Period 10.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶ 135.00
TOTAL This Period (last page this line number only).....▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1136 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. FISHER, MARLENE, P., MRS.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 6413 S 1680 EAST

City SALT LAKE CITY	State UT	Zip Code 84121-2571
------------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) HOMEMAKER
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
550.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 07 / 2016
Transaction ID : SA11A.467798

Amount of Each Receipt this Period
250.00

Memo Item
CONTRIBUTION

B. FISKE, DANA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5 CULLEN BAY ROAD

City DOVER	State NH	Zip Code 03820-5000
---------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) SELF EMPLOYED	Occupation (for Individual) AUDIOLOGIST
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
500.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 07 / 2016
Transaction ID : SA11A.467830

Amount of Each Receipt this Period
500.00

Memo Item
CONTRIBUTION

C. FITZ, JOHN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 6885 SADDLE RUN WAY

City GAINESVILLE	State VA	Zip Code 20155-3028
---------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
225.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 24 / 2016
Transaction ID : SA11A.449293

Amount of Each Receipt this Period
25.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	775.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1137 OF 4311
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. FITTZ, JOHN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 6885 SADDLE RUN WAY
 City GAINESVILLE State VA Zip Code 20155-3028
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 225.00

Date of Receipt 10 / 27 / 2016
Transaction ID : SA11A.453182
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

B. FITTZ, JOHN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 6885 SADDLE RUN WAY
 City GAINESVILLE State VA Zip Code 20155-3028
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 225.00

Date of Receipt 10 / 31 / 2016
Transaction ID : SA11A.464523
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

C. FITZGERALD, DENNIS, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 38 ROSEWOOD DR
 City HAWTHORN WOODS State IL Zip Code 60047-7713
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) YASKAWA AMERICA Occupation (for Individual) SALES
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 11 / 04 / 2016
Transaction ID : SA11A.470375
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶ 300.00
TOTAL This Period (last page this line number only).....▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1138 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
Team Ryan

A. FITZGERALD, J. GARY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3751 HARPER STREET
 City HOUSTON State TX Zip Code 77005-3621
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt: 11 / 03 / 2016
Transaction ID : SA11A.465344
 Amount of Each Receipt this Period: 200.00
 Memo Item CONTRIBUTION

B. FITZGERALD, JAMES, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3246 CONGRESSIONAL CIRCLE
 City FAIRFIELD State CA Zip Code 94534-7867
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 215.00

Date of Receipt: 10 / 24 / 2016
Transaction ID : SA11A.445726
 Amount of Each Receipt this Period: 25.00
 Memo Item CONTRIBUTION

C. FITZGERALD, JAMES, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3246 CONGRESSIONAL CIRCLE
 City FAIRFIELD State CA Zip Code 94534-7867
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 215.00

Date of Receipt: 10 / 25 / 2016
Transaction ID : SA11A.448179
 Amount of Each Receipt this Period: 30.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	255.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1139 OF 4311
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. FITZGERALD, JAMES, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 3246 CONGRESSIONAL CIRCLE

City FAIRFIELD	State CA	Zip Code 94534-7867
-------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
215.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	25	/	2016

Transaction ID : SA11A.448183

Amount of Each Receipt this Period
30.00

Memo Item CONTRIBUTION

B. FITZGERALD, JAMES, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 3246 CONGRESSIONAL CIRCLE

City FAIRFIELD	State CA	Zip Code 94534-7867
-------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
215.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	31	/	2016

Transaction ID : SA11A.458295

Amount of Each Receipt this Period
25.00

Memo Item CONTRIBUTION

C. FITZGERALD, JAMES, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 3246 CONGRESSIONAL CIRCLE

City FAIRFIELD	State CA	Zip Code 94534-7867
-------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
215.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	05	/	2016

Transaction ID : SA11A.478726

Amount of Each Receipt this Period
25.00

Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	80.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1140 OF 4311
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. FITZGERALD, ROSE, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1209 GENERAL GEORGE PATTON RD

City NASHVILLE	State TN	Zip Code 37221-2434
-------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
550.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		20		2016

Transaction ID : SA11A.442641

Amount of Each Receipt this Period
50.00

Memo Item
CONTRIBUTION

B. FITZGERALD, ROSE, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1209 GENERAL GEORGE PATTON RD

City NASHVILLE	State TN	Zip Code 37221-2434
-------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
550.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		21		2016

Transaction ID : SA11A.447088

Amount of Each Receipt this Period
50.00

Memo Item
CONTRIBUTION

C. FITZGERALD, ROSE, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1209 GENERAL GEORGE PATTON RD

City NASHVILLE	State TN	Zip Code 37221-2434
-------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
550.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		25		2016

Transaction ID : SA11A.451453

Amount of Each Receipt this Period
25.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	125.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1141 OF 4311
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. FITZGERALD, ROSE, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1209 GENERAL GEORGE PATTON RD

City NASHVILLE	State TN	Zip Code 37221-2434
-------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
550.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		25		2016

Transaction ID : SA11A.451468

Amount of Each Receipt this Period
50.00

Memo Item CONTRIBUTION

B. FITZGERALD, ROSE, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1209 GENERAL GEORGE PATTON RD

City NASHVILLE	State TN	Zip Code 37221-2434
-------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
550.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		27		2016

Transaction ID : SA11A.453708

Amount of Each Receipt this Period
50.00

Memo Item CONTRIBUTION

C. FITZGERALD, ROSE, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1209 GENERAL GEORGE PATTON RD

City NASHVILLE	State TN	Zip Code 37221-2434
-------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
550.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		28		2016

Transaction ID : SA11A.455005

Amount of Each Receipt this Period
50.00

Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	150.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1142 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. FITZGERALD, ROSE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1209 GENERAL GEORGE PATTON RD
 City NASHVILLE State TN Zip Code 37221-2434
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 550.00

Date of Receipt 11 / 07 / 2016
Transaction ID : SA11A.480048
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

B. FITZGERALD, STEVE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3376 ST. CHARLES PL. SE
 City SOUTHPORT State NC Zip Code 28461-8403
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) INDUSTRIAL DESIGNER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 11 / 07 / 2016
Transaction ID : SA11A.474661
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

C. FITZGERALD, WILLIAM, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1304 N 139 ST
 City OMAHA State NE Zip Code 68154-5104
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 350.00

Date of Receipt 10 / 28 / 2016
Transaction ID : SA11A.455372
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	325.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1143 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. FITZPATRICK, DON, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1569 SHENANDOAH LANE
 City NAPERVILLE State IL Zip Code 60563-1419
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) INTERNETWORX SYSTEMS, INC. Occupation (for Individual) OWNER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 325.00

Date of Receipt 10 / 25 / 2016
Transaction ID : SA11A.448456
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

B. FITZPATRICK, DON, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1569 SHENANDOAH LANE
 City NAPERVILLE State IL Zip Code 60563-1419
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) INTERNETWORX SYSTEMS, INC. Occupation (for Individual) OWNER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 325.00

Date of Receipt 10 / 25 / 2016
Transaction ID : SA11A.448470
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

C. FITZPATRICK, SAMUEL, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 11523 BURR OAK LANE
 City BURR RIDGE State IL Zip Code 60527-8010
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 10 / 25 / 2016
Transaction ID : SA11A.447820
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	150.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1144 OF 4311
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. FITZPATRICK, SAMUEL, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 11523 BURR OAK LANE

City BURR RIDGE	State IL	Zip Code 60527-8010
--------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		25		2016

Transaction ID : SA11A.447827

Amount of Each Receipt this Period
50.00

Memo Item
CONTRIBUTION

B. FITZPATRICK, SAMUEL, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 11523 BURR OAK LANE

City BURR RIDGE	State IL	Zip Code 60527-8010
--------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11		07		2016

Transaction ID : SA11A.475772

Amount of Each Receipt this Period
50.00

Memo Item
CONTRIBUTION

C. FITZPATRICK, SAMUEL, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 11523 BURR OAK LANE

City BURR RIDGE	State IL	Zip Code 60527-8010
--------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11		07		2016

Transaction ID : SA11A.475784

Amount of Each Receipt this Period
50.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	150.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1145 OF 4311
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. FIVES, CARL, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 3124 SARALAKE DRIVE SOUTH

City SARASOTA	State FL	Zip Code 34239-2833
------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
400.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		31		2016

Transaction ID : SA11A.464674

Amount of Each Receipt this Period
100.00

Memo Item
CONTRIBUTION

B. FIVES, CARL, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 3124 SARALAKE DRIVE SOUTH

City SARASOTA	State FL	Zip Code 34239-2833
------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
400.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		31		2016

Transaction ID : SA11A.464676

Amount of Each Receipt this Period
100.00

Memo Item
CONTRIBUTION

C. FLAHERTY, MARK, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1117 LAWSON COVE CIRCLE

City VIRGINIA BEACH	State VA	Zip Code 23455-6824
------------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) VIRGINIA ASSET MANAGEMENT	Occupation (for Individual) FINANCIAL ADVISOR
--	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
354.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		30		2016

Transaction ID : SA11A.460142

Amount of Each Receipt this Period
59.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	259.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1146 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. FLAHERTY, MARK, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1117 LAWSON COVE CIRCLE
 City VIRGINIA BEACH State VA Zip Code 23455-6824
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) VIRGINIA ASSET MANAGEMENT Occupation (for Individual) FINANCIAL ADVISOR
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 354.00

Date of Receipt 11 / 04 / 2016
Transaction ID : SA11A.473547
 Amount of Each Receipt this Period 59.00
 Memo Item CONTRIBUTION

B. FLANAGAN, SEAN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3 BLANCHET COURT
 E.MAIL - SEANTOM@SMYTHEVOLVO.COM
 City FLORHAM PARK State NJ Zip Code 07932-1713
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 256.00

Date of Receipt 11 / 03 / 2016
Transaction ID : SA11A.469111
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

C. FLANAGAN, SEAN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3 BLANCHET COURT
 E.MAIL - SEANTOM@SMYTHEVOLVO.COM
 City FLORHAM PARK State NJ Zip Code 07932-1713
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 256.00

Date of Receipt 11 / 03 / 2016
Transaction ID : SA11A.469158
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	159.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1147 OF 4311
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
Team Ryan

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name A. FLASCHENTRAGER, FRED, , ,		Date of Receipt
Mailing Address 3248 PAGE AVE. 302		<input type="text" value="10"/> / <input type="text" value="23"/> / <input type="text" value="2016"/>
City VIRGINIA BEACH	State VA	Zip Code 23451-1065
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		Transaction ID : SA11A.446365
Name of Employer (for Individual) NONE		Amount of Each Receipt this Period <input type="text" value="100.00"/>
Occupation (for Individual) RETIRED		<input type="checkbox"/> Memo Item CONTRIBUTION
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ <input type="text" value="800.00"/>	

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name B. FLASCHENTRAGER, FRED, , ,		Date of Receipt
Mailing Address 3248 PAGE AVE. 302		<input type="text" value="10"/> / <input type="text" value="28"/> / <input type="text" value="2016"/>
City VIRGINIA BEACH	State VA	Zip Code 23451-1065
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		Transaction ID : SA11A.456277
Name of Employer (for Individual) NONE		Amount of Each Receipt this Period <input type="text" value="100.00"/>
Occupation (for Individual) RETIRED		<input type="checkbox"/> Memo Item CONTRIBUTION
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ <input type="text" value="800.00"/>	

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name C. FLASCHENTRAGER, FRED, , ,		Date of Receipt
Mailing Address 3248 PAGE AVE. 302		<input type="text" value="10"/> / <input type="text" value="28"/> / <input type="text" value="2016"/>
City VIRGINIA BEACH	State VA	Zip Code 23451-1065
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		Transaction ID : SA11A.456278
Name of Employer (for Individual) NONE		Amount of Each Receipt this Period <input type="text" value="100.00"/>
Occupation (for Individual) RETIRED		<input type="checkbox"/> Memo Item CONTRIBUTION
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Aggregate Year-to-Date ▼ <input type="text" value="800.00"/>	

SUBTOTAL of Receipts This Page (optional).....	<input type="text" value="300.00"/>
TOTAL This Period (last page this line number only).....	<input type="text"/>

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1148 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. FLASCHENTRAGER, FRED, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3248 PAGE AVE.
 302
 City VIRGINIA BEACH State VA Zip Code 23451-1065
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 800.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 28 / 2016
Transaction ID : SA11A.456281
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION

B. FLASCHENTRAGER, FRED, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3248 PAGE AVE.
 302
 City VIRGINIA BEACH State VA Zip Code 23451-1065
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 800.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 28 / 2016
Transaction ID : SA11A.456282
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION

C. FLASCHENTRAGER, FRED, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3248 PAGE AVE.
 302
 City VIRGINIA BEACH State VA Zip Code 23451-1065
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 800.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 02 / 2016
Transaction ID : SA11A.467112
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	300.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1149 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. FLASCHENTRAGER, FRED, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3248 PAGE AVE.
 302
 City VIRGINIA BEACH State VA Zip Code 23451-1065
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 800.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 04 / 2016
Transaction ID : SA11A.471164
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION

B. FLATHE, JOHN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2301 N.W. 30TH PLACE
 109
 City POMPANO BEACH State FL Zip Code 33069-0701
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) GEORGIA METAL CORP Occupation (for Individual) MECHANICAL CONTRACTOR
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 550.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 04 / 2016
Transaction ID : SA11A.470371
 Amount of Each Receipt this Period
 50.00
 Memo Item
 CONTRIBUTION

C. FLEISCHNER, DAVID, A., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 105 AVON RD
 City HAVERFORD State PA Zip Code 19041-1610
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) ASPLUNDH TREE EXPERT CO Occupation (for Individual) EXECUTIVE
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 5000.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 28 / 2016
Transaction ID : SA11A.449684
 Amount of Each Receipt this Period
 5000.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	5150.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1150 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. FLEISHMAN, MICHAEL, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 3300 NATIONAL CITY TOWER

City LOUISVILLE	State KY	Zip Code 40202-3119
--------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) BINGHAM GREENEBAUM DOLL	Occupation (for Individual) ATTORNEY
--	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
750.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
11	/	04	/	2016

Transaction ID : SA11A.472196

Amount of Each Receipt this Period
250.00

Memo Item
CONTRIBUTION

B. FLEMING, MICHAEL, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 979 OXFORD DRIVE

City ST. AUGUSTINE	State FL	Zip Code 32084-1827
-----------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) INFORMATION REQUESTED PER BEST EFFORTS	Occupation (for Individual) INFORMATION REQUESTED PER BE
---	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
500.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
10	/	28	/	2016

Transaction ID : SA11A.454746

Amount of Each Receipt this Period
500.00

Memo Item
CONTRIBUTION

C. FLEMING, WAYNE, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 200 JADE PARK

City CHELSEA	State AL	Zip Code 35043-8347
-----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) INFORMATION REQUESTED PER BEST EFFORTS	Occupation (for Individual) INFORMATION REQUESTED PER BE
---	---

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
250.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
11	/	03	/	2016

Transaction ID : SA11A.468664

Amount of Each Receipt this Period
250.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	1000.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1151 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. FLOECK SR., DANIEL, D., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 25914 PEREGRINE RIDGE
 City SAN ANTONIO State TX Zip Code 78260-3582
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 11 / 05 / 2016
Transaction ID : SA11A.479260
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

B. FLOOD, CARL, R., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 11695 OKEEFE CREEK BOULEVARD
 City MISSOULA State MT Zip Code 59808-8596
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 11 / 03 / 2016
Transaction ID : SA11A.465481
 Amount of Each Receipt this Period 200.00
 Memo Item CONTRIBUTION

C. FLORO, MARILYN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4176 ENGLISH HOLLY CIRCLE
 City RICHMOND State VA Zip Code 23294-5933
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 220.00

Date of Receipt 10 / 23 / 2016
Transaction ID : SA11A.446261
 Amount of Each Receipt this Period 30.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	480.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1152 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. FLORO, MARILYN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4176 ENGLISH HOLLY CIRCLE
 City RICHMOND State VA Zip Code 23294-5933
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 220.00

Date of Receipt 10 / 23 / 2016
Transaction ID : SA11A.446262
 Amount of Each Receipt this Period 30.00
 Memo Item CONTRIBUTION

B. FLORO, MARILYN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4176 ENGLISH HOLLY CIRCLE
 City RICHMOND State VA Zip Code 23294-5933
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 220.00

Date of Receipt 10 / 24 / 2016
Transaction ID : SA11A.449284
 Amount of Each Receipt this Period 60.00
 Memo Item CONTRIBUTION

C. FLOURNOY, JOHN, F., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 900 BROOKSTONE CENTER PARKWAY
 City COLUMBUS State GA Zip Code 31904-2987
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) FLOURNOY COMPANY Occupation (for Individual) REAL ESTATE BROKER
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt 11 / 02 / 2016
Transaction ID : SA11A.465945
 Amount of Each Receipt this Period 500.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	590.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1153 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. FLOWER, LUDLOW, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 157 BLACKBERRY HILL RD.
 City ORFORD State NH Zip Code 03777-4223
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 786.00

Date of Receipt **10 / 30 / 2016**
Transaction ID : SA11A.460155
 Amount of Each Receipt this Period 131.00
 Memo Item CONTRIBUTION

B. FLOWER, LUDLOW, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 157 BLACKBERRY HILL RD.
 City ORFORD State NH Zip Code 03777-4223
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 786.00

Date of Receipt **11 / 04 / 2016**
Transaction ID : SA11A.474170
 Amount of Each Receipt this Period 131.00
 Memo Item CONTRIBUTION

C. FLOYD, THOMAS, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 150 SHADY LANE
 City BARTLETT State IL Zip Code 60103-4532
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SAMURAI INVESTMENTS LLC Occupation (for Individual) EXECUTIVE
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt **11 / 05 / 2016**
Transaction ID : SA11A.479139
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	512.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1154 OF 4311
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Team Ryan

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
A. FLUNKER, BRUCE, G., MR.,

Mailing Address **7005 W LAFAYETTE PLACE**

City MEQUON	State WI	Zip Code 53092-1571
-----------------------	--------------------	-------------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) EBSO, INC.	Occupation (for Individual) INSURANCE
--	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
2500.00

Date of Receipt
10 / 31 / 2016

Transaction ID : SA11A.457454

Amount of Each Receipt this Period
1000.00

Memo Item
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
B. FLUNKER, BRUCE, G., MR.,

Mailing Address **7005 W LAFAYETTE PLACE**

City MEQUON	State WI	Zip Code 53092-1571
-----------------------	--------------------	-------------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) EBSO, INC.	Occupation (for Individual) INSURANCE
--	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
2500.00

Date of Receipt
11 / 04 / 2016

Transaction ID : SA11A.472208

Amount of Each Receipt this Period
250.00

Memo Item
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
C. FLYNN, VINCENT, , ,

Mailing Address **250 WEATHERSIDE ROAD**

City CHESHIRE	State CT	Zip Code 06410-4330
-------------------------	--------------------	-------------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) STATE OF CT	Occupation (for Individual) ATTORNEY
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
225.00

Date of Receipt
10 / 26 / 2016

Transaction ID : SA11A.447630

Amount of Each Receipt this Period
50.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	1300.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1155 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. FOERSTER, CHARLENE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 235 WILLOWBEND ST
 City HUNTSVILLE State TX Zip Code 77320-3423
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 750.00

Date of Receipt 10 / 23 / 2016
Transaction ID : SA11A.446569
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

B. FOERSTER, CHARLENE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 235 WILLOWBEND ST
 City HUNTSVILLE State TX Zip Code 77320-3423
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 750.00

Date of Receipt 10 / 31 / 2016
Transaction ID : SA11A.459218
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

C. FOERSTER, CHARLENE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 235 WILLOWBEND ST
 City HUNTSVILLE State TX Zip Code 77320-3423
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 750.00

Date of Receipt 11 / 04 / 2016
Transaction ID : SA11A.471718
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	100.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1156 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
Team Ryan

A. FOERSTER, CHARLENE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 235 WILLOWBEND ST
 City HUNTSVILLE State TX Zip Code 77320-3423
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 750.00

Date of Receipt 11 / 04 / 2016
Transaction ID : SA11A.473884
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

B. FOFF, JOHN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1212 MARIETTA DRIVE
 City AMBLER State PA Zip Code 19002-1527
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) FHLB-PGH Occupation (for Individual) BANKER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 10 / 30 / 2016
Transaction ID : SA11A.464917
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

C. FOLGER, WILLIAM, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 273 WINNERS CIR
 City RED LION State PA Zip Code 17356-8798
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 510.00

Date of Receipt 10 / 20 / 2016
Transaction ID : SA11A.444740
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 125.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1157 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
Team Ryan

A. FOLGER, WILLIAM, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 273 WINNERS CIR
 City RED LION State PA Zip Code 17356-8798
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 510.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 31 / 2016
Transaction ID : SA11A.459204
 Amount of Each Receipt this Period
 25.00
 Memo Item
 CONTRIBUTION

B. FOLGER, WILLIAM, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 273 WINNERS CIR
 City RED LION State PA Zip Code 17356-8798
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 510.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 02 / 2016
Transaction ID : SA11A.467027
 Amount of Each Receipt this Period
 25.00
 Memo Item
 CONTRIBUTION

C. FOLGER, WILLIAM, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 273 WINNERS CIR
 City RED LION State PA Zip Code 17356-8798
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 510.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 04 / 2016
Transaction ID : SA11A.472655
 Amount of Each Receipt this Period
 25.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	75.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1158 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
Team Ryan

A. FOLK, THOMAS, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2202 LILY DR
 City RUSTON State LA Zip Code 71270-2621
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 31 / 2016
Transaction ID : SA11A.459227
 Amount of Each Receipt this Period
 250.00
 Memo Item
 CONTRIBUTION

B. FOLKINS, SARA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 8790 RADFORD LN
 City SUWANEE State GA Zip Code 30024-6200
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 245.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 05 / 2016
Transaction ID : SA11A.479310
 Amount of Each Receipt this Period
 30.00
 Memo Item
 CONTRIBUTION

C. FONK, RICK, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5035 SCHOEN RD
 City UNION GROVE State WI Zip Code 53182-9703
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 555.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 04 / 2016
Transaction ID : SA11A.473229
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	380.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1159 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
-----------------------------	-----------------------------	-----------------------------

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NAME OF COMMITTEE (In Full)
Team Ryan

A. FORD, DICK, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 16 DOVERTON DRIVE
 City GREENWICH State CT Zip Code 06831-3318
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 550.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 31 / 2016
Transaction ID : SA11A.459173
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION

B. FORD, DICK, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 16 DOVERTON DRIVE
 City GREENWICH State CT Zip Code 06831-3318
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 550.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 04 / 2016
Transaction ID : SA11A.471620
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION

C. FORD, JOHN, E., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2250 HEARST WILLITS ROAD
 City WILLITS State CA Zip Code 95490-8705
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) RANCHER
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 25 / 2016
Transaction ID : SA11A.447293
 Amount of Each Receipt this Period
 200.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	400.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1160 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. FORD, JONATHAN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3323 W CONSTITUTION DR
 City CHANDLER State AZ Zip Code 85226-7603
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) EXPRESS SCRIPTS HOLDING COMPANY Occupation (for Individual) PHARMACIST
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 11 / 04 / 2016
Transaction ID : SA11A.479469
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

B. FORD, LYDIA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2304 BRITTANY AVE
 City MELISSA State TX Zip Code 75454-0166
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 270.00

Date of Receipt 10 / 28 / 2016
Transaction ID : SA11A.456058
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

C. FORD, LYDIA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2304 BRITTANY AVE
 City MELISSA State TX Zip Code 75454-0166
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 270.00

Date of Receipt 11 / 04 / 2016
Transaction ID : SA11A.473213
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 300.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1161 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. FORD, LYDIA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2304 BRITTANY AVE
 City MELISSA State TX Zip Code 75454-0166
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 270.00

Date of Receipt 11 / 07 / 2016
Transaction ID : SA11A.480385
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

B. FOREST, MARC, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4237 FIELDBROOK ROAD
 City WEST BLOOMFIELD State MI Zip Code 48323-3209
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 225.00

Date of Receipt 11 / 01 / 2016
Transaction ID : SA11A.462526
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

C. FOREST, MARC, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4237 FIELDBROOK ROAD
 City WEST BLOOMFIELD State MI Zip Code 48323-3209
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 225.00

Date of Receipt 11 / 04 / 2016
Transaction ID : SA11A.472882
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶ 125.00
TOTAL This Period (last page this line number only).....▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1162 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. FORSTED, DAVID, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 615 FARISTON DRIVE
 City WYNNEWOOD State PA Zip Code 19096-2506
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 11 / 05 / 2016
Transaction ID : SA11A.478777
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

B. FORSYTHE, JAMES, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 31 CYPRESS WAY
 City ROLLING HILLS ESTA State CA Zip Code 90274-3416
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 11 / 08 / 2016
Transaction ID : SA11A.467975
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

C. FOSDICK, THEODORE, D., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 7120 AUSTIN ROAD
 City SALINE State MI Zip Code 48176-9609
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) OMICRON INC Occupation (for Individual) MANUFACTURER
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 1250.00

Date of Receipt 10 / 20 / 2016
Transaction ID : SA11A.433392
 Amount of Each Receipt this Period 1000.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	1350.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1163 OF 4311
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. FOSS SR, ROBERT, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 285 GRANDE WAY
1104

City NAPLES State FL Zip Code 34110-6424

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt
10 / 20 / 2016
Transaction ID : SA11A.442542

Amount of Each Receipt this Period
250.00

Memo Item CONTRIBUTION

B. FOSSI, LAWRENCE, , MR.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 160 WEST 62ND STREET
APT 22G

City NEW YORK State NY Zip Code 10023-7532

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) LAWRENCE J FOSSI Occupation (for Individual) ADMINISTRATOR

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
600.00

Date of Receipt
10 / 24 / 2016
Transaction ID : SA11A.445613

Amount of Each Receipt this Period
250.00

Memo Item CONTRIBUTION

C. FOSTER, CARL, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 6970 N LEONARDO DA VINCI WAY

City TUCSON State AZ Zip Code 85704-3023

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
250.00

Date of Receipt
10 / 26 / 2016
Transaction ID : SA11A.454358

Amount of Each Receipt this Period
25.00

Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 525.00

TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1164 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. FOSTER, CARL, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 6970 N LEONARDO DA VINCI WAY
 City TUCSON State AZ Zip Code 85704-3023
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 26 / 2016
Transaction ID : SA11A.454359
 Amount of Each Receipt this Period
 25.00
 Memo Item
 CONTRIBUTION

B. FOSTER, CARL, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 6970 N LEONARDO DA VINCI WAY
 City TUCSON State AZ Zip Code 85704-3023
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 30 / 2016
Transaction ID : SA11A.459359
 Amount of Each Receipt this Period
 25.00
 Memo Item
 CONTRIBUTION

C. FOSTER, CARL, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 6970 N LEONARDO DA VINCI WAY
 City TUCSON State AZ Zip Code 85704-3023
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 02 / 2016
Transaction ID : SA11A.469423
 Amount of Each Receipt this Period
 25.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	75.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1165 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. FOSTER, RICHARD, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 19230 EVANS STREET SUITE 115

City ELK RIVER	State MN	Zip Code 55330-1079
-------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1250.00

Date of Receipt
MM / DD / YYYY
11 / 04 / 2016

Transaction ID : SA11A.470381

Amount of Each Receipt this Period
250.00

Memo Item CONTRIBUTION

B. FOSTER, RICHARD, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 19230 EVANS STREET SUITE 115

City ELK RIVER	State MN	Zip Code 55330-1079
-------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1250.00

Date of Receipt
MM / DD / YYYY
11 / 04 / 2016

Transaction ID : SA11A.470408

Amount of Each Receipt this Period
250.00

Memo Item CONTRIBUTION

C. FOSTER, RICHARD, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 19230 EVANS STREET SUITE 115

City ELK RIVER	State MN	Zip Code 55330-1079
-------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
1250.00

Date of Receipt
MM / DD / YYYY
11 / 04 / 2016

Transaction ID : SA11A.472692

Amount of Each Receipt this Period
250.00

Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	750.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 1166 OF 4311
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. FOSTER, RICHARD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 19230 EVANS STREET SUITE 115
 City ELK RIVER State MN Zip Code 55330-1079
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1250.00

Date of Receipt 11 / 07 / 2016
Transaction ID : SA11A.476173
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

B. FOTI, VICTOR, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4909 BUCKHORN ROAD
 City ROANOKE State VA Zip Code 24018-8605
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 900.00

Date of Receipt 11 / 07 / 2016
Transaction ID : SA11A.475151
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

C. FOULKS, CHARLES, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 603 CLIFF DRIVE
 City BELTON State TX Zip Code 76513-2404
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) CTVHCS Occupation (for Individual) PHYSICIAN
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 1500.00

Date of Receipt 11 / 02 / 2016
Transaction ID : SA11A.466435
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 450.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1167 OF 4311
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. FOULKES, CHARLES, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 603 CLIFF DRIVE

City BELTON	State TX	Zip Code 76513-2404
----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) CTVHCS	Occupation (for Individual) PHYSICIAN
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	07	/	2016

Transaction ID : SA11A.480262

Amount of Each Receipt this Period
100.00

Memo Item CONTRIBUTION

B. FOULKES, CHARLES, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 603 CLIFF DRIVE

City BELTON	State TX	Zip Code 76513-2404
----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) CTVHCS	Occupation (for Individual) PHYSICIAN
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	07	/	2016

Transaction ID : SA11A.480768

Amount of Each Receipt this Period
100.00

Memo Item CONTRIBUTION

C. FOUT, DOUG, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 7002 LAKEWOOD BOULEVARD

City DALLAS	State TX	Zip Code 75214-3558
----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) INFORMATION REQUESTED PER BEST EFFORTS	Occupation (for Individual) INFORMATION REQUESTED PER BEST EFFORTS
---	---

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	25	/	2016

Transaction ID : SA11A.447433

Amount of Each Receipt this Period
250.00

Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	450.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1168 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. FOWLER, RANDALL, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 507 PRINCE ALBERT STREET SE
 City KENTWOOD State MI Zip Code 49548-7648
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) USPS Occupation (for Individual) MAIL HANDLER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1500.00

Date of Receipt 11 / 02 / 2016
Transaction ID : SA11A.464988
 Amount of Each Receipt this Period 1000.00
 Memo Item CONTRIBUTION

B. FOWLIE, WENDY, L., DR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4413 COMMONWEALTH AVE
 City LA CANADA FLINTRID State CA Zip Code 91011-3332
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 600.00

Date of Receipt 10 / 25 / 2016
Transaction ID : SA11A.448835
 Amount of Each Receipt this Period 300.00
 Memo Item CONTRIBUTION

C. FOX , STEPHEN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO BOX 1899
 City CALHOUN State GA Zip Code 30703-1899
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) FOX & BRINDLE CONSTRUCTION Occupation (for Individual) CONSTRUCTION
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 225.00

Date of Receipt 10 / 26 / 2016
Transaction ID : SA11A.450665
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	1400.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1169 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
Team Ryan

A. FOX, STEPHEN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO BOX 1899
 City CALHOUN State GA Zip Code 30703-1899
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) FOX & BRINDLE CONSTRUCTION Occupation (for Individual) CONSTRUCTION
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 225.00

Date of Receipt 10 / 26 / 2016
Transaction ID : SA11A.450667
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

B. FRAKER, JACK, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 6327 MIMOSA LANE
 City DALLAS State TX Zip Code 75230-5134
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) CBRE Occupation (for Individual) VICE CHAIRMAN, MANAGING DIREC
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 375.00

Date of Receipt 10 / 20 / 2016
Transaction ID : SA11A.442451
 Amount of Each Receipt this Period 75.00
 Memo Item CONTRIBUTION

C. FRAKER, JACK, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 6327 MIMOSA LANE
 City DALLAS State TX Zip Code 75230-5134
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) CBRE Occupation (for Individual) VICE CHAIRMAN, MANAGING DIRECT
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 375.00

Date of Receipt 11 / 04 / 2016
Transaction ID : SA11A.472871
 Amount of Each Receipt this Period 75.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	250.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1170 OF 4311
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. FRANCE, BRIAN, Z., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1 DAYTONA BOULEVARD
 City DAYTONA BEACH State FL Zip Code 32114-1252
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NASCAR Occupation (for Individual) EXECUTIVE
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 125000.00

Date of Receipt 10 / 24 / 2016
Transaction ID : SA11A.443436
 Amount of Each Receipt this Period 25000.00
 Memo Item CONTRIBUTION

B. FRANCE, JAMES, C., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO BOX 2875
 City DAYTONA BEACH State FL Zip Code 32120-2875
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NASCAR INC Occupation (for Individual) VICE CHAIRMAN
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 125000.00

Date of Receipt 10 / 24 / 2016
Transaction ID : SA11A.443494
 Amount of Each Receipt this Period 25000.00
 Memo Item CONTRIBUTION

C. FRANCE, NANCY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1915 SEAN COURT
 City BROOKFIELD State WI Zip Code 53045-4840
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 230.00

Date of Receipt 11 / 04 / 2016
Transaction ID : SA11A.472573
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	50025.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1171 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. FRANCZYK, PHILLIP, B., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 11616 S. HUDSON CT.
 City TULSA State OK Zip Code 74137-8508
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 10 / 27 / 2016
Transaction ID : SA11A.453352
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

B. FRANCE, RALPH, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1 GLYNTREE GARTH
 City REISTERSTOWN State MD Zip Code 21136-1718
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 275.00

Date of Receipt 10 / 27 / 2016
Transaction ID : SA11A.457014
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

C. FRANCE, RALPH, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1 GLYNTREE GARTH
 City REISTERSTOWN State MD Zip Code 21136-1718
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 275.00

Date of Receipt 10 / 27 / 2016
Transaction ID : SA11A.457038
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶ 150.00
TOTAL This Period (last page this line number only).....▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1172 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
Team Ryan

A. FRANCE, SHERROD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address P O BOX 607
 City RAWLINS State WY Zip Code 82301-0607
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 425.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 31 / 2016
Transaction ID : SA11A.458484
 Amount of Each Receipt this Period
 50.00
 Memo Item
 CONTRIBUTION

B. FRANCE, SHERROD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address P O BOX 607
 City RAWLINS State WY Zip Code 82301-0607
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 425.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 31 / 2016
Transaction ID : SA11A.458499
 Amount of Each Receipt this Period
 50.00
 Memo Item
 CONTRIBUTION

C. FRANCE, SHERROD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address P O BOX 607
 City RAWLINS State WY Zip Code 82301-0607
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 425.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 30 / 2016
Transaction ID : SA11A.459869
 Amount of Each Receipt this Period
 50.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	150.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1173 OF 4311
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. FRANKEL, ALAN, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 54 GATEWAY DRIVE

City GREAT NECK	State NY	Zip Code 11021-1835
--------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) FRANKEL LOUGHRAN STARR & VALLONE LLP	Occupation (for Individual) C.P.A.
---	---------------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		27		2016

Transaction ID : SA11A.452406

Amount of Each Receipt this Period
250.00

Memo Item
CONTRIBUTION

B. FRANKS, ALAN, L., MR.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 3045 MARINA BAY
2203

City LEAGUE CITY	State TX	Zip Code 77573-2754
---------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) CRAZY ALAN'S SWAMP SHACK	Occupation (for Individual) RESTAURANT OWNER
---	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1482.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		27		2016

Transaction ID : SA11A.453823

Amount of Each Receipt this Period
247.00

Memo Item
CONTRIBUTION

C. FRANKLIN, EDWARD, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 275 CENTRAL PARK WEST
19B

City NEW YORK	State NY	Zip Code 10024-3015
------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
1100.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		20		2016

Transaction ID : SA11A.442124

Amount of Each Receipt this Period
250.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	747.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1174 OF 4311
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. FRANK, MATTHEW, H., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO BOX 56
 City HARRISON State ME Zip Code 04040-0056
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt **10 / 31 / 2016**
Transaction ID : SA11A.457288
 Amount of Each Receipt this Period 500.00
 Memo Item CONTRIBUTION

B. FRANSCIONI, KATHY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 22772 ORDONEZ DRIVE
 City SALINAS State CA Zip Code 93908-1032
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SMD VINEYARDS Occupation (for Individual) RF WINES LLC
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt **11 / 04 / 2016**
Transaction ID : SA11A.471743
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

C. FRANSSON, MARTHA, C., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 11 DODGE DRIVE
 City WEST HARTFORD State CT Zip Code 06107-1009
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 4050.00

Date of Receipt **10 / 20 / 2016**
Transaction ID : SA11A.444747
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	850.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1175 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. FRANSSON, MARTHA, C., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 11 DODGE DRIVE
 City WEST HARTFORD State CT Zip Code 06107-1009
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 4050.00

Date of Receipt 10 / 20 / 2016
Transaction ID : SA11A.444748
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

B. FRANSSON, MARTHA, C., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 11 DODGE DRIVE
 City WEST HARTFORD State CT Zip Code 06107-1009
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 4050.00

Date of Receipt 10 / 29 / 2016
Transaction ID : SA11A.461136
 Amount of Each Receipt this Period 300.00
 Memo Item CONTRIBUTION

C. FRANSSON, MARTHA, C., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 11 DODGE DRIVE
 City WEST HARTFORD State CT Zip Code 06107-1009
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 4050.00

Date of Receipt 11 / 04 / 2016
Transaction ID : SA11A.470707
 Amount of Each Receipt this Period 300.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	850.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1176 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. FRANSSON, MARTHA, C., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 11 DODGE DRIVE
 City WEST HARTFORD State CT Zip Code 06107-1009
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 4050.00

Date of Receipt 11 / 04 / 2016
Transaction ID : SA11A.473542
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

B. FRANSSON, MARTHA, C., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 11 DODGE DRIVE
 City WEST HARTFORD State CT Zip Code 06107-1009
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 4050.00

Date of Receipt 11 / 05 / 2016
Transaction ID : SA11A.478872
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

C. FRANZ, MARILYN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1470 CANDLEWOOD DRIVE
 City PITTSBURGH State PA Zip Code 15241-2955
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 360.00

Date of Receipt 10 / 28 / 2016
Transaction ID : SA11A.456115
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	525.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1177 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. FRANZ, MARILYN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1470 CANDLEWOOD DRIVE
 City PITTSBURGH State PA Zip Code 15241-2955
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 360.00

Date of Receipt
 11 / 03 / 2016
Transaction ID : SA11A.469139
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

B. FRANZ, MARILYN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1470 CANDLEWOOD DRIVE
 City PITTSBURGH State PA Zip Code 15241-2955
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 360.00

Date of Receipt
 11 / 03 / 2016
Transaction ID : SA11A.469142
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

C. FRANZ, MARILYN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1470 CANDLEWOOD DRIVE
 City PITTSBURGH State PA Zip Code 15241-2955
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 360.00

Date of Receipt
 11 / 04 / 2016
Transaction ID : SA11A.473865
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	75.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1178 OF 4311
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
Team Ryan

A. FRASCO, SCOTT, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 19167 CHANDON LN

City HUNTINGTON BEACH	State CA	Zip Code 92648-2146
FEC ID number of contributing federal political committee. C		
Name of Employer (for Individual) IRON GRIP		Occupation (for Individual) EXECUTIVE
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 275.00

Date of Receipt
10 / 27 / 2016
Transaction ID : SA11A.454076

Amount of Each Receipt this Period
25.00

Memo Item CONTRIBUTION

B. FRASER, NORMA, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 320 S. NINE DR

City PV BEACH	State FL	Zip Code 32082-3728
FEC ID number of contributing federal political committee. C		
Name of Employer (for Individual) NONE		Occupation (for Individual) RETIRED
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 350.00

Date of Receipt
10 / 20 / 2016
Transaction ID : SA11A.442457

Amount of Each Receipt this Period
50.00

Memo Item CONTRIBUTION

C. FRASER, NORMA, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 320 S. NINE DR

City PV BEACH	State FL	Zip Code 32082-3728
FEC ID number of contributing federal political committee. C		
Name of Employer (for Individual) NONE		Occupation (for Individual) RETIRED
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		Aggregate Year-to-Date ▼ 350.00

Date of Receipt
10 / 29 / 2016
Transaction ID : SA11A.460818

Amount of Each Receipt this Period
100.00

Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	175.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1179 OF 4311
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. FRASER, NORMA, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 320 S. NINE DR

City PV BEACH State FL Zip Code 32082-3728

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
350.00

Date of Receipt
11 / 04 / 2016
Transaction ID : SA11A.472968

Amount of Each Receipt this Period
50.00

Memo Item CONTRIBUTION

B. FRAYN, ROBERT, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 2212 HARVARD AVE EAST

City SEATTLE State WA Zip Code 98102-4155

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
300.00

Date of Receipt
10 / 20 / 2016
Transaction ID : SA11A.442231

Amount of Each Receipt this Period
100.00

Memo Item CONTRIBUTION

C. FRAYN, ROBERT, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 2212 HARVARD AVE EAST

City SEATTLE State WA Zip Code 98102-4155

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
300.00

Date of Receipt
11 / 05 / 2016
Transaction ID : SA11A.478410

Amount of Each Receipt this Period
100.00

Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 250.00

TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1180 OF 4311
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. FRAZIER, DENNIS, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 37 FAIRWAY OAKS LANE

City ISLE OF PALMS	State SC	Zip Code 29451-2832
-----------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
225.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		31		2016

Transaction ID : SA11A.459190

Amount of Each Receipt this Period
25.00

Memo Item CONTRIBUTION

B. FRAZIER, DENNIS, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 37 FAIRWAY OAKS LANE

City ISLE OF PALMS	State SC	Zip Code 29451-2832
-----------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
225.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11		04		2016

Transaction ID : SA11A.473727

Amount of Each Receipt this Period
25.00

Memo Item CONTRIBUTION

C. FRAZIER, DIANA, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 46A ANCHOR DRIVE

City KEY LARGO	State FL	Zip Code 33037-5283
-------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
1100.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		23		2016

Transaction ID : SA11A.449610

Amount of Each Receipt this Period
100.00

Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	150.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1181 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13 <input type="checkbox"/> 11b <input type="checkbox"/> 14 <input type="checkbox"/> 11c <input type="checkbox"/> 15 <input type="checkbox"/> 12 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. FRAZIER, DIANA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 46A ANCHOR DRIVE
 City KEY LARGO State FL Zip Code 33037-5283
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1100.00

Date of Receipt 10 / 23 / 2016
Transaction ID : SA11A.449611
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

B. FRAZIER, DIANA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 46A ANCHOR DRIVE
 City KEY LARGO State FL Zip Code 33037-5283
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1100.00

Date of Receipt 10 / 28 / 2016
Transaction ID : SA11A.456118
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

C. FRAZIER, DIANA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 46A ANCHOR DRIVE
 City KEY LARGO State FL Zip Code 33037-5283
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1100.00

Date of Receipt 11 / 04 / 2016
Transaction ID : SA11A.471339
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	300.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1182 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. FRAZIER, DIANA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 46A ANCHOR DRIVE
 City KEY LARGO State FL Zip Code 33037-5283
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1100.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 04 / 2016
Transaction ID : SA11A.472337
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION

B. FRAZIER III, WILLIAM, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4155 VENETIA BLVD
 City JACKSONVILLE State FL Zip Code 32210-8505
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) FRAZIER & FRAZIER Occupation (for Individual) ATTORNEY
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 22 / 2016
Transaction ID : SA11A.446777
 Amount of Each Receipt this Period
 500.00
 Memo Item
 CONTRIBUTION

C. FRECK, MERRILL, D., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5705 FAYETTEVILLE RD 2202
 City DURHAM State NC Zip Code 27713-5318
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 350.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 24 / 2016
Transaction ID : SA11A.443966
 Amount of Each Receipt this Period
 50.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	650.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1183 OF 4311
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. FRECK, MERRILL, D., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5705 FAYETTEVILLE RD
 2202
 City DURHAM State NC Zip Code 27713-5318
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 350.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 27 / 2016
Transaction ID : SA11A.452761
 Amount of Each Receipt this Period
 50.00
 Memo Item
 CONTRIBUTION

B. FRECK, MERRILL, D., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5705 FAYETTEVILLE RD
 2202
 City DURHAM State NC Zip Code 27713-5318
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 350.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 01 / 2016
Transaction ID : SA11A.462367
 Amount of Each Receipt this Period
 50.00
 Memo Item
 CONTRIBUTION

C. FRECK, MERRILL, D., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5705 FAYETTEVILLE RD
 2202
 City DURHAM State NC Zip Code 27713-5318
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 350.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 05 / 2016
Transaction ID : SA11A.479123
 Amount of Each Receipt this Period
 50.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	150.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 1184 OF 4311
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. FREDENBURG, MARK, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 25 CERVANTES BOULEVARD
 APT 202
 City SAN FRANCISCO State CA Zip Code 94123-1660
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Occupation (for Individual)
 WELLS FARGO PORTFOLIO MANAGER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼
 500.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 28 / 2016
Transaction ID : SA11A.454813
 Amount of Each Receipt this Period
 500.00
 Memo Item
 CONTRIBUTION

B. FREDRICKSON, ALLEN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1219 S 194TH ST
 City OMAHA State NE Zip Code 68130-3767
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Occupation (for Individual)
 SIGNATURE PERFORMANCE PRESIDENT/CEO
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼
 1000.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 22 / 2016
Transaction ID : SA11A.446923
 Amount of Each Receipt this Period
 500.00
 Memo Item
 CONTRIBUTION

C. FREEMAN, KENT, L., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 324 COPE RIDGE COURT
 City ROSEVILLE State CA Zip Code 95747-8055
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Occupation (for Individual)
 SELF EMPLOYED RESCUE INSTRUCTOR
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼
 305.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 24 / 2016
Transaction ID : SA11A.444004
 Amount of Each Receipt this Period
 35.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 1035.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1185 OF 4311
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. FREIDENRICH, ROBERT, G., MR.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 120 W COMMERCIAL AVENUE

City MOONACHIE	State NJ	Zip Code 07074-1703
-------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) BIO COMPRESSION SYSTEM INC	Occupation (for Individual) CEO
---	------------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	01	/	2016

Transaction ID : SA11A.461544

Amount of Each Receipt this Period
1000.00

Memo Item
CONTRIBUTION

B. FREIENMUTH, WILLIAM, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 903 WESLEY DRIVE UNIT D

City WAYNESBORO	State PA	Zip Code 17268-7996
--------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	21	/	2016

Transaction ID : SA11A.444189

Amount of Each Receipt this Period
25.00

Memo Item
CONTRIBUTION

C. FREIENMUTH, WILLIAM, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 903 WESLEY DRIVE UNIT D

City WAYNESBORO	State PA	Zip Code 17268-7996
--------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	25	/	2016

Transaction ID : SA11A.449014

Amount of Each Receipt this Period
25.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	1050.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1186 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. FREIENMUTH, WILLIAM, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 903 WESLEY DRIVE UNIT D
 City WAYNESBORO State PA Zip Code 17268-7996
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 10 / 25 / 2016
Transaction ID : SA11A.449016
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

B. FREIENMUTH, WILLIAM, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 903 WESLEY DRIVE UNIT D
 City WAYNESBORO State PA Zip Code 17268-7996
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 10 / 31 / 2016
Transaction ID : SA11A.457915
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

C. FREIENMUTH, WILLIAM, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 903 WESLEY DRIVE UNIT D
 City WAYNESBORO State PA Zip Code 17268-7996
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 10 / 31 / 2016
Transaction ID : SA11A.457944
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶ 125.00
TOTAL This Period (last page this line number only).....▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1187 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. FREIENMUTH, WILLIAM, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 903 WESLEY DRIVE UNIT D
 City WAYNESBORO State PA Zip Code 17268-7996
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 10 / 31 / 2016
Transaction ID : SA11A.457945
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

B. FREITAS, KEITH, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2120 CAREY AVENUE
 City CHEYENNE State WY Zip Code 82001-3602
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 11 / 04 / 2016
Transaction ID : SA11A.473750
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

C. FRELINGHUYSEN JR, J, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 7106 SE GOLF RIDGE WAY
 City HOBE SOUND State FL Zip Code 33455-8046
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 750.00

Date of Receipt 10 / 22 / 2016
Transaction ID : SA11A.449660
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	400.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1188 OF 4311
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
Team Ryan

A. FRELINGHUYSEN JR, J, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 7106 SE GOLF RIDGE WAY
 City HOBE SOUND State FL Zip Code 33455-8046
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 750.00

Date of Receipt **10 / 22 / 2016**
Transaction ID : SA11A.449661
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

B. FREMSTAD, THURMAN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5215 HERITAGE COURT NE
 City TACOMA State WA Zip Code 98422-4558
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 205.00

Date of Receipt **11 / 04 / 2016**
Transaction ID : SA11A.472611
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

C. FRENCH, DALE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 7807 LONG PONT ROAD SUITE 210
 City HOUSTON State TX Zip Code 77055-3694
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) REAL ESTATE
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt **10 / 27 / 2016**
Transaction ID : SA11A.452268
 Amount of Each Receipt this Period 500.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 775.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1189 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. FRENCH, ELISABETH, R., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2122 MASSACHUSETTS AVENUE NW
 APT 312
 City WASHINGTON State DC Zip Code 20008-2827
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 625.00

Date of Receipt 10 / 20 / 2016
Transaction ID : SA11A.433400
 Amount of Each Receipt this Period 125.00
 Memo Item CONTRIBUTION

B. FRENCH, MARCIA, F., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address P.O. BOX 11327
 City MIDLAND State TX Zip Code 79702-8327
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) OIL
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 7500.00

Date of Receipt 10 / 24 / 2016
Transaction ID : SA11A.443446
 Amount of Each Receipt this Period 5000.00
 Memo Item CONTRIBUTION

C. FRENCH, MORTON, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 570 OCEAN DRIVE
 802
 City JUNO BEACH State FL Zip Code 33408-1952
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 1100.00

Date of Receipt 10 / 21 / 2016
Transaction ID : SA11A.447223
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	5225.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1190 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
Team Ryan

A. FRERICH, RICHARD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1498 CAMERON LANE
 City WICHITA FALLS State TX Zip Code 76305-7201
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SEALEDAIR CORP Occupation (for Individual) ELECTRONICS CRAFTSMAN
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date **425.00**

Date of Receipt **10 / 25 / 2016**
Transaction ID : SA11A.448862
 Amount of Each Receipt this Period **50.00**
 Memo Item CONTRIBUTION

B. FREY, DOUGLAS, E., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 55207 BROUGHTON
 City CHAPEL HILL State NC Zip Code 27517-8560
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date **300.00**

Date of Receipt **10 / 25 / 2016**
Transaction ID : SA11A.448856
 Amount of Each Receipt this Period **100.00**
 Memo Item CONTRIBUTION

C. FREY, DOUGLAS, E., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 55207 BROUGHTON
 City CHAPEL HILL State NC Zip Code 27517-8560
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date **300.00**

Date of Receipt **11 / 04 / 2016**
Transaction ID : SA11A.472524
 Amount of Each Receipt this Period **100.00**
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	250.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1191 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name A. FRICK, JACK, , ,		Date of Receipt M M M / D D D / Y Y Y Y Y Y 10 / 31 / 2016
Mailing Address 5965 PIER PLACE DRIVE		Transaction ID : SA11A.457245
City LAKELAND	State FL	Zip Code 33813-3731
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 500.00
Name of Employer (for Individual) SELF EMPLOYED	Occupation (for Individual) RANCHER	<input type="checkbox"/> Memo Item CONTRIBUTION
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00	

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name B. FRIDIRICI , JOHN, , ,		Date of Receipt M M M / D D D / Y Y Y Y Y Y 10 / 31 / 2016
Mailing Address 4750 SOMERSET COURT		Transaction ID : SA11A.458758
City BROOKFIELD	State WI	Zip Code 53045-
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 100.00
Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED	<input type="checkbox"/> Memo Item CONTRIBUTION
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 800.00	

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name C. FRIEDBERG, BARRY, S., MR,		Date of Receipt M M M / D D D / Y Y Y Y Y Y 10 / 20 / 2016
Mailing Address 134 E 71ST ST		Transaction ID : SA11A.433379
City NEW YORK	State NY	Zip Code 10021-5011
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 5000.00
Name of Employer (for Individual) FRIEDBERG MILSTEIN	Occupation (for Individual) FINANCE	<input type="checkbox"/> Memo Item CONTRIBUTION
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Aggregate Year-to-Date ▼ 10000.00	

SUBTOTAL of Receipts This Page (optional).....▶	5600.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1192 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. FRIEDMAN, CAROL, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 43503 BUTLER PLACE
 City LEESBURG State VA Zip Code 20176-7428
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1150.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 24 / 2016
Transaction ID : SA11A.445917
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION

B. FRIEDMAN, CAROL, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 43503 BUTLER PLACE
 City LEESBURG State VA Zip Code 20176-7428
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1150.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 26 / 2016
Transaction ID : SA11A.450018
 Amount of Each Receipt this Period
 200.00
 Memo Item
 CONTRIBUTION

C. FRIEDMAN, DAVID, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 11940 JUSTAMERE LANE
 City DADE CITY State FL Zip Code 33525-8243
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) DENTIST
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 325.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 28 / 2016
Transaction ID : SA11A.456100
 Amount of Each Receipt this Period
 25.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	325.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1193 OF 4311
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. FRIEDMAN, DAVID, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 11940 JUSTAMERE LANE

City DADE CITY	State FL	Zip Code 33525-8243
-------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) SELF EMPLOYED	Occupation (for Individual) DENTIST
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
325.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11		04		2016

Transaction ID : SA11A.471419

Amount of Each Receipt this Period
25.00

Memo Item CONTRIBUTION

B. FRIEDMAN, DAVID, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 11940 JUSTAMERE LANE

City DADE CITY	State FL	Zip Code 33525-8243
-------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) SELF EMPLOYED	Occupation (for Individual) DENTIST
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
325.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11		04		2016

Transaction ID : SA11A.473940

Amount of Each Receipt this Period
50.00

Memo Item CONTRIBUTION

C. FRIEDMAN, J, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 150 WEST 30TH ST
19

City NEW YORK	State NY	Zip Code 10001-4003
------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
600.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		31		2016

Transaction ID : SA11A.464118

Amount of Each Receipt this Period
100.00

Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	175.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1194 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. FRIEDMAN, J, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 150 WEST 30TH ST
 19
 City NEW YORK State NY Zip Code 10001-4003
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 600.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 02 / 2016
Transaction ID : SA11A.465857
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION

B. FRIEDRICH, REINY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 619 EAST LINCOLN WAY
 City AMES State IA Zip Code 50010-6520
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 295.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 02 / 2016
Transaction ID : SA11A.466261
 Amount of Each Receipt this Period
 25.00
 Memo Item
 CONTRIBUTION

C. FRIEDRICH, REINY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 619 EAST LINCOLN WAY
 City AMES State IA Zip Code 50010-6520
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For:
 Primary General
 Other (specify)
 Aggregate Year-to-Date ▼
 295.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 02 / 2016
Transaction ID : SA11A.466262
 Amount of Each Receipt this Period
 25.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶ 150.00
TOTAL This Period (last page this line number only).....▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1195 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. FRIEDMAN, ROGER, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 150 WEST 30TH ST
 19
 City NY State NY Zip Code 10001-4003
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1176.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 22 / 2016
Transaction ID : SA11A.446879
 Amount of Each Receipt this Period
 50.00
 Memo Item CONTRIBUTION

B. FRIEDMAN, ROGER, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 150 WEST 30TH ST
 19
 City NY State NY Zip Code 10001-4003
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1176.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 04 / 2016
Transaction ID : SA11A.471046
 Amount of Each Receipt this Period
 50.00
 Memo Item CONTRIBUTION

C. FRIEDMAN, ROGER, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 150 WEST 30TH ST
 19
 City NY State NY Zip Code 10001-4003
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1176.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 07 / 2016
Transaction ID : SA11A.474915
 Amount of Each Receipt this Period
 100.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	200.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1196 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. FRIEDMAN, ROGER, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 150 WEST 30TH ST
 19
 City NY State NY Zip Code 10001-4003
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1176.00

Date of Receipt
 11 / 06 / 2016
Transaction ID : SA11A.476831
 Amount of Each Receipt this Period
 50.00
 Memo Item CONTRIBUTION

B. FRIEDMAN, ROGER, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 150 WEST 30TH ST
 19
 City NY State NY Zip Code 10001-4003
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1176.00

Date of Receipt
 11 / 04 / 2016
Transaction ID : SA11A.479599
 Amount of Each Receipt this Period
 75.00
 Memo Item CONTRIBUTION

C. FRIEDMAN, ROGER, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 150 WEST 30TH ST
 19
 City NY State NY Zip Code 10001-4003
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1176.00

Date of Receipt
 11 / 07 / 2016
Transaction ID : SA11A.479990
 Amount of Each Receipt this Period
 751.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	876.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1197 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. FRIENDS, VERNE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 849 MELLOWOOD AVE
 City ORLANDO State FL Zip Code 32825-8086
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 25 / 2016
Transaction ID : SA11A.451886
 Amount of Each Receipt this Period
 50.00
 Memo Item
 CONTRIBUTION

B. FRIENDS, VERNE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 849 MELLOWOOD AVE
 City ORLANDO State FL Zip Code 32825-8086
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 01 / 2016
Transaction ID : SA11A.462305
 Amount of Each Receipt this Period
 50.00
 Memo Item
 CONTRIBUTION

C. FRIENDS, VERNE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 849 MELLOWOOD AVE
 City ORLANDO State FL Zip Code 32825-8086
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 02 / 2016
Transaction ID : SA11A.466362
 Amount of Each Receipt this Period
 50.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	150.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1198 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. FRIERSON, PATTIE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 551 PINE VALLEY RD
 City MARIETTA State GA Zip Code 30067-4827
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 10 / 26 / 2016
Transaction ID : SA11A.451230
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

B. FRIESEN, HOLLY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3159 ELLA
 City MANHATTAN State KS Zip Code 66502-2012
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) HOLLY FRIESEN Occupation (for Individual) DRAWING INSTRUCTOR/HOMEMAKI
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 325.00

Date of Receipt 10 / 28 / 2016
Transaction ID : SA11A.456285
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

C. FRIESEN, HOLLY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3159 ELLA
 City MANHATTAN State KS Zip Code 66502-2012
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) HOLLY FRIESEN Occupation (for Individual) DRAWING INSTRUCTOR/HOMEMAKE
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 325.00

Date of Receipt 10 / 28 / 2016
Transaction ID : SA11A.456286
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 300.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1199 OF 4311
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. FRITH, WESLEY, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 5 SUGAN CLOSE

City NEW HOPE	State PA	Zip Code 18938-9637
------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
325.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		20		2016

Transaction ID : SA11A.442070

Amount of Each Receipt this Period
25.00

Memo Item
CONTRIBUTION

B. FRITH, WESLEY, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 5 SUGAN CLOSE

City NEW HOPE	State PA	Zip Code 18938-9637
------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
325.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		28		2016

Transaction ID : SA11A.455660

Amount of Each Receipt this Period
25.00

Memo Item
CONTRIBUTION

C. FRITH, WESLEY, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 5 SUGAN CLOSE

City NEW HOPE	State PA	Zip Code 18938-9637
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
325.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11		01		2016

Transaction ID : SA11A.462424

Amount of Each Receipt this Period
25.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	75.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1200 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. FRITH, WESLEY, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 5 SUGAN CLOSE

City NEW HOPE	State PA	Zip Code 18938-9637
------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
325.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	02	/	2016

Transaction ID : SA11A.467021

Amount of Each Receipt this Period
25.00

Memo Item CONTRIBUTION

B. FRITH, WESLEY, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 5 SUGAN CLOSE

City NEW HOPE	State PA	Zip Code 18938-9637
------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
325.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	07	/	2016

Transaction ID : SA11A.476474

Amount of Each Receipt this Period
25.00

Memo Item CONTRIBUTION

C. FRITZLER, MARK, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 2301 S ALTHEA

City WASILLA	State AK	Zip Code 99654-8505
-----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) WILLOW SELF STORAGE	Occupation (for Individual) RENTAL
--	---------------------------------------

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
450.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	28	/	2016

Transaction ID : SA11A.455507

Amount of Each Receipt this Period
100.00

Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	150.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1201 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. FRITZLER, MARK, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 2301 S ALTHEA

City WASILLA	State AK	Zip Code 99654-8505
-----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) WILLOW SELF STORAGE	Occupation (for Individual) RENTAL
--	---------------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
450.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	02	/	2016

Transaction ID : SA11A.469672

Amount of Each Receipt this Period
100.00

Memo Item
CONTRIBUTION

B. FRITZLER, MARK, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 2301 S ALTHEA

City WASILLA	State AK	Zip Code 99654-8505
-----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) WILLOW SELF STORAGE	Occupation (for Individual) RENTAL
--	---------------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
450.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	04	/	2016

Transaction ID : SA11A.471170

Amount of Each Receipt this Period
100.00

Memo Item
CONTRIBUTION

C. FRITZLER, MARK, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 2301 S ALTHEA

City WASILLA	State AK	Zip Code 99654-8505
-----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) WILLOW SELF STORAGE	Occupation (for Individual) RENTAL
--	---------------------------------------

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
450.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	04	/	2016

Transaction ID : SA11A.473032

Amount of Each Receipt this Period
25.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	225.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1202 OF 4311
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. FROMMER, RICHARD, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 61 FAIRWAY DRIVE

City LITTLETON	State CO	Zip Code 80123-6648
-------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) GWOGCO	Occupation (for Individual) GEOLOGIST
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1050.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		20		2016

Transaction ID : SA11A.444841

Amount of Each Receipt this Period
1000.00

Memo Item
CONTRIBUTION

B. FROMMER, RICHARD, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 61 FAIRWAY DRIVE

City LITTLETON	State CO	Zip Code 80123-6648
-------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) GWOGCO	Occupation (for Individual) GEOLOGIST
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1050.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		31		2016

Transaction ID : SA11A.458646

Amount of Each Receipt this Period
50.00

Memo Item
CONTRIBUTION

C. FRUCHEY, DAVID, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 10615 MONTE VISTA COURT

City FORT WAYNE	State IN	Zip Code 46814-9069
--------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) DON R. FRUCHEY INC	Occupation (for Individual) VP
---	-----------------------------------

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
1000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		28		2016

Transaction ID : SA11A.454745

Amount of Each Receipt this Period
1000.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	2050.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1203 OF 4311
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. FRUSHON, RONALD, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1001 OTTER MILL WAY

City SUN CITY CENTER	State FL	Zip Code 33573-7045
-------------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	25	/	2016

Transaction ID : SA11A.448155

Amount of Each Receipt this Period
50.00

Memo Item CONTRIBUTION

B. FRUSHON, RONALD, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1001 OTTER MILL WAY

City SUN CITY CENTER	State FL	Zip Code 33573-7045
-------------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	04	/	2016

Transaction ID : SA11A.474250

Amount of Each Receipt this Period
50.00

Memo Item CONTRIBUTION

C. FRY, HAROLD, P., MR.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 605 N. WILLOW STREET

City KENT	State OH	Zip Code 44240-2620
--------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
370.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	25	/	2016

Transaction ID : SA11A.451748

Amount of Each Receipt this Period
50.00

Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	150.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1204 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. FRY, HAROLD, P., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 605 N. WILLOW STREET
 City KENT State OH Zip Code 44240-2620
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 370.00

Date of Receipt 10 / 31 / 2016
Transaction ID : SA11A.463484
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

B. FRY, HAROLD, P., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 605 N. WILLOW STREET
 City KENT State OH Zip Code 44240-2620
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 370.00

Date of Receipt 11 / 06 / 2016
Transaction ID : SA11A.476834
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

C. FRY, HAROLD, P., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 605 N. WILLOW STREET
 City KENT State OH Zip Code 44240-2620
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 370.00

Date of Receipt 11 / 07 / 2016
Transaction ID : SA11A.480164
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 150.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1205 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. FRY, MICHAEL, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2005 KITTRIDGE AVE
 City COLORADO SPRINGS State CO Zip Code 80919-3889
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) BROADCOM LTD Occupation (for Individual) MANAGER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 450.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 23 / 2016
Transaction ID : SA11A.446348
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION

B. FRY, MICHAEL, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2005 KITTRIDGE AVE
 City COLORADO SPRINGS State CO Zip Code 80919-3889
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) BROADCOM LTD Occupation (for Individual) MANAGER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 450.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 25 / 2016
Transaction ID : SA11A.451592
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION

C. FUDGE, BETTY, K., MS.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 202 KELLY DRIVE
 City VICTORIA State TX Zip Code 77904-1540
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) RADIO TOWER RENTAL
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 482.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 20 / 2016
Transaction ID : SA11A.442267
 Amount of Each Receipt this Period
 25.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	225.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1206 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. FUDGE, BETTY, K., MS.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 202 KELLY DRIVE

City VICTORIA	State TX	Zip Code 77904-1540
------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) SELF EMPLOYED	Occupation (for Individual) RADIO TOWER RENTAL
--	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
482.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	22	/	2016

Transaction ID : SA11A.446816

Amount of Each Receipt this Period
25.00

Memo Item
CONTRIBUTION

B. FUDGE, BETTY, K., MS.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 202 KELLY DRIVE

City VICTORIA	State TX	Zip Code 77904-1540
------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) SELF EMPLOYED	Occupation (for Individual) RADIO TOWER RENTAL
--	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
482.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	26	/	2016

Transaction ID : SA11A.450796

Amount of Each Receipt this Period
25.00

Memo Item
CONTRIBUTION

C. FUDGE, BETTY, K., MS.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 202 KELLY DRIVE

City VICTORIA	State TX	Zip Code 77904-1540
------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) SELF EMPLOYED	Occupation (for Individual) RADIO TOWER RENTAL
--	---

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
482.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	26	/	2016

Transaction ID : SA11A.450863

Amount of Each Receipt this Period
30.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	80.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1207 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. FUDGE, BETTY, K., MS.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 202 KELLY DRIVE
 City VICTORIA State TX Zip Code 77904-1540
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) RADIO TOWER RENTAL
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 482.00

Date of Receipt 10 / 30 / 2016
Transaction ID : SA11A.460059
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

B. FUDGE, BETTY, K., MS.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 202 KELLY DRIVE
 City VICTORIA State TX Zip Code 77904-1540
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) RADIO TOWER RENTAL
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 482.00

Date of Receipt 11 / 04 / 2016
Transaction ID : SA11A.471688
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

C. FUERST, FRANK, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 13550 HEATHCOTE BLVD 143
 City GAINESVILLE State VA Zip Code 20155-6681
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 625.00

Date of Receipt 10 / 30 / 2016
Transaction ID : SA11A.459615
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶ 150.00
TOTAL This Period (last page this line number only).....▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1208 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. FUERST, FRANK, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 13550 HEATHCOTE BLVD
 143
 City GAINESVILLE State VA Zip Code 20155-6681
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 625.00

Date of Receipt
 11 / 04 / 2016
Transaction ID : SA11A.472942
 Amount of Each Receipt this Period
 25.00
 Memo Item CONTRIBUTION

B. FULDNER, CHRIS, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 6198 LAWRENCE 2240
 City MONETT State MO Zip Code 65708-9504
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1200.00

Date of Receipt
 10 / 26 / 2016
Transaction ID : SA11A.450652
 Amount of Each Receipt this Period
 250.00
 Memo Item CONTRIBUTION

C. FULDNER, CHRIS, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 6198 LAWRENCE 2240
 City MONETT State MO Zip Code 65708-9504
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1200.00

Date of Receipt
 10 / 26 / 2016
Transaction ID : SA11A.450653
 Amount of Each Receipt this Period
 250.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	525.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1209 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. FULDNER, CHRIS, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 6198 LAWRENCE 2240
 City MONETT State MO Zip Code 65708-9504
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1200.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 04 / 2016
Transaction ID : SA11A.474003
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION

B. FULKERSON, JAYME, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 307 S ONE MILE RD
 City DEXTER State MO Zip Code 63841-1831
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) COUNTY WIDE INSURANCE Occupation (for Individual) INSURANCE AGENT
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 227.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 22 / 2016
Transaction ID : SA11A.446899
 Amount of Each Receipt this Period
 25.00
 Memo Item
 CONTRIBUTION

C. FULKERSON, JAYME, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 307 S ONE MILE RD
 City DEXTER State MO Zip Code 63841-1831
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) COUNTY WIDE INSURANCE Occupation (for Individual) INSURANCE AGENT
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 227.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 02 / 2016
Transaction ID : SA11A.469434
 Amount of Each Receipt this Period
 25.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	150.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 1210 OF 4311
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. FULKERSON, JAYME, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 307 S ONE MILE RD

City DEXTER	State MO	Zip Code 63841-1831
----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) COUNTY WIDE INSURANCE	Occupation (for Individual) INSURANCE AGENT
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
227.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
11 / 04 / 2016

Transaction ID : SA11A.470957

Amount of Each Receipt this Period
25.00

Memo Item
CONTRIBUTION

B. FULLER, RICHARD, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 22906 MEADOWSWEET DR

City MAGNOLIA	State TX	Zip Code 77355-3537
------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) ENSCO	Occupation (for Individual) ELECTRONIC TECHNICIAN
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
11 / 05 / 2016

Transaction ID : SA11A.479076

Amount of Each Receipt this Period
250.00

Memo Item
CONTRIBUTION

C. FULLMER, STEVEN, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address P. O. BOX 58

City GRAVETTE	State AR	Zip Code 72736-0058
------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) EMPIRE DISTRICT ELECTRIC CO.	Occupation (for Individual) CONSTRUCTION DESIGNER
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
260.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
11 / 04 / 2016

Transaction ID : SA11A.474072

Amount of Each Receipt this Period
30.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	305.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1211 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. FULMER, ROBERT, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2137 SUMAC DR
 City FLORENCE State SC Zip Code 29505-3805
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 225.00

Date of Receipt 10 / 20 / 2016
Transaction ID : SA11A.442233
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

B. FULMER, ROBERT, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2137 SUMAC DR
 City FLORENCE State SC Zip Code 29505-3805
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 225.00

Date of Receipt 10 / 28 / 2016
Transaction ID : SA11A.455061
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

C. FULMER, ROBERT, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2137 SUMAC DR
 City FLORENCE State SC Zip Code 29505-3805
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 225.00

Date of Receipt 10 / 28 / 2016
Transaction ID : SA11A.455064
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 75.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1212 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. FULMER, ROBERT, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2137 SUMAC DR
 City FLORENCE State SC Zip Code 29505-3805
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 225.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 11 / 03 / 2016
Transaction ID : SA11A.468791
 Amount of Each Receipt this Period
 25.00
 Memo Item
 CONTRIBUTION

B. FULMER, ROBERT, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2137 SUMAC DR
 City FLORENCE State SC Zip Code 29505-3805
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 225.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 11 / 03 / 2016
Transaction ID : SA11A.468800
 Amount of Each Receipt this Period
 25.00
 Memo Item
 CONTRIBUTION

C. FULTZ, LARRY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1084 SIR FRANCIS COURT
 City GALLATIN State TN Zip Code 37066-7467
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) THE LIMITED Occupation (for Individual) EVP
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 575.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 11 / 02 / 2016
Transaction ID : SA11A.470022
 Amount of Each Receipt this Period
 25.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	75.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1213 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. FUNDERBURK, LOIS, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 103-1 GENOES PT RD SW
 City SUPPLY State NC Zip Code 28462-3468
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 394.00

Date of Receipt 10 / 20 / 2016
Transaction ID : SA11A.441966
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

B. FUNK, ROBERT, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 752 WOODLAND DR.,
 City SANTA BARBARA State CA Zip Code 93108-1840
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 10 / 26 / 2016
Transaction ID : SA11A.454535
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

C. FUNK, ROBERT, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 752 WOODLAND DR.,
 City SANTA BARBARA State CA Zip Code 93108-1840
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 11 / 04 / 2016
Transaction ID : SA11A.471441
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	300.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1214 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. FURBY, JAMES, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 7610 HILLSIDE DR
 City LAJOLLA State CA Zip Code 92037-3942
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 520.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 01 / 2016
Transaction ID : SA11A.462800
 Amount of Each Receipt this Period
 59.00
 Memo Item
 CONTRIBUTION

B. FUREK, SUSAN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1370 CUTLER COURT
 City MARCO ISLAND State FL Zip Code 34145-5841
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 25 / 2016
Transaction ID : SA11A.447399
 Amount of Each Receipt this Period
 200.00
 Memo Item
 CONTRIBUTION

C. G, JOAN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address P O BOX 3333
 City OCALA State FL Zip Code 34478-3333
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) REAL ESTATE
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 350.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 02 / 2016
Transaction ID : SA11A.469881
 Amount of Each Receipt this Period
 50.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	309.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1215 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
Team Ryan

A. G, JOAN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address P O BOX 3333
 City Ocala State FL Zip Code 34478-3333
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) REAL ESTATE
 Receipt For: Primary General Other (specify) Aggregate Year-to-Date 350.00

Date of Receipt 11 / 02 / 2016
Transaction ID : SA11A.469882
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

B. G, JOAN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address P O BOX 3333
 City Ocala State FL Zip Code 34478-3333
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) REAL ESTATE
 Receipt For: Primary General Other (specify) Aggregate Year-to-Date 350.00

Date of Receipt 11 / 02 / 2016
Transaction ID : SA11A.469883
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

C. GABRIEL, EDWARD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1322 LAKE ROYALE
 City LOUISBURG State NC Zip Code 27549-7459
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) TEAM HENRY ENTERPRISES, LLC Occupation (for Individual) DIVISION MANAGER FEDERAL CONT
 Receipt For: Primary General Other (specify) Aggregate Year-to-Date 405.00

Date of Receipt 10 / 26 / 2016
Transaction ID : SA11A.451229
 Amount of Each Receipt this Period 30.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... 130.00
TOTAL This Period (last page this line number only).....

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1216 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. GABRIEL, EDWARD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1322 LAKE ROYALE
 City LOUISBURG State NC Zip Code 27549-7459
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) TEAM HENRY ENTERPRISES, LLC Occupation (for Individual) DIVISION MANAGER FEDERAL CONT
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 405.00

Date of Receipt 11 / 05 / 2016
Transaction ID : SA11A.478658
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

B. GABRIEL, EDWARD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1322 LAKE ROYALE
 City LOUISBURG State NC Zip Code 27549-7459
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) TEAM HENRY ENTERPRISES, LLC Occupation (for Individual) DIVISION MANAGER FEDERAL CON
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 405.00

Date of Receipt 11 / 05 / 2016
Transaction ID : SA11A.479156
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

C. GACKLE, MERLIN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 10004 WILLOW BEND DRIVE
 City WOODWAY State TX Zip Code 76712-8522
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) TELEPERFORMANCE USA Occupation (for Individual) VP, GLOBAL BUSINESS DEVELOPME
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 328.00

Date of Receipt 10 / 31 / 2016
Transaction ID : SA11A.458389
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	100.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1217 OF 4311
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. GACKLE, MERLIN, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 10004 WILLOW BEND DRIVE

City WOODWAY	State TX	Zip Code 76712-8522
-----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) TELEPERFORMANCE USA	Occupation (for Individual) VP, GLOBAL BUSINESS DEVELOPME
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
328.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11		03		2016

Transaction ID : SA11A.468685

Amount of Each Receipt this Period
5.00

Memo Item CONTRIBUTION

B. GACKLE, MERLIN, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 10004 WILLOW BEND DRIVE

City WOODWAY	State TX	Zip Code 76712-8522
-----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) TELEPERFORMANCE USA	Occupation (for Individual) VP, GLOBAL BUSINESS DEVELOPME
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
328.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11		03		2016

Transaction ID : SA11A.468686

Amount of Each Receipt this Period
18.00

Memo Item CONTRIBUTION

C. GACKLE, MERLIN, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 10004 WILLOW BEND DRIVE

City WOODWAY	State TX	Zip Code 76712-8522
-----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) TELEPERFORMANCE USA	Occupation (for Individual) VP, GLOBAL BUSINESS DEVELOPME
--	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
328.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11		03		2016

Transaction ID : SA11A.468687

Amount of Each Receipt this Period
25.00

Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	48.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1218 OF 4311
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. GACKLE, MERLIN, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 10004 WILLOW BEND DRIVE

City WOODWAY	State TX	Zip Code 76712-8522
-----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) TELEPERFORMANCE USA	Occupation (for Individual) VP, GLOBAL BUSINESS DEVELOPME
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
328.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11		03		2016

Transaction ID : SA11A.468699

Amount of Each Receipt this Period
30.00

Memo Item CONTRIBUTION

B. GACKLE, MERLIN, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 10004 WILLOW BEND DRIVE

City WOODWAY	State TX	Zip Code 76712-8522
-----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) TELEPERFORMANCE USA	Occupation (for Individual) VP, GLOBAL BUSINESS DEVELOPME
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
328.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11		03		2016

Transaction ID : SA11A.469227

Amount of Each Receipt this Period
25.00

Memo Item CONTRIBUTION

C. GACKLE, MERLIN, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 10004 WILLOW BEND DRIVE

City WOODWAY	State TX	Zip Code 76712-8522
-----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) TELEPERFORMANCE USA	Occupation (for Individual) VP, GLOBAL BUSINESS DEVELOPME
--	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
328.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11		04		2016

Transaction ID : SA11A.473423

Amount of Each Receipt this Period
25.00

Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	80.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 1219 OF 4311
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
Team Ryan

A. GAEHWILER, MARTIN, A., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 250 CASITAS AVENUE
 City SAN FRANCISCO State CA Zip Code 94127-1604
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) CONSTRUCTION
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt **10 / 26 / 2016**
Transaction ID : SA11A.447756
 Amount of Each Receipt this Period 1000.00
 Memo Item CONTRIBUTION

B. GAFFNEY, MARCIA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 234 CLINTON STREET
 City WHITESBORO State NY Zip Code 13492-2531
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 875.00

Date of Receipt **11 / 04 / 2016**
Transaction ID : SA11A.467517
 Amount of Each Receipt this Period 375.00
 Memo Item CONTRIBUTION

C. GAILLE, SPENCER, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1140 PAREDES LINE RD
 City BROWNSVILLE State TX Zip Code 78521-2628
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt **11 / 02 / 2016**
Transaction ID : SA11A.470184
 Amount of Each Receipt this Period 500.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶ 1875.00
TOTAL This Period (last page this line number only).....▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1220 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
Team Ryan

A. GAITHER, JOHN, F., , JR.
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 510 MEADOWMONT VLG CIR
 STE 373
 City CHAPEL HILL State NC Zip Code 27517-7584
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 31 / 2016
Transaction ID : SA11A.457661
 Amount of Each Receipt this Period
 250.00
 Memo Item
 CONTRIBUTION

B. GALEN, SUZANNE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 724 N MAPLE DR.
 City BEVERLY HILLS State CA Zip Code 90210-3411
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 450.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 03 / 2016
Transaction ID : SA11A.469039
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION

C. GALEN, SUZANNE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 724 N MAPLE DR.
 City BEVERLY HILLS State CA Zip Code 90210-3411
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 450.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 06 / 2016
Transaction ID : SA11A.477433
 Amount of Each Receipt this Period
 50.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	400.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1221 OF 4311
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/>	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. GALKINS, ROBERT, T., MR.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 110 ELSIE STREET

City CRANSTON	State RI	Zip Code 02910-1751
------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) INFORMATION REQUESTED PER BEST EFFORTS	Occupation (for Individual) INFORMATION REQUESTED PER BE
---	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	27	/	2016

Transaction ID : SA11A.452430

Amount of Each Receipt this Period
500.00

Memo Item
CONTRIBUTION

B. GALLAGHER, DENNIS, , MR.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1998 PLEASANT GROVE ROAD

City RIO OSO	State CA	Zip Code 95674-9649
-----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) SELF EMPLOYED	Occupation (for Individual) FARMER
--	---------------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
400.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	07	/	2016

Transaction ID : SA11A.480201

Amount of Each Receipt this Period
100.00

Memo Item
CONTRIBUTION

C. GALLAGHER, DENNIS, , MR.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1998 PLEASANT GROVE ROAD

City RIO OSO	State CA	Zip Code 95674-9649
-----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) SELF EMPLOYED	Occupation (for Individual) FARMER
--	---------------------------------------

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
400.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	07	/	2016

Transaction ID : SA11A.480203

Amount of Each Receipt this Period
100.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	700.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1222 OF 4311
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. GALLAGHER, FRANCIS, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 421 MEADOWCROFT ROAD

City WEST DEPTFORD	State NJ	Zip Code 08096-4009
-----------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	24	/	2016

Transaction ID : SA11A.443853

Amount of Each Receipt this Period
1000.00

Memo Item
CONTRIBUTION

B. GALLAGHER, JOHN, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 31 DANIELS WAY

City BAY SHORE	State NY	Zip Code 11706-8234
-------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) SELF EMPLOYED	Occupation (for Individual) PHYSICIAN
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	07	/	2016

Transaction ID : SA11A.476539

Amount of Each Receipt this Period
250.00

Memo Item
CONTRIBUTION

C. GALLAGHER, JOSEPH, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 11 HITCHING POST

City PLYMOUTH	State MA	Zip Code 02360-2552
------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
350.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	20	/	2016

Transaction ID : SA11A.442528

Amount of Each Receipt this Period
100.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	1350.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1223 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. GALLAGHER, JOSEPH, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 11 HITCHING POST
 City PLYMOUTH State MA Zip Code 02360-2552
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 350.00

Date of Receipt 10 / 20 / 2016
Transaction ID : SA11A.442529
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

B. GALLAGHER, ROBERT, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO BOX 70236
 City SUNNYVALE State CA Zip Code 94086-0236
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) LOCKHEED MARTIN Occupation (for Individual) FINANCE / PROPOSAL ANALYST
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 275.00

Date of Receipt 10 / 21 / 2016
Transaction ID : SA11A.447236
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

C. GALLAGHER, ROBERT, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO BOX 70236
 City SUNNYVALE State CA Zip Code 94086-0236
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) LOCKHEED MARTIN Occupation (for Individual) FINANCE / PROPOSAL ANALYST
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 275.00

Date of Receipt 10 / 21 / 2016
Transaction ID : SA11A.447237
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶ 150.00
TOTAL This Period (last page this line number only).....▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1224 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. GALLAGHER, ROBERT, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO BOX 70236
 City SUNNYVALE State CA Zip Code 94086-0236
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) LOCKHEED MARTIN Occupation (for Individual) FINANCE / PROPOSAL ANALYST
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 275.00

Date of Receipt 10 / 25 / 2016
Transaction ID : SA11A.449076
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

B. GALLAGHER, ROBERT, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO BOX 70236
 City SUNNYVALE State CA Zip Code 94086-0236
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) LOCKHEED MARTIN Occupation (for Individual) FINANCE / PROPOSAL ANALYST
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 275.00

Date of Receipt 10 / 25 / 2016
Transaction ID : SA11A.449077
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

C. GALLEGOS, JOE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2374 ALEXANDER STREET
 City WOODLAND State CA Zip Code 95776-5461
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) ACCESS TRANSPORT & LOGISTICS Occupation (for Individual) PRESIDENT
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 10 / 27 / 2016
Transaction ID : SA11A.453881
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶ 100.00
TOTAL This Period (last page this line number only).....▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1225 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
Team Ryan

A. GALLEGOS, JOE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2374 ALEXANDER STREET
 City WOODLAND State CA Zip Code 95776-5461
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) ACCESS TRANSPORT & LOGISTICS Occupation (for Individual) PRESIDENT
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt **11 / 04 / 2016**
Transaction ID : SA11A.473648
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

B. GALLINA, GREGORY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 35 GORGA PL
 City TWP OF WASHINGTON State NJ Zip Code 07676-3805
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF Occupation (for Individual) PHYSICIAN
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt **10 / 31 / 2016**
Transaction ID : SA11A.463524
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

C. GALLMAN, SANDRA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO BOX 232
 City ST.PETERSBURG State FL Zip Code 33731-0232
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) GREAT STATES Occupation (for Individual) RENTALS
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt **11 / 04 / 2016**
Transaction ID : SA11A.472320
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	400.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1226 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. GALOVAN, JAMES, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1874 S. PARAGON DRIVE
 City ST. GEORGE State UT Zip Code 84790-6146
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 700.00

Date of Receipt **10 / 29 / 2016**
Transaction ID : SA11A.464968
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

B. GALOVAN, JAMES, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1874 S. PARAGON DRIVE
 City ST. GEORGE State UT Zip Code 84790-6146
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 700.00

Date of Receipt **11 / 04 / 2016**
Transaction ID : SA11A.472413
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

C. GAMBEL, MICHAEL, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 19365 WATERVIEW
 City GROSSE ILE State MI Zip Code 48138-1009
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) INFORMATION REQUESTED PER BEST EFFORTS Occupation (for Individual) INFORMATION REQUESTED PER BEST EFFORTS
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt **10 / 25 / 2016**
Transaction ID : SA11A.447422
 Amount of Each Receipt this Period 500.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	650.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1227 OF 4311
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. GAMBLE, KENNETH, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 175 HUGUENOT ST
 PH501
 City NEW ROCHELLE State NY Zip Code 10801-7767
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) IND BROKER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 2000.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 26 / 2016
Transaction ID : SA11A.449747
 Amount of Each Receipt this Period
 1000.00
 Memo Item
CONTRIBUTION

B. GAMBLE, WILLIAM, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 145 TOWN CENTER #683
 City CORTE MADERA State CA Zip Code 94925-1209
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 24 / 2016
Transaction ID : SA11A.445907
 Amount of Each Receipt this Period
 250.00
 Memo Item
CONTRIBUTION

C. GAMBLE, WILLIAM, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 145 TOWN CENTER #683
 City CORTE MADERA State CA Zip Code 94925-1209
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 1250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 24 / 2016
Transaction ID : SA11A.445915
 Amount of Each Receipt this Period
 250.00
 Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶ 1500.00
TOTAL This Period (last page this line number only).....▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1228 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. GAMBLE, WILLIAM, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 145 TOWN CENTER #683

City CORTE MADERA	State CA	Zip Code 94925-1209
----------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 04 / 2016
Transaction ID : SA11A.473705

Amount of Each Receipt this Period
250.00

Memo Item
CONTRIBUTION

B. GAMBRELL, SR., DEAN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1509 EDINBURGH WAY

City VESTAVIA	State AL	Zip Code 35243-4864
------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) GAMBRELL FINANCIAL ADVISORS	Occupation (for Individual) FINANCIAL ADVISOR
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
400.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 20 / 2016
Transaction ID : SA11A.442560

Amount of Each Receipt this Period
100.00

Memo Item
CONTRIBUTION

C. GAMBRELL, SR., DEAN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1509 EDINBURGH WAY

City VESTAVIA	State AL	Zip Code 35243-4864
------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) GAMBRELL FINANCIAL ADVISORS	Occupation (for Individual) FINANCIAL ADVISOR
--	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
400.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 24 / 2016
Transaction ID : SA11A.446222

Amount of Each Receipt this Period
100.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	450.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1229 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
Team Ryan

A. GAMBRELL, SR., DEAN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1509 EDINBURGH WAY
 City VESTAVIA State AL Zip Code 35243-4864
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) GAMBRELL FINANCIAL ADVISORS Occupation (for Individual) FINANCIAL ADVISOR
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt **11 / 04 / 2016**
Transaction ID : SA11A.471379
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

B. GAMMANS, RICHARD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address P O BOX 87
 City SOUTHERN PINES State NC Zip Code 28388-0087
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) ACCELE BIOPHARMA Occupation (for Individual) BIOTECHNOLOGY RESEARCH
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 625.00

Date of Receipt **10 / 20 / 2016**
Transaction ID : SA11A.442441
 Amount of Each Receipt this Period 75.00
 Memo Item CONTRIBUTION

C. GAMMANS, RICHARD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address P O BOX 87
 City SOUTHERN PINES State NC Zip Code 28388-0087
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) ACCELE BIOPHARMA Occupation (for Individual) BIOTECHNOLOGY RESEARCH
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 625.00

Date of Receipt **11 / 04 / 2016**
Transaction ID : SA11A.472799
 Amount of Each Receipt this Period 75.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	250.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1230 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. GAMMELL, JOSEPH, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 6079 FERNVIEW AVE
 City CINCINNATI State OH Zip Code 45212-1347
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) ADECCO Occupation (for Individual) IT CONSULTANT
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 237.00

Date of Receipt 10 / 25 / 2016
Transaction ID : SA11A.448530
 Amount of Each Receipt this Period 30.00
 Memo Item
 CONTRIBUTION

B. GAMMELL, JOSEPH, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 6079 FERNVIEW AVE
 City CINCINNATI State OH Zip Code 45212-1347
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) ADECCO Occupation (for Individual) IT CONSULTANT
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 237.00

Date of Receipt 10 / 31 / 2016
Transaction ID : SA11A.458234
 Amount of Each Receipt this Period 25.00
 Memo Item
 CONTRIBUTION

C. GAMMELL, JOSEPH, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 6079 FERNVIEW AVE
 City CINCINNATI State OH Zip Code 45212-1347
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) ADECCO Occupation (for Individual) IT CONSULTANT
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 237.00

Date of Receipt 11 / 07 / 2016
Transaction ID : SA11A.475192
 Amount of Each Receipt this Period 25.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	80.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1231 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
Team Ryan

A. GANGER, IRA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 34 HERRICK DR
 City LAWRENCE State NY Zip Code 11559-1528
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) AMEREX Occupation (for Individual) PRES
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 31 / 2016
Transaction ID : SA11A.457444
 Amount of Each Receipt this Period
 250.00
 Memo Item
 CONTRIBUTION

B. GANGWERE, BLANCHE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 6940 EDGEVALE ROAD
 City KANSAS CITY State MO Zip Code 64113-2031
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NA Occupation (for Individual) COMPOSER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 31 / 2016
Transaction ID : SA11A.458043
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION

C. GANGWERE, BLANCHE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 6940 EDGEVALE ROAD
 City KANSAS CITY State MO Zip Code 64113-2031
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NA Occupation (for Individual) COMPOSER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 07 / 2016
Transaction ID : SA11A.475084
 Amount of Each Receipt this Period
 250.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	600.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1232 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. GANGWERE, BLANCHE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 6940 EDGEVALE ROAD
 City KANSAS CITY State MO Zip Code 64113-2031
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NA Occupation (for Individual) COMPOSER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1250.00

Date of Receipt 11 / 07 / 2016
Transaction ID : SA11A.475090
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

B. GANGWERE, BLANCHE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 6940 EDGEVALE ROAD
 City KANSAS CITY State MO Zip Code 64113-2031
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NA Occupation (for Individual) COMPOSER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1250.00

Date of Receipt 11 / 06 / 2016
Transaction ID : SA11A.477458
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

C. GANSER, ROBERT, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2815 SAXON AVE NE
 City CANTON State OH Zip Code 44721-3744
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) CONSULTANT
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 11 / 02 / 2016
Transaction ID : SA11A.466661
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 550.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1233 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
A. GANSER, ROBERT, , ,

Mailing Address **2815 SAXON AVE NE**

City CANTON	State OH	Zip Code 44721-3744
-----------------------	--------------------	-------------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) SELF EMPLOYED	Occupation (for Individual) CONSULTANT
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt
11 / 02 / 2016

Transaction ID : SA11A.466663

Amount of Each Receipt this Period
50.00

Memo Item CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
B. GAO, FENG, , ,

Mailing Address **25 SAINT CHRISTOPHER COURT**

City SUGAR LAND	State TX	Zip Code 77479-4204
---------------------------	--------------------	-------------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) FENG GAO AND CO. PA	Occupation (for Individual) DENTIST
---	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
550.00

Date of Receipt
10 / 30 / 2016

Transaction ID : SA11A.460321

Amount of Each Receipt this Period
100.00

Memo Item CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
C. GARAGIOLA, JOSEPH, , ,

Mailing Address **7235 E PARADISE DRIVE**

City SCOTTSDALE	State AZ	Zip Code 85260-5433
---------------------------	--------------------	-------------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) MAJOR LEAGUE BASEBALL	Occupation (for Individual) SENIOR VICE PRESIDENT
---	---

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
500.00

Date of Receipt
11 / 07 / 2016

Transaction ID : SA11A.467855

Amount of Each Receipt this Period
250.00

Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	400.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1234 OF 4311
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. GARBER, ANN, R., ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 200 E SOUTH STREET

City CORYDON	State IA	Zip Code 50060-1726
-----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
285.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11		02		2016

Transaction ID : SA11A.465106

Amount of Each Receipt this Period
20.00

Memo Item
CONTRIBUTION

B. GARBER, BRIAN, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 5146 BUCKHEAD TRAIL

City KNOXVILLE	State TN	Zip Code 37919-8903
-------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) SELF EMPLOYED	Occupation (for Individual) SURGEON
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
325.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11		03		2016

Transaction ID : SA11A.465561

Amount of Each Receipt this Period
200.00

Memo Item
CONTRIBUTION

C. GARBER, SALLY, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 5455 BIKLE RD

City CHAMBERSBURG	State PA	Zip Code 17202-8492
----------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) SALLY J GARBER	Occupation (for Individual) COLON HYDROTHERAPY
---	---

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
325.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		27		2016

Transaction ID : SA11A.452953

Amount of Each Receipt this Period
25.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	245.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1235 OF 4311
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. GARBER, SALLY, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 5455 BIKLE RD

City CHAMBERSBURG	State PA	Zip Code 17202-8492
----------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) SALLY J GARBER	Occupation (for Individual) COLON HYDROTHERAPY
---	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
325.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		27		2016

Transaction ID : SA11A.452958

Amount of Each Receipt this Period
25.00

Memo Item CONTRIBUTION

B. GARBER, SALLY, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 5455 BIKLE RD

City CHAMBERSBURG	State PA	Zip Code 17202-8492
----------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) SALLY J GARBER	Occupation (for Individual) COLON HYDROTHERAPY
---	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
325.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11		02		2016

Transaction ID : SA11A.466982

Amount of Each Receipt this Period
25.00

Memo Item CONTRIBUTION

C. GARCIA, GUILLERMO, , MR.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 9401 SW 103 STREET

City MIAMI	State FL	Zip Code 33176-3057
---------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
800.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11		01		2016

Transaction ID : SA11A.462816

Amount of Each Receipt this Period
100.00

Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	150.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1236 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. GARCIA, MARIO, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5900 QUERNUS COVE
 City AUSTIN State TX Zip Code 78735-5402
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) APEX RESOURCES, INC. Occupation (for Individual) OWNER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 04 / 2016
Transaction ID : SA11A.473170
 Amount of Each Receipt this Period
 50.00
 Memo Item
 CONTRIBUTION

B. GARCIA, RUTH, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 818 EAST 3RD ST.
 City STOCKTON State CA Zip Code 95206-1640
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 350.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 05 / 2016
Transaction ID : SA11A.478496
 Amount of Each Receipt this Period
 25.00
 Memo Item
 CONTRIBUTION

C. GARCIA, RUTH, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 818 EAST 3RD ST.
 City STOCKTON State CA Zip Code 95206-1640
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 350.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 05 / 2016
Transaction ID : SA11A.478497
 Amount of Each Receipt this Period
 25.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	100.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1237 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. GARCIA, SUE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1693 EUREKA RD
 STE. 300
 City ROSEVILLE State CA Zip Code 95661-2852
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) PAUL GARCIA INVESTMENTS INC Occupation (for Individual) INVESTIR
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 9000.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 29 / 2016
Transaction ID : SA11A.460976
 Amount of Each Receipt this Period
 3000.00
 Memo Item
 CONTRIBUTION

B. GARCIA, SUE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1693 EUREKA RD
 STE. 300
 City ROSEVILLE State CA Zip Code 95661-2852
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) PAUL GARCIA INVESTMENTS INC Occupation (for Individual) INVESTIR
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 9000.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 29 / 2016
Transaction ID : SA11A.460977
 Amount of Each Receipt this Period
 3000.00
 Memo Item
 CONTRIBUTION

C. GARCIA, SUE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1693 EUREKA RD
 STE. 300
 City ROSEVILLE State CA Zip Code 95661-2852
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) PAUL GARCIA INVESTMENTS INC Occupation (for Individual) INVESTIR
 Receipt For:
 Primary General
 Other (specify)
 Aggregate Year-to-Date ▼
 9000.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 04 / 2016
Transaction ID : SA11A.471906
 Amount of Each Receipt this Period
 3000.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	9000.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1238 OF 4311
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. GARDINER, CARL, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 60 COLONY RD
 City JUPITER State FL Zip Code 33469-3507
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 11 / 04 / 2016
Transaction ID : SA11A.473439
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

B. GARDNER, BETTIE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1505 ELDER DRIVE
 City AURORA State IL Zip Code 60506-1220
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) REMAX OF NAPERVILLE Occupation (for Individual) REAL ESTTE BROKER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 280.00

Date of Receipt 10 / 25 / 2016
Transaction ID : SA11A.448904
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

C. GARDNER, BETTIE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1505 ELDER DRIVE
 City AURORA State IL Zip Code 60506-1220
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) REMAX OF NAPERVILLE Occupation (for Individual) REAL ESTTE BROKER
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 280.00

Date of Receipt 11 / 02 / 2016
Transaction ID : SA11A.466303
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶ 150.00
TOTAL This Period (last page this line number only).....▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1239 OF 4311
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. GARDNER, BETTY, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 1572 GOODIN HOLLOW ROAD

City NOEL	State MO	Zip Code 64854-7235
--------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1025.00

Date of Receipt
11 / 09 / 2016
Transaction ID : SA11A.468187

Amount of Each Receipt this Period
200.00

Memo Item CONTRIBUTION

B. GARDNER, BETTIE, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 1505 ELDER DRIVE

City AURORA	State IL	Zip Code 60506-1220
----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) REMAX OF NAPERVILLE	Occupation (for Individual) REAL ESTTE BROKER
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
280.00

Date of Receipt
11 / 03 / 2016
Transaction ID : SA11A.468507

Amount of Each Receipt this Period
30.00

Memo Item CONTRIBUTION

C. GARDNER, BETTIE, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 1505 ELDER DRIVE

City AURORA	State IL	Zip Code 60506-1220
----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) REMAX OF NAPERVILLE	Occupation (for Individual) REAL ESTTE BROKER
--	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
280.00

Date of Receipt
11 / 04 / 2016
Transaction ID : SA11A.472743

Amount of Each Receipt this Period
25.00

Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	255.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1240 OF 4311
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
Team Ryan

A. GARDNER, GISELA, A., MRS.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 2323 MCDANIEL AVENUE
APT 1133

City EVANSTON State IL Zip Code 60201-2576

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
850.00

Date of Receipt
10 / 20 / 2016
Transaction ID : SA11A.433436

Amount of Each Receipt this Period
100.00

Memo Item CONTRIBUTION

B. GARDNER, GISELA, A., MRS.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 2323 MCDANIEL AVENUE
APT 1133

City EVANSTON State IL Zip Code 60201-2576

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
850.00

Date of Receipt
11 / 02 / 2016
Transaction ID : SA11A.465003

Amount of Each Receipt this Period
200.00

Memo Item CONTRIBUTION

C. GARDNER, VANCE, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 6 HARVEY COURT

City IRVINE State CA Zip Code 92617-4033

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) MEDICAL RESEARCH

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
250.00

Date of Receipt
11 / 04 / 2016
Transaction ID : SA11A.472972

Amount of Each Receipt this Period
50.00

Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 350.00

TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1241 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. GARNER, CICERO, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 6400 SOUTH LAGOON DRIVE
 City PANAMA CITY BEACH State FL Zip Code 32408-6003
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 700.00

Date of Receipt 10 / 30 / 2016
Transaction ID : SA11A.459447
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

B. GARNIER, ANTON, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3725 MOUNTAIN VIEW AVE
 City PASADENA State CA Zip Code 91107-4981
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) EASR PASADENA WATER COMPANY Occupation (for Individual) CEO
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1750.00

Date of Receipt 10 / 23 / 2016
Transaction ID : SA11A.446322
 Amount of Each Receipt this Period 500.00
 Memo Item CONTRIBUTION

C. GARNIER, ANTON, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3725 MOUNTAIN VIEW AVE
 City PASADENA State CA Zip Code 91107-4981
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) EASR PASADENA WATER COMPANY Occupation (for Individual) CEO
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1750.00

Date of Receipt 10 / 23 / 2016
Transaction ID : SA11A.446326
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	850.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1242 OF 4311
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. GARNIER, ANTON, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 3725 MOUNTAIN VIEW AVE

City PASADENA	State CA	Zip Code 91107-4981
------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) EASR PASADENA WATER COMPANY	Occupation (for Individual) CEO
--	------------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1750.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		23		2016

Transaction ID : SA11A.446327

Amount of Each Receipt this Period
250.00

Memo Item
CONTRIBUTION

B. GARNIER, ANTON, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 3725 MOUNTAIN VIEW AVE

City PASADENA	State CA	Zip Code 91107-4981
------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) EASR PASADENA WATER COMPANY	Occupation (for Individual) CEO
--	------------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1750.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		23		2016

Transaction ID : SA11A.446328

Amount of Each Receipt this Period
250.00

Memo Item
CONTRIBUTION

C. GARNIER, ANTON, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 3725 MOUNTAIN VIEW AVE

City PASADENA	State CA	Zip Code 91107-4981
------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) EASR PASADENA WATER COMPANY	Occupation (for Individual) CEO
--	------------------------------------

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
1750.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11		04		2016

Transaction ID : SA11A.472945

Amount of Each Receipt this Period
250.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	750.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1243 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. GAROUTTE, MARTI, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1304 N SIESTA STREET
 City ANAHEIM State CA Zip Code 92801-1560
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) CALIFORNIA FENCE & SUPPLY Occupation (for Individual) CALIFORNIA FENCE & SUPPLY
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 350.00

Date of Receipt 11 / 07 / 2016
Transaction ID : SA11A.475146
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

B. GAROUTTE, MARTI, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1304 N SIESTA STREET
 City ANAHEIM State CA Zip Code 92801-1560
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) CALIFORNIA FENCE & SUPPLY Occupation (for Individual) CALIFORNIA FENCE & SUPPLY
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 350.00

Date of Receipt 11 / 07 / 2016
Transaction ID : SA11A.475158
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

C. GAROUTTE, MARTI, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1304 N SIESTA STREET
 City ANAHEIM State CA Zip Code 92801-1560
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) CALIFORNIA FENCE & SUPPLY Occupation (for Individual) CALIFORNIA FENCE & SUPPLY
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 350.00

Date of Receipt 11 / 07 / 2016
Transaction ID : SA11A.475159
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶ 100.00
TOTAL This Period (last page this line number only).....▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1244 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. GARRETT, GLENN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 10694 N LAUGHING COYOTE WAY
 City ORO VALLEY State AZ Zip Code 85737-9001
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 450.00

Date of Receipt 10 / 25 / 2016
Transaction ID : SA11A.448396
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

B. GARRETT, JACQUELINE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 7800 SOUTHWEST PKWY UNIT 312
 City AUSTIN State TX Zip Code 78735-6116
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 10 / 25 / 2016
Transaction ID : SA11A.448928
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

C. GARRETT, JACQUELINE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 7800 SOUTHWEST PKWY UNIT 312
 City AUSTIN State TX Zip Code 78735-6116
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 11 / 04 / 2016
Transaction ID : SA11A.473708
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	150.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1245 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. GARRETT, JACQUELINE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 7800 SOUTHWEST PKWY UNIT 312
 UNIT 312
 City AUSTIN State TX Zip Code 78735-6116
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt
 11 / 05 / 2016
Transaction ID : SA11A.478965
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

B. GARRETT, JACQUELINE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 7800 SOUTHWEST PKWY UNIT 312
 UNIT 312
 City AUSTIN State TX Zip Code 78735-6116
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt
 11 / 05 / 2016
Transaction ID : SA11A.478986
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

C. GARRETT, LAWRENCE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1881 N. NASH ST, UNIT 1211
 City ARLINGTON State VA Zip Code 22209-1568
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) ERNST & YOUNG Occupation (for Individual) TAX CONSULTANT
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt
 10 / 30 / 2016
Transaction ID : SA11A.459374
 Amount of Each Receipt this Period 500.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	550.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1246 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. GARRETT, ROD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 39 IRENE ST..
 City STREATOR State IL Zip Code 61364-1112
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 230.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 07 / 2016
Transaction ID : SA11A.475311
 Amount of Each Receipt this Period
 25.00
 Memo Item
 CONTRIBUTION

B. GARRETT, WANDA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 928 SHERWOOD ST
 City HANOVER State PA Zip Code 17331-1358
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 26 / 2016
Transaction ID : SA11A.449854
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION

C. GARRISON, EVAN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4300 S.E. SAINT LUCIE BLVD.
 LOT 31
 City STUART State FL Zip Code 34997-6841
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 290.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 24 / 2016
Transaction ID : SA11A.445862
 Amount of Each Receipt this Period
 25.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 150.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1247 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. GARRISON, EVAN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4300 S.E. SAINT LUCIE BLVD.
 LOT 31
 City STUART State FL Zip Code 34997-6841
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 290.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 24 / 2016
Transaction ID : SA11A.445863
 Amount of Each Receipt this Period
 25.00
 Memo Item
 CONTRIBUTION

B. GARRISON, EVAN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4300 S.E. SAINT LUCIE BLVD.
 LOT 31
 City STUART State FL Zip Code 34997-6841
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 290.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 30 / 2016
Transaction ID : SA11A.460237
 Amount of Each Receipt this Period
 30.00
 Memo Item
 CONTRIBUTION

C. GARRISON, EVAN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4300 S.E. SAINT LUCIE BLVD.
 LOT 31
 City STUART State FL Zip Code 34997-6841
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 290.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 04 / 2016
Transaction ID : SA11A.472059
 Amount of Each Receipt this Period
 30.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	85.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1248 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. GARTIN, DONALD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 103 WEST EXCHANGE STREET
 City MOUNT PLEASANT State IA Zip Code 52641-1228
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 775.00

Date of Receipt 11 / 01 / 2016
Transaction ID : SA11A.467259
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

B. GARTIN, DONALD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 103 WEST EXCHANGE STREET
 City MOUNT PLEASANT State IA Zip Code 52641-1228
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 775.00

Date of Receipt 11 / 05 / 2016
Transaction ID : SA11A.478396
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

C. GARTIN, DONALD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 103 WEST EXCHANGE STREET
 City MOUNT PLEASANT State IA Zip Code 52641-1228
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 775.00

Date of Receipt 11 / 05 / 2016
Transaction ID : SA11A.478402
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	300.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1249 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name A. GARVIN, ROBERT, M., ,			Date of Receipt MM / DD / YYYY 11 / 03 / 2016 Transaction ID : SA11A.465198		
Mailing Address 1860 CARRIAGE HILLS DR			Amount of Each Receipt this Period 2500.00		
City DELAFIELD	State WI	Zip Code 53018-1245	<input type="checkbox"/> Memo Item CONTRIBUTION		
FEC ID number of contributing federal political committee. C					
Name of Employer (for Individual) INFORMATION REQUESTED PER BEST EFFORTS		Occupation (for Individual) INFORMATION REQUESTED PER BE			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 2500.00			

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name B. GARWOOD, CA, , ,			Date of Receipt MM / DD / YYYY 10 / 21 / 2016 Transaction ID : SA11A.444582		
Mailing Address 9618 ROCKHUST DRIVE			Amount of Each Receipt this Period 35.00		
City HOUSTON	State TX	Zip Code 77080-1202	<input type="checkbox"/> Memo Item CONTRIBUTION		
FEC ID number of contributing federal political committee. C					
Name of Employer (for Individual) NONE		Occupation (for Individual) RETIRED			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 315.00			

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name C. GARWOOD, CA, , ,			Date of Receipt MM / DD / YYYY 11 / 04 / 2016 Transaction ID : SA11A.473883		
Mailing Address 9618 ROCKHUST DRIVE			Amount of Each Receipt this Period 35.00		
City HOUSTON	State TX	Zip Code 77080-1202	<input type="checkbox"/> Memo Item CONTRIBUTION		
FEC ID number of contributing federal political committee. C					
Name of Employer (for Individual) NONE		Occupation (for Individual) RETIRED			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		Aggregate Year-to-Date ▼ 315.00			

SUBTOTAL of Receipts This Page (optional).....▶	2570.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1250 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. GARWOOD, CAROL, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 9618 ROCKHURST DRIVE
 City HOUSTON State TX Zip Code 77080-1202
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 230.00

Date of Receipt
 11 / 04 / 2016
Transaction ID : SA11A.471525
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

B. GARWOOD, CAROL, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 9618 ROCKHURST DRIVE
 City HOUSTON State TX Zip Code 77080-1202
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 230.00

Date of Receipt
 11 / 03 / 2016
Transaction ID : SA11A.474583
 Amount of Each Receipt this Period 30.00
 Memo Item CONTRIBUTION

C. GASBARRA, FRANCES, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 10 ORCHARD LANE
 City GOLF State IL Zip Code 60029-3107
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) FORTE Occupation (for Individual) DIRECTOR
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 350.00

Date of Receipt
 10 / 20 / 2016
Transaction ID : SA11A.444865
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	155.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1251 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. GASBARRA, FRANCES, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 10 ORCHARD LANE
 City GOLF State IL Zip Code 60029-3107
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) FORTE Occupation (for Individual) DIRECTOR
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 350.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 20 / 2016
Transaction ID : SA11A.444866
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION

B. GASBARRA, FRANCES, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 10 ORCHARD LANE
 City GOLF State IL Zip Code 60029-3107
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) FORTE Occupation (for Individual) DIRECTOR
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 350.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 25 / 2016
Transaction ID : SA11A.452063
 Amount of Each Receipt this Period
 50.00
 Memo Item
 CONTRIBUTION

C. GASBARRA, FRANCES, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 10 ORCHARD LANE
 City GOLF State IL Zip Code 60029-3107
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) FORTE Occupation (for Individual) DIRECTOR
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 350.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 25 / 2016
Transaction ID : SA11A.452065
 Amount of Each Receipt this Period
 50.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	200.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1252 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. GASBARRA, FRANCES, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 10 ORCHARD LANE
 City GOLF State IL Zip Code 60029-3107
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) FORTE Occupation (for Individual) DIRECTOR
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 350.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 04 / 2016
Transaction ID : SA11A.473515
 Amount of Each Receipt this Period
 50.00
 Memo Item
 CONTRIBUTION

B. GASKILL, CAROL, C., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO BOX 566
 City WEBB CITY State MO Zip Code 64870-0566
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1600.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 24 / 2016
Transaction ID : SA11A.443972
 Amount of Each Receipt this Period
 300.00
 Memo Item
 CONTRIBUTION

C. GASKILL, CAROL, C., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO BOX 566
 City WEBB CITY State MO Zip Code 64870-0566
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1600.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 02 / 2016
Transaction ID : SA11A.465034
 Amount of Each Receipt this Period
 1000.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	1350.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1253 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. GAST, VALERIE, , MS.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 245 GRACE DRIVE
NONE

City SOUTH PASADENA State CA Zip Code 91030-1820

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt
11 / 04 / 2016
Transaction ID : SA11A.471785

Amount of Each Receipt this Period
25.00

Memo Item CONTRIBUTION

B. GAST, VALERIE, , MS.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 245 GRACE DRIVE
NONE

City SOUTH PASADENA State CA Zip Code 91030-1820

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt
11 / 04 / 2016
Transaction ID : SA11A.472182

Amount of Each Receipt this Period
25.00

Memo Item CONTRIBUTION

C. GAST, VALERIE, , MS.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 245 GRACE DRIVE
NONE

City SOUTH PASADENA State CA Zip Code 91030-1820

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
250.00

Date of Receipt
11 / 07 / 2016
Transaction ID : SA11A.480683

Amount of Each Receipt this Period
25.00

Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 75.00

TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1254 OF 4311
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. GASTLE, ROBERT, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 271 SUMMIT AVE.

City WEST SENECA	State NY	Zip Code 14224-2333
---------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) HEALTHNOW NEW YORK INC.	Occupation (for Individual) BUSINESS ANALYST
--	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
300.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		26		2016

Transaction ID : SA11A.451061

Amount of Each Receipt this Period
100.00

Memo Item CONTRIBUTION

B. GASTLE, ROBERT, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 271 SUMMIT AVE.

City WEST SENECA	State NY	Zip Code 14224-2333
---------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) HEALTHNOW NEW YORK INC.	Occupation (for Individual) BUSINESS ANALYST
--	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
300.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11		04		2016

Transaction ID : SA11A.472724

Amount of Each Receipt this Period
100.00

Memo Item CONTRIBUTION

C. GATLIN, T, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 158 ESTANCIA WAY

City GEORGETOWN	State TX	Zip Code 78628-7041
--------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
1000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11		04		2016

Transaction ID : SA11A.474147

Amount of Each Receipt this Period
500.00

Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	700.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1255 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. GATTI, JAMES, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 258 OAK HILL RD
 City SPRINGFIELD State NH Zip Code 03257-
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 350.00

Date of Receipt 10 / 30 / 2016
Transaction ID : SA11A.459920
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

B. GAVIN, FRANCIS, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 370 VISTA CT
 City VERO BEACH State FL Zip Code 32962-0749
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 440.00

Date of Receipt 10 / 25 / 2016
Transaction ID : SA11A.448852
 Amount of Each Receipt this Period 55.00
 Memo Item CONTRIBUTION

C. GAVIN, FRANCIS, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 370 VISTA CT
 City VERO BEACH State FL Zip Code 32962-0749
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 440.00

Date of Receipt 11 / 04 / 2016
Transaction ID : SA11A.472501
 Amount of Each Receipt this Period 55.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 210.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1256 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. GAYNOR, GEORGE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1500 LAKESHORE DR.
 City CHICAGO State IL Zip Code 60610-6686
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) GEORGE GAYNOR Occupation (for Individual) SELF EMPLOYED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1200.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 26 / 2016
Transaction ID : SA11A.451184
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION

B. GAYNOR, GEORGE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1500 LAKESHORE DR.
 City CHICAGO State IL Zip Code 60610-6686
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) GEORGE GAYNOR Occupation (for Individual) SELF EMPLOYED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1200.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 26 / 2016
Transaction ID : SA11A.451185
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION

C. GAYNOR, GEORGE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1500 LAKESHORE DR.
 City CHICAGO State IL Zip Code 60610-6686
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) GEORGE GAYNOR Occupation (for Individual) SELF EMPLOYED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1200.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 31 / 2016
Transaction ID : SA11A.459149
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	300.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1257 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
Team Ryan

A. GAYNOR, GEORGE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1500 LAKESHORE DR.
 City CHICAGO State IL Zip Code 60610-6686
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) GEORGE GAYNOR Occupation (for Individual) SELF EMPLOYED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1200.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 04 / 2016
Transaction ID : SA11A.471225
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION

B. GAYNOR, LAVERN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 266 15TH AVE S
 City NAPLES State FL Zip Code 34102-7433
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1400.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 31 / 2016
Transaction ID : SA11A.457966
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION

C. GAYNOR, LAVERN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 266 15TH AVE S
 City NAPLES State FL Zip Code 34102-7433
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1400.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 31 / 2016
Transaction ID : SA11A.457967
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	300.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1258 OF 4311
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. GEARON, J, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 4476 WOODLAND BROOK DR

City ATLANTA	State GA	Zip Code 30339-5365
-----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		21		2016

Transaction ID : SA11A.444437

Amount of Each Receipt this Period
250.00

Memo Item CONTRIBUTION

B. GEARY, JAMES, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 3219 W BAY VILLA

City TAMPA	State FL	Zip Code 33611-1503
---------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) PWC	Occupation (for Individual) PARTNER
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
2000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		31		2016

Transaction ID : SA11A.464030

Amount of Each Receipt this Period
250.00

Memo Item CONTRIBUTION

C. GEARY, JAMES, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 3219 W BAY VILLA

City TAMPA	State FL	Zip Code 33611-1503
---------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) PWC	Occupation (for Individual) PARTNER
--	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
2000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		31		2016

Transaction ID : SA11A.464031

Amount of Each Receipt this Period
250.00

Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	750.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1259 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. GEARY, JAMES, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3219 W BAY VILLA
 City TAMPA State FL Zip Code 33611-1503
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) PWC Occupation (for Individual) PARTNER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 2000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 11 / 05 / 2016
Transaction ID : SA11A.479197
 Amount of Each Receipt this Period
 250.00
 Memo Item
 CONTRIBUTION

B. GEBARA, GABRIEL, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 11381 LONGWATER CHASE CT
 City FORT MYERS State FL Zip Code 33908-4965
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 600.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 11 / 07 / 2016
Transaction ID : SA11A.480471
 Amount of Each Receipt this Period
 50.00
 Memo Item
 CONTRIBUTION

C. GEBARA, GABRIEL, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 11381 LONGWATER CHASE CT
 City FORT MYERS State FL Zip Code 33908-4965
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 600.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 11 / 07 / 2016
Transaction ID : SA11A.480478
 Amount of Each Receipt this Period
 50.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	350.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1260 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. GEBHARDT, JOHN, E., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5722 N SHORE DR
 City MILWAUKEE State WI Zip Code 53217-4864
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) INFORMATION REQUESTED PER BEST EFFORTS Occupation (for Individual) INFORMATION REQUESTED PER BE
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 1000.00

Date of Receipt 11 / 03 / 2016
Transaction ID : SA11A.465199
 Amount of Each Receipt this Period 1000.00
 Memo Item CONTRIBUTION

B. GEHL, JOHN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 705 SPRINGER MT DR
 City CANTON State GA Zip Code 30114-4346
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 425.00

Date of Receipt 10 / 27 / 2016
Transaction ID : SA11A.454021
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

C. GEHL, JOHN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 705 SPRINGER MT DR
 City CANTON State GA Zip Code 30114-4346
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 425.00

Date of Receipt 11 / 03 / 2016
Transaction ID : SA11A.468954
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶ 1075.00
TOTAL This Period (last page this line number only).....▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1261 OF 4311
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. GEIBEL, STEPHEN, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 31 PROSPECT TER.

City CORTLAND	State NY	Zip Code 13045-2520
------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
400.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		24		2016

Transaction ID : SA11A.449393

Amount of Each Receipt this Period
100.00

Memo Item CONTRIBUTION

B. GEISER, GEORGE, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address P. O. BOX 396

City CHAMPION	State PA	Zip Code 15622-0396
------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		26		2016

Transaction ID : SA11A.451188

Amount of Each Receipt this Period
250.00

Memo Item CONTRIBUTION

C. GELLER, ETHELL, A., DR., PH.D.
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 333 CENTRAL PARK WEST
92

City NEW YORK	State NY	Zip Code 10025-7145
------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) SELF EMPLOYED	Occupation (for Individual) PSYCHOLOGIST
--	---

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
775.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		25		2016

Transaction ID : SA11A.448017

Amount of Each Receipt this Period
50.00

Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	400.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1262 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. GELLER, ETHELL, A., DR., PH.D.
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 333 CENTRAL PARK WEST
 92
 City NEW YORK State NY Zip Code 10025-7145
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) PSYCHOLOGIST
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 775.00

Date of Receipt 10 / 25 / 2016
Transaction ID : SA11A.448019
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

B. GELLER, ETHELL, A., DR., PH.D.
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 333 CENTRAL PARK WEST
 92
 City NEW YORK State NY Zip Code 10025-7145
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) PSYCHOLOGIST
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 775.00

Date of Receipt 10 / 25 / 2016
Transaction ID : SA11A.448027
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

C. GELLER, ETHELL, A., DR., PH.D.
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 333 CENTRAL PARK WEST
 92
 City NEW YORK State NY Zip Code 10025-7145
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) PSYCHOLOGIST
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 775.00

Date of Receipt 10 / 25 / 2016
Transaction ID : SA11A.448028
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶ 150.00
TOTAL This Period (last page this line number only).....▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1263 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. GELLER, ETHELL, A., DR., PH.D.
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 333 CENTRAL PARK WEST
 92
 City NEW YORK State NY Zip Code 10025-7145
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) PSYCHOLOGIST
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 775.00

Date of Receipt **10 / 27 / 2016**
Transaction ID : SA11A.452822
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

B. GELLER, ETHELL, A., DR., PH.D.
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 333 CENTRAL PARK WEST
 92
 City NEW YORK State NY Zip Code 10025-7145
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) PSYCHOLOGIST
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 775.00

Date of Receipt **11 / 07 / 2016**
Transaction ID : SA11A.474591
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

C. GELLER, ETHELL, A., DR., PH.D.
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 333 CENTRAL PARK WEST
 92
 City NEW YORK State NY Zip Code 10025-7145
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) PSYCHOLOGIST
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 775.00

Date of Receipt **11 / 07 / 2016**
Transaction ID : SA11A.474592
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	150.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1264 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
Team Ryan

A. GELLER, ETHELL, A., DR., PH.D.
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 333 CENTRAL PARK WEST
 92
 City NEW YORK State NY Zip Code 10025-7145
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) PSYCHOLOGIST
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 775.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 06 / 2016
Transaction ID : SA11A.476890
 Amount of Each Receipt this Period
 50.00
 Memo Item
 CONTRIBUTION

B. GELLER, ETHELL, A., DR., PH.D.
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 333 CENTRAL PARK WEST
 92
 City NEW YORK State NY Zip Code 10025-7145
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) PSYCHOLOGIST
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 775.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 06 / 2016
Transaction ID : SA11A.476891
 Amount of Each Receipt this Period
 50.00
 Memo Item
 CONTRIBUTION

C. GENTRY, CAROL, J., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 540 S LAGOON DR
 City GILBERT State AZ Zip Code 85233-6738
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 933.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 26 / 2016
Transaction ID : SA11A.451103
 Amount of Each Receipt this Period
 25.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	125.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1265 OF 4311		
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14	<input type="checkbox"/> 11c <input type="checkbox"/> 15	<input type="checkbox"/> 12 <input type="checkbox"/> 16

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NAME OF COMMITTEE (In Full)
Team Ryan

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name A. GENTRY, CAROL, J., ,		Date of Receipt MM / DD / YYYY 10 / 30 / 2016 Transaction ID : SA11A.459519
Mailing Address 540 S LAGOON DR		Amount of Each Receipt this Period 100.00
City GILBERT	State AZ	Zip Code 85233-6738
FEC ID number of contributing federal political committee. C		<input type="checkbox"/> Memo Item CONTRIBUTION
Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 933.00	

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name B. GENTRY, CAROL, J., ,		Date of Receipt MM / DD / YYYY 10 / 30 / 2016 Transaction ID : SA11A.459521
Mailing Address 540 S LAGOON DR		Amount of Each Receipt this Period 100.00
City GILBERT	State AZ	Zip Code 85233-6738
FEC ID number of contributing federal political committee. C		<input type="checkbox"/> Memo Item CONTRIBUTION
Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 933.00	

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name C. GENTRY, CAROL, J., ,		Date of Receipt MM / DD / YYYY 11 / 02 / 2016 Transaction ID : SA11A.466299
Mailing Address 540 S LAGOON DR		Amount of Each Receipt this Period 25.00
City GILBERT	State AZ	Zip Code 85233-6738
FEC ID number of contributing federal political committee. C		<input type="checkbox"/> Memo Item CONTRIBUTION
Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Aggregate Year-to-Date ▼ 933.00	

SUBTOTAL of Receipts This Page (optional).....▶	225.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1266 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. GENTRY, CAROL, J., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 540 S LAGOON DR
 City GILBERT State AZ Zip Code 85233-6738
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 933.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 02 / 2016
Transaction ID : SA11A.466300
 Amount of Each Receipt this Period
 25.00
 Memo Item
 CONTRIBUTION

B. GENTRY, CAROL, J., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 540 S LAGOON DR
 City GILBERT State AZ Zip Code 85233-6738
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 933.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 04 / 2016
Transaction ID : SA11A.472402
 Amount of Each Receipt this Period
 25.00
 Memo Item
 CONTRIBUTION

C. GENTRY, CAROL, J., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 540 S LAGOON DR
 City GILBERT State AZ Zip Code 85233-6738
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 933.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 07 / 2016
Transaction ID : SA11A.474995
 Amount of Each Receipt this Period
 25.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	75.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1267 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. GENTRY, CAROL, J., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 540 S LAGOON DR
 City GILBERT State AZ Zip Code 85233-6738
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 933.00

Date of Receipt
 11 / 07 / 2016
Transaction ID : SA11A.474997
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

B. GENTRY, CAROL, J., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 540 S LAGOON DR
 City GILBERT State AZ Zip Code 85233-6738
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 933.00

Date of Receipt
 11 / 07 / 2016
Transaction ID : SA11A.475011
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

C. GENTRY, CAROL, J., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 540 S LAGOON DR
 City GILBERT State AZ Zip Code 85233-6738
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 933.00

Date of Receipt
 11 / 07 / 2016
Transaction ID : SA11A.475014
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	75.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1268 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. GEORGE, CHARLES, T., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 491 MILLBROOK
 City CANFIELD State OH Zip Code 44406-9663
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) HAPCO, INC Occupation (for Individual) ACCOUNTANT
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 2500.00

Date of Receipt 10 / 28 / 2016
Transaction ID : SA11A.449682
 Amount of Each Receipt this Period 2500.00
 Memo Item CONTRIBUTION

B. GEORGE, GARY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 6309 E LAKE ANNE DR
 City RALEIGH State NC Zip Code 27612-7211
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 10 / 31 / 2016
Transaction ID : SA11A.463970
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

C. GEORGE, GARY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 6309 E LAKE ANNE DR
 City RALEIGH State NC Zip Code 27612-7211
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 10 / 31 / 2016
Transaction ID : SA11A.463975
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶ 2600.00
TOTAL This Period (last page this line number only).....▶

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1269 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
Team Ryan

A. GEORGE, GARY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 6309 E LAKE ANNE DR
 City RALEIGH State NC Zip Code 27612-7211
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 10 / 31 / 2016
Transaction ID : SA11A.463978
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

B. GEORGE, GEETA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 75 GOLF LANE 75
 City RIDGEFIELD State CT Zip Code 06877-4818
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) PHYSICIAN
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 425.00

Date of Receipt 10 / 31 / 2016
Transaction ID : SA11A.458056
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

C. GEORGE, GEETA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 75 GOLF LANE 75
 City RIDGEFIELD State CT Zip Code 06877-4818
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) PHYSICIAN
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 425.00

Date of Receipt 11 / 04 / 2016
Transaction ID : SA11A.479552
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶ 100.00
TOTAL This Period (last page this line number only).....▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1270 OF 4311
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Team Ryan

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name A. GEORGE, GEETA, , ,		Date of Receipt MM / DD / YYYY 11 / 07 / 2016 Transaction ID : SA11A.480561
Mailing Address 75 GOLF LANE 75		Amount of Each Receipt this Period 25.00
City RIDGEFIELD	State CT	Zip Code 06877-4818
FEC ID number of contributing federal political committee. C		<input type="checkbox"/> Memo Item CONTRIBUTION
Name of Employer (for Individual) SELF EMPLOYED	Occupation (for Individual) PHYSICIAN	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 425.00	

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name B. GEORGE, KIMON, , ,		Date of Receipt MM / DD / YYYY 10 / 25 / 2016 Transaction ID : SA11A.451981
Mailing Address 5348 POOKS HILL RD		Amount of Each Receipt this Period 25.00
City BETHESDA	State MD	Zip Code 20814-2005
FEC ID number of contributing federal political committee. C		<input type="checkbox"/> Memo Item CONTRIBUTION
Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 242.00	

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name C. GEORGE, KIMON, , ,		Date of Receipt MM / DD / YYYY 10 / 28 / 2016 Transaction ID : SA11A.455669
Mailing Address 5348 POOKS HILL RD		Amount of Each Receipt this Period 10.00
City BETHESDA	State MD	Zip Code 20814-2005
FEC ID number of contributing federal political committee. C		<input type="checkbox"/> Memo Item CONTRIBUTION
Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Aggregate Year-to-Date ▼ 242.00	

SUBTOTAL of Receipts This Page (optional).....▶	60.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1271 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
Team Ryan

A. GEORGE, KIMON, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 5348 POOKS HILL RD

City BETHESDA	State MD	Zip Code 20814-2005
------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
242.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	04	/	2016

Transaction ID : SA11A.472027

Amount of Each Receipt this Period
30.00

Memo Item
CONTRIBUTION

B. GEORGESON, MICHAEL, J., MR.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 2127 SUNSET VISTA AVENUE

City HENDERSON	State NV	Zip Code 89052-2307
-------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) CAESARS PALACE	Occupation (for Individual) EXECUTIVE CASINO HOST
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
245.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	21	/	2016

Transaction ID : SA11A.443522

Amount of Each Receipt this Period
35.00

Memo Item
CONTRIBUTION

C. GEORGESON, MICHAEL, J., MR.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 2127 SUNSET VISTA AVENUE

City HENDERSON	State NV	Zip Code 89052-2307
-------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) CAESARS PALACE	Occupation (for Individual) EXECUTIVE CASINO HOST
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
245.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	04	/	2016

Transaction ID : SA11A.467444

Amount of Each Receipt this Period
35.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	100.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1272 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. GEORGE, PAUL, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO BOX 1902
 City JACKSON State WY Zip Code 83001-1902
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 650.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 24 / 2016
Transaction ID : SA11A.449168
 Amount of Each Receipt this Period
 50.00
 Memo Item
 CONTRIBUTION

B. GEORGE, PAUL, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO BOX 1902
 City JACKSON State WY Zip Code 83001-1902
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 650.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 07 / 2016
Transaction ID : SA11A.480317
 Amount of Each Receipt this Period
 50.00
 Memo Item
 CONTRIBUTION

C. GERALDS, EMILY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2224 KIEV CT.
 City WEST BLOOMFIELD State MI Zip Code 48324-1338
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 425.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 04 / 2016
Transaction ID : SA11A.471893
 Amount of Each Receipt this Period
 25.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	125.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1273 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. GERALDS, EMILY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2224 KIEV CT.
 City WEST BLOOMFIELD State MI Zip Code 48324-1338
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 425.00

Date of Receipt
 11 / 18 / 2016
Transaction ID : SA11A.481056
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

B. GERALDS, EMILY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2224 KIEV CT.
 City WEST BLOOMFIELD State MI Zip Code 48324-1338
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 425.00

Date of Receipt
 11 / 18 / 2016
Transaction ID : SA11A.481057
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

C. GERAUD, MAURICE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 316 CHARLES SWISHER COURT
 City FALLBROOK State CA Zip Code 92028-2586
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 275.00

Date of Receipt
 11 / 04 / 2016
Transaction ID : SA11A.473636
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶ 150.00
TOTAL This Period (last page this line number only).....▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1274 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
Team Ryan

A. GERBER, BERT, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO BOX 181817
 City CASSELBERRY State FL Zip Code 32718-1817
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) GERBER PUMPS INTL INC. Occupation (for Individual) TECHNICAL SALES
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 07 / 2016
Transaction ID : SA11A.475335
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION

B. GERBER, BETTY, ANN, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4203 HAMBLEDON VILLAGE DRIVE
 City HOUSTON State TX Zip Code 77014-1845
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 350.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 24 / 2016
Transaction ID : SA11A.444007
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION

C. GERDING, MARY, K., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 680 N LAKE SHORE DR. #1121
 City CHICAGO State IL Zip Code 60611-3077
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 25 / 2016
Transaction ID : SA11A.452241
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	300.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1275 OF 4311
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. GERLACH, CAROL, J., MS.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 2307 STERLING RD

City NASHVILLE	State TN	Zip Code 37215-1115
-------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	25	/	2016

Transaction ID : SA11A.448098

Amount of Each Receipt this Period
25.00

Memo Item
CONTRIBUTION

B. GERLACH, CAROL, J., MS.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 2307 STERLING RD

City NASHVILLE	State TN	Zip Code 37215-1115
-------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	27	/	2016

Transaction ID : SA11A.453012

Amount of Each Receipt this Period
25.00

Memo Item
CONTRIBUTION

C. GERLACH, CAROL, J., MS.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 2307 STERLING RD

City NASHVILLE	State TN	Zip Code 37215-1115
-------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	30	/	2016

Transaction ID : SA11A.459541

Amount of Each Receipt this Period
25.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	75.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1276 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. GERLACH, CAROL, J., MS.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2307 STERLING RD
 City NASHVILLE State TN Zip Code 37215-1115
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 01 / 2016
Transaction ID : SA11A.462502
 Amount of Each Receipt this Period
 25.00
 Memo Item
 CONTRIBUTION

B. GERMANAS, VYTAUTAS, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 6118 IVANHOE AVE
 City LISLE State IL Zip Code 60532-3145
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 231.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 29 / 2016
Transaction ID : SA11A.461036
 Amount of Each Receipt this Period
 15.00
 Memo Item
 CONTRIBUTION

C. GERMANAS, VYTAUTAS, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 6118 IVANHOE AVE
 City LISLE State IL Zip Code 60532-3145
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 231.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 04 / 2016
Transaction ID : SA11A.472452
 Amount of Each Receipt this Period
 15.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	55.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1277 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. GERSHON, EARLYNE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4042 GARFIELD ST.
 City CARLSBAD State CA Zip Code 92008-7401
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 265.00

Date of Receipt **10 / 26 / 2016**
Transaction ID : SA11A.451318
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

B. GERSHON, EARLYNE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4042 GARFIELD ST.
 City CARLSBAD State CA Zip Code 92008-7401
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 265.00

Date of Receipt **11 / 06 / 2016**
Transaction ID : SA11A.478288
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

C. GERSON, BECKY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 117 PLAINFIELD PL
 City JACKSON State TN Zip Code 38305-9605
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 800.00

Date of Receipt **10 / 31 / 2016**
Transaction ID : SA11A.458423
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 250.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1278 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. GERSON, BECKY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 117 PLAINFIELD PL
 City JACKSON State TN Zip Code 38305-9605
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 800.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 31 / 2016
Transaction ID : SA11A.458425
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION

B. GHELARDI, ELLEN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 17740 VIA BELLA ACQUA CT 402
 City FORT MYERS State FL Zip Code 33913-7860
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) CONSULTANT Occupation (for Individual) SELF
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 275.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 31 / 2016
Transaction ID : SA11A.463685
 Amount of Each Receipt this Period
 25.00
 Memo Item
 CONTRIBUTION

C. GHILONI, PETER, J., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 115 DEER ESTATES LANE
 City PONTE VEDRA BEACH State FL Zip Code 32082-1916
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SWISHER INTERNATIONAL Occupation (for Individual) EXECUTIVE
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 5000.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 24 / 2016
Transaction ID : SA11A.443466
 Amount of Each Receipt this Period
 5000.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	5125.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1279 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. GHIRARDELLI, WALTER, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 128 N OAK KNOLL AVE.
 305
 City PASADENA State CA Zip Code 91101-5638
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 2000.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 25 / 2016
Transaction ID : SA11A.447833
 Amount of Each Receipt this Period
 500.00
 Memo Item
 CONTRIBUTION

B. GHIRARDELLI, WALTER, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 128 N OAK KNOLL AVE.
 305
 City PASADENA State CA Zip Code 91101-5638
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 2000.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 31 / 2016
Transaction ID : SA11A.458015
 Amount of Each Receipt this Period
 500.00
 Memo Item
 CONTRIBUTION

C. GHIRARDELLI, WALTER, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 128 N OAK KNOLL AVE.
 305
 City PASADENA State CA Zip Code 91101-5638
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For:
 Primary General
 Other (specify)
 Aggregate Year-to-Date ▼
 2000.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 06 / 2016
Transaction ID : SA11A.476887
 Amount of Each Receipt this Period
 500.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	1500.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1280 OF 4311
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. GHISELLI, ANTONIO, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 227 MONTEGO BAY DR.

City EL PASO	State TX	Zip Code 79912-4411
-----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) ANTONIO A. GHISELLI	Occupation (for Individual) PHYSICIAN
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		31		2016

Transaction ID : SA11A.459150

Amount of Each Receipt this Period
100.00

Memo Item CONTRIBUTION

B. GHISELLI, ANTONIO, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 227 MONTEGO BAY DR.

City EL PASO	State TX	Zip Code 79912-4411
-----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) ANTONIO A. GHISELLI	Occupation (for Individual) PHYSICIAN
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11		04		2016

Transaction ID : SA11A.474143

Amount of Each Receipt this Period
100.00

Memo Item CONTRIBUTION

C. GIBB, ROBERT, M., ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1 JOHN'S ISLAND DR

City VERO BEACH	State FL	Zip Code 32963-3234
--------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
1500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		31		2016

Transaction ID : SA11A.459105

Amount of Each Receipt this Period
250.00

Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	450.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1281 OF 4311
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. GIBB, ROBERT, M., ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 1 JOHN'S ISLAND DR
City VERO BEACH State FL Zip Code 32963-3234
FEC ID number of contributing federal political committee. **C**
Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 1500.00

Date of Receipt 11 / 04 / 2016
Transaction ID : SA11A.471407
Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

B. GIBBONS, LILE, R., ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 27 SUNSET RD
City OLD GREENWICH State CT Zip Code 06870-2109
FEC ID number of contributing federal political committee. **C**
Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 5000.00

Date of Receipt 10 / 24 / 2016
Transaction ID : SA11A.443504
Amount of Each Receipt this Period 5000.00
 Memo Item CONTRIBUTION

C. GIBBY, TRUDY, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 1824 E MAPLE STREET
City MAPLETON State UT Zip Code 84664-4711
FEC ID number of contributing federal political committee. **C**
Name of Employer (for Individual) NONE Occupation (for Individual) HOMEMAKER
Receipt For: Primary General Other (specify)
Aggregate Year-to-Date ▼ 600.00

Date of Receipt 11 / 04 / 2016
Transaction ID : SA11A.467449
Amount of Each Receipt this Period 500.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 5750.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1282 OF 4311
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. GIBSON, GEORGE, R., , III
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 58 FOX HUNT ROAD
 BOX 161
 City NEW VERNON State NJ Zip Code 07976-
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 10 / 24 / 2016
Transaction ID : SA11A.443861
 Amount of Each Receipt this Period 500.00
 Memo Item CONTRIBUTION

B. GIBSON, KENT, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 10410 ROSEGATE CT
 202
 City RALEIGH State NC Zip Code 27617-5922
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 10 / 27 / 2016
Transaction ID : SA11A.454197
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

C. GIBSON, KENT, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 10410 ROSEGATE CT
 202
 City RALEIGH State NC Zip Code 27617-5922
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 10 / 27 / 2016
Transaction ID : SA11A.454198
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 700.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1283 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
Team Ryan

A. GIBSON, LARRY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 6094 W 10760 N
 City HIGHLAND State UT Zip Code 84003-3487
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 600.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 27 / 2016
Transaction ID : SA11A.456488
 Amount of Each Receipt this Period
 250.00
 Memo Item
 CONTRIBUTION

B. GIBSON, LARRY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 6094 W 10760 N
 City HIGHLAND State UT Zip Code 84003-3487
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 600.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 05 / 2016
Transaction ID : SA11A.478810
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION

C. GIEBINK, PATRICIA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 121 S. ALCOTT ST.
 City CHAMBERLAIN State SD Zip Code 57325-1757
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) PHYSICIAN
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 26 / 2016
Transaction ID : SA11A.450178
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	450.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1284 OF 4311
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. GIERER, JOSEPHINE, L., MS.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 67 TERRA NOVA CIRCLE

City WESTPORT	State CT	Zip Code 06880-4750
------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1100.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		24		2016

Transaction ID : SA11A.443883

Amount of Each Receipt this Period
1000.00

Memo Item CONTRIBUTION

B. GIESELMAN, MARY, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 9349 CLEARHURST DR

City DALLAS	State TX	Zip Code 75238-3328
----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
325.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		31		2016

Transaction ID : SA11A.463449

Amount of Each Receipt this Period
15.00

Memo Item CONTRIBUTION

C. GIESE, MARTHA, P., MS.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 20 FRAMINGHAM LANE

City PITTSFORD	State NY	Zip Code 14534-1048
-------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
300.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11		01		2016

Transaction ID : SA11A.461666

Amount of Each Receipt this Period
100.00

Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	1115.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1285 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. GIFFIN, CHERYL, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3296 HOLLOW CORNERS RD
 City DRYDEN State MI Zip Code 48428-9729
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 06 / 2016
Transaction ID : SA11A.480929
 Amount of Each Receipt this Period
 250.00
 Memo Item
 CONTRIBUTION

B. GILBERT, AUSTIN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address POB 3009
 City FLORENCE State SC Zip Code 29502-3009
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) GILBERT CONSTRUCTION Occupation (for Individual) BUILDING CONTRACTOR
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 01 / 2016
Transaction ID : SA11A.462670
 Amount of Each Receipt this Period
 1000.00
 Memo Item
 CONTRIBUTION

C. GILBERT, GEORGE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 18118 66TH AVE.
 City TINLEY PARK State IL Zip Code 60477-4156
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 225.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 22 / 2016
Transaction ID : SA11A.446940
 Amount of Each Receipt this Period
 25.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	1275.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1286 OF 4311		
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14	<input type="checkbox"/> 11c <input type="checkbox"/> 15	<input type="checkbox"/> 12 <input type="checkbox"/> 16

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NAME OF COMMITTEE (In Full)
Team Ryan

A. GILBERT, GEORGE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 18118 66TH AVE.
 City TINLEY PARK State IL Zip Code 60477-4156
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 225.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 11 / 04 / 2016
Transaction ID : SA11A.471600
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

B. GILBERT, GEORGE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 18118 66TH AVE.
 City TINLEY PARK State IL Zip Code 60477-4156
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 225.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 11 / 04 / 2016
Transaction ID : SA11A.473249
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

C. GILBERT, HARRY, W., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 14625 AERIES WAY DRIVE
 City FORT MYERS State FL Zip Code 33912-1704
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 10 / 24 / 2016
Transaction ID : SA11A.449218
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶ 100.00
TOTAL This Period (last page this line number only).....▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1287 OF 4311
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. GILBERT, HARRY, W., MR.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 14625 AERIES WAY DRIVE

City FORT MYERS	State FL	Zip Code 33912-1704
--------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		24		2016

Transaction ID : SA11A.449221

Amount of Each Receipt this Period
50.00

Memo Item
CONTRIBUTION

B. GILBERT, HARRY, W., MR.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 14625 AERIES WAY DRIVE

City FORT MYERS	State FL	Zip Code 33912-1704
--------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		24		2016

Transaction ID : SA11A.449222

Amount of Each Receipt this Period
50.00

Memo Item
CONTRIBUTION

C. GILBERT, HARRY, W., MR.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 14625 AERIES WAY DRIVE

City FORT MYERS	State FL	Zip Code 33912-1704
--------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		26		2016

Transaction ID : SA11A.454353

Amount of Each Receipt this Period
50.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	150.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1288 OF 4311
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. GILBERT, HARRY, W., MR.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 14625 AERIES WAY DRIVE

City FORT MYERS	State FL	Zip Code 33912-1704
--------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	04	/	2016

Transaction ID : SA11A.471375

Amount of Each Receipt this Period
50.00

Memo Item
CONTRIBUTION

B. GILBERTSON, JOHN, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 103 CHAMBERLAIN CT

City GREENVILLE	State SC	Zip Code 29605-3158
--------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) AVX CORP.	Occupation (for Individual) MANAGEMENT
--	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	20	/	2016

Transaction ID : SA11A.442391

Amount of Each Receipt this Period
250.00

Memo Item
CONTRIBUTION

C. GILBERT, PAUL, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 7725 168TH PL SW

City EDMONDS	State WA	Zip Code 98026-5011
-----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
730.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	20	/	2016

Transaction ID : SA11A.442612

Amount of Each Receipt this Period
100.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	400.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1289 OF 4311
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. GILBERT, PAUL, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 7725 168TH PL SW

City EDMONDS	State WA	Zip Code 98026-5011
-----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
730.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		20		2016

Transaction ID : SA11A.442613

Amount of Each Receipt this Period
100.00

Memo Item
CONTRIBUTION

B. GILBERT, RON, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 4517 FIELDSTONE CR.

City SOUTHPORT	State NC	Zip Code 28461-8061
-------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
300.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		27		2016

Transaction ID : SA11A.453891

Amount of Each Receipt this Period
50.00

Memo Item
CONTRIBUTION

C. GILL, DAVID, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address P.O. BOX 4449

City EASTON	State PA	Zip Code 18043-4449
----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) FLEXICON CORPORATION	Occupation (for Individual) EXECUTIVE
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
5400.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		31		2016

Transaction ID : SA11A.458927

Amount of Each Receipt this Period
5400.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	5550.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1290 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. GILL, FRANK, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 01740 SW MILITARY RD
 City PORTLAND State OR Zip Code 97219-8384
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1250.00

Date of Receipt 10 / 20 / 2016
Transaction ID : SA11A.444792
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

B. GILL, GALE, S., MS.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 114 POINSETTA DR
 City LITTLE ROCK State AR Zip Code 72205-2248
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) WRITER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt 10 / 26 / 2016
Transaction ID : SA11A.449909
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

C. GILL, GALE, S., MS.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 114 POINSETTA DR
 City LITTLE ROCK State AR Zip Code 72205-2248
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) WRITER
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt 10 / 26 / 2016
Transaction ID : SA11A.449923
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	350.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1291 OF 4311		
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14	<input type="checkbox"/> 11c <input type="checkbox"/> 15	<input type="checkbox"/> 12 <input type="checkbox"/> 16

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NAME OF COMMITTEE (In Full)
Team Ryan

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name A. GILL, HARJEET, , ,		Date of Receipt MM / DD / YYYY 11 / 07 / 2016
Mailing Address 19213 ROMAR STREET		Transaction ID : SA11A.467806
City NORTHRIDGE	State CA	Zip Code 91324-1273
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 501.00
Name of Employer (for Individual) INFORMATION REQUESTED PER BEST EFFORTS	Occupation (for Individual) INFORMATION REQUESTED PER BE	<input type="checkbox"/> Memo Item CONTRIBUTION
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 501.00	

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name B. GILL, LATOMA, , ,		Date of Receipt MM / DD / YYYY 10 / 27 / 2016
Mailing Address 7407 N 83RD DR		Transaction ID : SA11A.452654
City GLENDALE	State AZ	Zip Code 85305-3903
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 30.00
Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED	<input type="checkbox"/> Memo Item CONTRIBUTION
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 310.00	

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name C. GILL, LATOMA, , ,		Date of Receipt MM / DD / YYYY 11 / 04 / 2016
Mailing Address 7407 N 83RD DR		Transaction ID : SA11A.470728
City GLENDALE	State AZ	Zip Code 85305-3903
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 30.00
Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED	<input type="checkbox"/> Memo Item CONTRIBUTION
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Aggregate Year-to-Date ▼ 310.00	

SUBTOTAL of Receipts This Page (optional).....▶	561.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1292 OF 4311
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Team Ryan

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name A. GILL, LATOMA, , ,		Date of Receipt MM / DD / YYYY 11 / 04 / 2016 Transaction ID : SA11A.479672
Mailing Address 7407 N 83RD DR		Amount of Each Receipt this Period 25.00
City GLENDALE	State AZ	Zip Code 85305-3903
FEC ID number of contributing federal political committee. C		<input type="checkbox"/> Memo Item CONTRIBUTION
Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 310.00	

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name B. GILL, RICHARD, , ,		Date of Receipt MM / DD / YYYY 11 / 01 / 2016 Transaction ID : SA11A.462920
Mailing Address 195 ST CHARLES ST		Amount of Each Receipt this Period 250.00
City NATCHITOCHE	State LA	Zip Code 71457-2824
FEC ID number of contributing federal political committee. C		<input type="checkbox"/> Memo Item CONTRIBUTION
Name of Employer (for Individual) CP-TEL HOLDINGS INC.	Occupation (for Individual) CEO	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name C. GILLESPIE, CHARLES, , ,		Date of Receipt MM / DD / YYYY 11 / 01 / 2016 Transaction ID : SA11A.467341
Mailing Address 0 PROMENADE PLACE		Amount of Each Receipt this Period 25.00
City VOORHEES	State NJ	Zip Code 08043-
FEC ID number of contributing federal political committee. C		<input type="checkbox"/> Memo Item CONTRIBUTION
Name of Employer (for Individual) SELF EMPLOYED	Occupation (for Individual) CONSULTANT	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Aggregate Year-to-Date ▼ 325.00	

SUBTOTAL of Receipts This Page (optional).....	300.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1293 OF 4311
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. GILLERAN, ELIZABETH, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address **9 SESSIONS STREET**

City WELLESLEY	State MA	Zip Code 02482-6033
--------------------------	--------------------	-------------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
--	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **474.00**

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	30	/	2016

Transaction ID : SA11A.460114

Amount of Each Receipt this Period

32.00

Memo Item
CONTRIBUTION

B. GILLERAN, ELIZABETH, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address **9 SESSIONS STREET**

City WELLESLEY	State MA	Zip Code 02482-6033
--------------------------	--------------------	-------------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
--	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **474.00**

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	04	/	2016

Transaction ID : SA11A.472680

Amount of Each Receipt this Period

32.00

Memo Item
CONTRIBUTION

C. GILLESPIE, JAMES, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address **965 WINDSOR PLACE CIR**

City GRAYSON	State GA	Zip Code 30017-4914
------------------------	--------------------	-------------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
--	---

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼ **950.00**

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	04	/	2016

Transaction ID : SA11A.473771

Amount of Each Receipt this Period

100.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	164.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1294 OF 4311
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. GILLENWATER, MARY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1524 KIMBER LANE
 City EVANSVILLE State IN Zip Code 47715-2872
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) MELMAR PROPERTIES Occupation (for Individual) SMALL BUSINESS OWNER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 380.00

Date of Receipt 10 / 25 / 2016
Transaction ID : SA11A.451781
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

B. GILLENWATER, MARY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1524 KIMBER LANE
 City EVANSVILLE State IN Zip Code 47715-2872
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) MELMAR PROPERTIES Occupation (for Individual) SMALL BUSINESS OWNER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 380.00

Date of Receipt 10 / 30 / 2016
Transaction ID : SA11A.459916
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

C. GILLESPIE, NEIL, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 618 OAKLEY PLACE
 City ALEXANDRIA State VA Zip Code 22302-3611
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 10 / 25 / 2016
Transaction ID : SA11A.448784
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶ 375.00
TOTAL This Period (last page this line number only).....▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1295 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name A. GILLESPIE, PAUL, , ,		Date of Receipt
Mailing Address 7602 PALOMA COURT		<input type="text" value="11"/> / <input type="text" value="03"/> / <input type="text" value="2016"/>
City SPRINGFIELD	State VA	Zip Code 22153-1638
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		Transaction ID : SA11A.474423
Name of Employer (for Individual) USAF		Amount of Each Receipt this Period <input type="text" value="250.00"/>
Occupation (for Individual) PROFESSOR		<input type="checkbox"/> Memo Item CONTRIBUTION
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ <input type="text" value="500.00"/>	

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name B. GILMAN, WAYNE, , ,		Date of Receipt
Mailing Address 706 MOORSIDE DR		<input type="text" value="11"/> / <input type="text" value="04"/> / <input type="text" value="2016"/>
City SAN ANTONIO	State TX	Zip Code 78239-2635
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		Transaction ID : SA11A.472409
Name of Employer (for Individual) NONE		Amount of Each Receipt this Period <input type="text" value="100.00"/>
Occupation (for Individual) RETIRED		<input type="checkbox"/> Memo Item CONTRIBUTION
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ <input type="text" value="500.00"/>	

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name C. GILMORE, MARGARET, , ,		Date of Receipt
Mailing Address 57EAST75 3		<input type="text" value="11"/> / <input type="text" value="04"/> / <input type="text" value="2016"/>
City NEW YORK	State NY	Zip Code 10021-
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		Transaction ID : SA11A.470339
Name of Employer (for Individual) SELF EMPLOYED		Amount of Each Receipt this Period <input type="text" value="100.00"/>
Occupation (for Individual) PHYSICIAN		<input type="checkbox"/> Memo Item CONTRIBUTION
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Aggregate Year-to-Date ▼ <input type="text" value="531.00"/>	

SUBTOTAL of Receipts This Page (optional).....	<input type="text" value="450.00"/>
TOTAL This Period (last page this line number only).....	<input type="text"/>

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1296 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. GINNETTI, JAMES, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 172 BRANDYWINE CIRCLE
 City ENGLEWOOD State FL Zip Code 34223-1953
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) ENERGY CONSULTANT
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 600.00

Date of Receipt **10 / 27 / 2016**
Transaction ID : SA11A.453928
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

B. GINNETTI, JAMES, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 172 BRANDYWINE CIRCLE
 City ENGLEWOOD State FL Zip Code 34223-1953
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) ENERGY CONSULTANT
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 600.00

Date of Receipt **11 / 02 / 2016**
Transaction ID : SA11A.467056
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

C. GINNETTI, JAMES, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 172 BRANDYWINE CIRCLE
 City ENGLEWOOD State FL Zip Code 34223-1953
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) ENERGY CONSULTANT
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 600.00

Date of Receipt **11 / 04 / 2016**
Transaction ID : SA11A.471645
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	300.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1297 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. GINNETTI, JAMES, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 172 BRANDYWINE CIRCLE

City ENGLEWOOD	State FL	Zip Code 34223-1953
-------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) SELF EMPLOYED	Occupation (for Individual) ENERGY CONSULTANT
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
600.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	07	/	2016

Transaction ID : SA11A.480131

Amount of Each Receipt this Period
100.00

Memo Item CONTRIBUTION

B. GINNETTI, JAMES, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 172 BRANDYWINE CIRCLE

City ENGLEWOOD	State FL	Zip Code 34223-1953
-------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) SELF EMPLOYED	Occupation (for Individual) ENERGY CONSULTANT
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
600.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	07	/	2016

Transaction ID : SA11A.480132

Amount of Each Receipt this Period
100.00

Memo Item CONTRIBUTION

C. GINTHER, JAY, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 101 LILLIAN LN

City WTERLOO	State IA	Zip Code 50701-4062
-----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) CEDAR VALLEY MEDICAL SPECIALISTS, PC	Occupation (for Individual) PHYSICIAN
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	31	/	2016

Transaction ID : SA11A.464628

Amount of Each Receipt this Period
250.00

Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	450.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1298 OF 4311
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. GIORDANO, THOMAS, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 7271 EAST WESLEY AVENUE

City DENVER	State CO	Zip Code 80224-2539
----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
325.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		28		2016

Transaction ID : SA11A.455143

Amount of Each Receipt this Period
50.00

Memo Item CONTRIBUTION

B. GIORDANO, THOMAS, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 7271 EAST WESLEY AVENUE

City DENVER	State CO	Zip Code 80224-2539
----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
325.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		28		2016

Transaction ID : SA11A.455145

Amount of Each Receipt this Period
50.00

Memo Item CONTRIBUTION

C. GIRARDIN, PETER, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 693 HICKORY RD

City NAPLES	State FL	Zip Code 34108-2638
----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
572.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		31		2016

Transaction ID : SA11A.464224

Amount of Each Receipt this Period
25.00

Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	125.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1299 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. GIRAUD, JUDY, C., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2803 HEATHROW DR UNIT 293
 UNIT 293
 City AMES State IA Zip Code 50014-8418
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 750.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 31 / 2016
Transaction ID : SA11A.459143
 Amount of Each Receipt this Period
 50.00
 Memo Item
 CONTRIBUTION

B. GIRAUD, JUDY, C., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2803 HEATHROW DR UNIT 293
 UNIT 293
 City AMES State IA Zip Code 50014-8418
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 750.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 04 / 2016
Transaction ID : SA11A.471232
 Amount of Each Receipt this Period
 50.00
 Memo Item
 CONTRIBUTION

C. GIRVIN, ROBERT, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 22 COURTLAND PINES DR
 City HOLLISTON State MA Zip Code 01746-3508
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 1100.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 28 / 2016
Transaction ID : SA11A.455369
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	200.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1300 OF 4311
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. GIRVIN, ROBERT, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 22 COURTLAND PINES DR

City HOLLISTON	State MA	Zip Code 01746-3508
-------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1100.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		28		2016

Transaction ID : SA11A.455381

Amount of Each Receipt this Period
100.00

Memo Item
CONTRIBUTION

B. GITS, SUSAN, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 446 58TH PL

City HINSDALE	State IL	Zip Code 60521-4982
------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
525.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		25		2016

Transaction ID : SA11A.447805

Amount of Each Receipt this Period
50.00

Memo Item
CONTRIBUTION

C. GITS, SUSAN, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 446 58TH PL

City HINSDALE	State IL	Zip Code 60521-4982
------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
525.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		31		2016

Transaction ID : SA11A.464237

Amount of Each Receipt this Period
25.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	175.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1301 OF 4311
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. GITS, SUSAN, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 446 58TH PL

City HINSDALE State IL Zip Code 60521-4982

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
525.00

Date of Receipt
11 / 02 / 2016
Transaction ID : SA11A.469702

Amount of Each Receipt this Period
25.00

Memo Item CONTRIBUTION

B. GITS, SUSAN, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 446 58TH PL

City HINSDALE State IL Zip Code 60521-4982

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
525.00

Date of Receipt
11 / 07 / 2016
Transaction ID : SA11A.475647

Amount of Each Receipt this Period
50.00

Memo Item CONTRIBUTION

C. GIVOLY, DAN, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 24 VIA CORRALE

City NEWPORT COAST State CA Zip Code 92657-1614

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) PENN STATE UNIVERSITY Occupation (for Individual) PROFESSOR

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
280.00

Date of Receipt
10 / 24 / 2016
Transaction ID : SA11A.445990

Amount of Each Receipt this Period
100.00

Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 175.00

TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1302 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. GIVOLY, DAN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 24 VIA CORRALE
 City NEWPORT COAST State CA Zip Code 92657-1614
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) PENN STATE UNIVERSITY Occupation (for Individual) PROFESSOR
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 280.00

Date of Receipt 10 / 24 / 2016
Transaction ID : SA11A.446070
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

B. GIVOLY, DAN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 24 VIA CORRALE
 City NEWPORT COAST State CA Zip Code 92657-1614
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) PENN STATE UNIVERSITY Occupation (for Individual) PROFESSOR
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 280.00

Date of Receipt 11 / 07 / 2016
Transaction ID : SA11A.480571
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

C. GJAJA, NIKO, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5798 IRON STONE ROAD
 City LOTHIAN State MD Zip Code 20711-
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 1100.00

Date of Receipt 10 / 26 / 2016
Transaction ID : SA11A.449947
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	250.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1303 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. GJAJA, NIKO, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5798 IRON STONE ROAD
 City LOTHIAN State MD Zip Code 20711-
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1100.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 30 / 2016
Transaction ID : SA11A.459651
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION

B. GJAJA, NIKO, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5798 IRON STONE ROAD
 City LOTHIAN State MD Zip Code 20711-
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1100.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 04 / 2016
Transaction ID : SA11A.474273
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION

C. GJAJA, NIKO, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5798 IRON STONE ROAD
 City LOTHIAN State MD Zip Code 20711-
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1100.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 05 / 2016
Transaction ID : SA11A.478501
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	300.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1304 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. GJAJA, NIKO, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 5798 IRON STONE ROAD

City LOTHIAN	State MD	Zip Code 20711-
-----------------	-------------	--------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1100.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	05	/	2016

Transaction ID : SA11A.478506

Amount of Each Receipt this Period
100.00

Memo Item
CONTRIBUTION

B. GJAJA, NIKO, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 5798 IRON STONE ROAD

City LOTHIAN	State MD	Zip Code 20711-
-----------------	-------------	--------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1100.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	07	/	2016

Transaction ID : SA11A.480104

Amount of Each Receipt this Period
100.00

Memo Item
CONTRIBUTION

C. GJELDE, EARL, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address PO BOX 1235

City DILLON	State CO	Zip Code 80435-1235
----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
1225.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	27	/	2016

Transaction ID : SA11A.453601

Amount of Each Receipt this Period
50.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	250.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1305 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. GJELDE, EARL, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO BOX 1235
 City DILLON State CO Zip Code 80435-1235
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1225.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 28 / 2016
Transaction ID : SA11A.455808
 Amount of Each Receipt this Period
 50.00
 Memo Item
 CONTRIBUTION

B. GLASCOCK, FRANK, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4487 POST PLACE UNIT 85
 City NASHVILLE State TN Zip Code 37205-1605
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 3500.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 03 / 2016
Transaction ID : SA11A.465194
 Amount of Each Receipt this Period
 2500.00
 Memo Item
 CONTRIBUTION

C. GLASGOW, BEVERLY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 307 WISHING TREE LANE
 City OXFORD State MS Zip Code 38655-6133
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) TEAMHEALTH Occupation (for Individual) NURSE PRACTITIONER
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 27 / 2016
Transaction ID : SA11A.453711
 Amount of Each Receipt this Period
 250.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	2800.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1306 OF 4311
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. GLASGOW, BEVERLY, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 307 WISHING TREE LANE

City OXFORD	State MS	Zip Code 38655-6133
----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) TEAMHEALTH	Occupation (for Individual) NURSE PRACTITIONER
---	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	02	/	2016

Transaction ID : SA11A.470273

Amount of Each Receipt this Period
250.00

Memo Item CONTRIBUTION

B. GLASSCOCK, SAM, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 204 BRISTOL CT

City FLORENCE	State AL	Zip Code 35630-1174
------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
650.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	25	/	2016

Transaction ID : SA11A.448588

Amount of Each Receipt this Period
250.00

Memo Item CONTRIBUTION

C. GLASSCOCK, SAM, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 204 BRISTOL CT

City FLORENCE	State AL	Zip Code 35630-1174
------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
650.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	06	/	2016

Transaction ID : SA11A.477300

Amount of Each Receipt this Period
100.00

Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	600.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1307 OF 4311
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. GLASSCOCK, SAM, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 204 BRISTOL CT

City FLORENCE	State AL	Zip Code 35630-1174
------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
650.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	05	/	2016

Transaction ID : SA11A.479010

Amount of Each Receipt this Period
100.00

Memo Item CONTRIBUTION

B. GLASSCOCK, SAM, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 204 BRISTOL CT

City FLORENCE	State AL	Zip Code 35630-1174
------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
650.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	08	/	2016

Transaction ID : SA11A.479785

Amount of Each Receipt this Period
100.00

Memo Item CONTRIBUTION

C. GLASSER, STEVE, B., ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address PO BOX 3952

City ENID	State OK	Zip Code 73702-3952
--------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) SELF EMPLOYED	Occupation (for Individual) CPA
--	------------------------------------

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	24	/	2016

Transaction ID : SA11A.443703

Amount of Each Receipt this Period
250.00

Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	450.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1308 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. GLASS, THOMAS, F., , III
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 690 GLENWOOD CIRCLE
 City MCKINNEY State TX Zip Code 75069-9167
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 450.00

Date of Receipt 10 / 26 / 2016
Transaction ID : SA11A.447757
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

B. GLAUBER, MICHAEL, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 14 WINCREST FALLS DR
 City CYPRESS State TX Zip Code 77429-5154
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 450.00

Date of Receipt 10 / 27 / 2016
Transaction ID : SA11A.453354
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

C. GLAUBER, MICHAEL, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 14 WINCREST FALLS DR
 City CYPRESS State TX Zip Code 77429-5154
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 450.00

Date of Receipt 11 / 07 / 2016
Transaction ID : SA11A.475997
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	600.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1309 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. GLAVIN, BILL, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 26 GARWOOD LANE
 City MOULTONBOROUGH State NH Zip Code 03254-2805
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) MASSMUTUAL Occupation (for Individual) INVESTMENTS
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 12900.00

Date of Receipt 11 / 01 / 2016
Transaction ID : SA11A.461908
 Amount of Each Receipt this Period 7500.00
 Memo Item CONTRIBUTION

B. GLAVIN, LYNDA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 26 GARWOOD LANE
 City MOULTONBOROUGH State NH Zip Code 03254-2805
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 12900.00

Date of Receipt 11 / 01 / 2016
Transaction ID : SA11A.461907
 Amount of Each Receipt this Period 7500.00
 Memo Item CONTRIBUTION

C. GLEASON, PETER, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 955 LEXINGTON AVENUE 5-B
 City NEW YORK State NY Zip Code 10021-5128
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 950.00

Date of Receipt 10 / 20 / 2016
Transaction ID : SA11A.442016
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	15250.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1310 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13 <input type="checkbox"/> 11b <input type="checkbox"/> 14 <input type="checkbox"/> 11c <input type="checkbox"/> 15 <input type="checkbox"/> 12 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name A. GLEASON, PETER, , ,		Date of Receipt MM / DD / YYYY 10 / 20 / 2016 Transaction ID : SA11A.442017
Mailing Address 955 LEXINGTON AVENUE 5-B		Amount of Each Receipt this Period 250.00
City NEW YORK	State NY	Zip Code 10021-5128
FEC ID number of contributing federal political committee. C		<input type="checkbox"/> Memo Item CONTRIBUTION
Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 950.00	

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name B. GLEASON, PETER, , ,		Date of Receipt MM / DD / YYYY 11 / 07 / 2016 Transaction ID : SA11A.480544
Mailing Address 955 LEXINGTON AVENUE 5-B		Amount of Each Receipt this Period 100.00
City NEW YORK	State NY	Zip Code 10021-5128
FEC ID number of contributing federal political committee. C		<input type="checkbox"/> Memo Item CONTRIBUTION
Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 950.00	

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name C. GLEASON, THOMAS, , ,		Date of Receipt MM / DD / YYYY 10 / 24 / 2016 Transaction ID : SA11A.443449
Mailing Address 2485 RUE DU JARDIN H402		Amount of Each Receipt this Period 2700.00
City NAPLES	State FL	Zip Code 34105-3146
FEC ID number of contributing federal political committee. C		<input type="checkbox"/> Memo Item CONTRIBUTION
Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Aggregate Year-to-Date ▼ 2950.00	

SUBTOTAL of Receipts This Page (optional).....▶	3050.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1311 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. GLEESON, JOHN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 412 N HICKORY AVE

City ARLINGTON HEIGHTS	State IL	Zip Code 60004-6249
---------------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
500.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 25 / 2016
Transaction ID : SA11A.448459

Amount of Each Receipt this Period
500.00

Memo Item CONTRIBUTION

B. GLENDINNING, ANN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 318 S. BEACH RD.

City HOBE SOUND	State FL	Zip Code 33455-2605
--------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
650.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 29 / 2016
Transaction ID : SA11A.460825

Amount of Each Receipt this Period
100.00

Memo Item CONTRIBUTION

C. GLENDINNING, ANN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 318 S. BEACH RD.

City HOBE SOUND	State FL	Zip Code 33455-2605
--------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
650.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 30 / 2016
Transaction ID : SA11A.464903

Amount of Each Receipt this Period
100.00

Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	700.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1312 OF 4311
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. GLENDINNING, ANN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 318 S. BEACH RD.
 City HOBE SOUND State FL Zip Code 33455-2605
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 650.00

Date of Receipt 11 / 07 / 2016
Transaction ID : SA11A.476520
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

B. GLENN, WILLIAM, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5387 SHEAWATER DR.
 City SANIBEL State FL Zip Code 33957-2328
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIERD Occupation (for Individual) PLEASING MY SPOUSE
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 350.00

Date of Receipt 11 / 01 / 2016
Transaction ID : SA11A.462865
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

C. GLIEBE, MARK, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 13055 PROMONTORY TRAIL
 City ROSCOE State IL Zip Code 61073-9714
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) REGAL BELOIT CORP Occupation (for Individual) CEO
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt 10 / 26 / 2016
Transaction ID : SA11A.447596
 Amount of Each Receipt this Period 1000.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶ 1150.00
TOTAL This Period (last page this line number only).....▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1313 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. GLORIOD, JOHN, A., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 752 SILVER OAK GROVE
 City COLORADO SPRINGS State CO Zip Code 80906-8627
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) REALTOR
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 425.00

Date of Receipt 11 / 04 / 2016
Transaction ID : SA11A.472412
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

B. GLORIOD, JOHN, A., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 752 SILVER OAK GROVE
 City COLORADO SPRINGS State CO Zip Code 80906-8627
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) REALTOR
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 425.00

Date of Receipt 11 / 04 / 2016
Transaction ID : SA11A.473518
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

C. GLUSKIN, ROBERT, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5427 EDGEHOLLOW
 City DALLAS State TX Zip Code 75287-7506
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 10 / 31 / 2016
Transaction ID : SA11A.457993
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶ 450.00
TOTAL This Period (last page this line number only).....▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1314 OF 4311
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. GLUSKIN, ROBERT, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5427 EDGEHOLLOW
 City DALLAS State TX Zip Code 75287-7506
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 10 / 31 / 2016
Transaction ID : SA11A.457996
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

B. GNAZZO, JANE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 169 COMMONWEALTH AVE
 City BOSTON State MA Zip Code 02116-2221
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 700.00

Date of Receipt 10 / 24 / 2016
Transaction ID : SA11A.445695
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

C. GNAZZO, JANE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 169 COMMONWEALTH AVE
 City BOSTON State MA Zip Code 02116-2221
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 700.00

Date of Receipt 10 / 24 / 2016
Transaction ID : SA11A.445814
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 600.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1315 OF 4311
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. GNAZZO, JANE, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 169 COMMONWEALTH AVE

City BOSTON	State MA	Zip Code 02116-2221
----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
700.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	24	/	2016

Transaction ID : SA11A.445815

Amount of Each Receipt this Period
100.00

Memo Item CONTRIBUTION

B. GNIEWYK, EUGENE, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 340 N FRANKLIN TURNPIKE

City HO HO KUS	State NJ	Zip Code 07423-1041
-------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
300.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	02	/	2016

Transaction ID : SA11A.465143

Amount of Each Receipt this Period
200.00

Memo Item CONTRIBUTION

C. GODDARD, JOHN, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address PO BOX 15550

City LOVES PARK	State IL	Zip Code 61132-5550
--------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) INVESTMENT RESOURCES CORP	Occupation (for Individual) MANAGER
--	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
2700.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	25	/	2016

Transaction ID : SA11A.447283

Amount of Each Receipt this Period
2700.00

Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	3000.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1316 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. GODDEN, QUINDRID, J., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2207 E APACHE SPRINGS LANE
 City GREEN VALLEY State AZ Zip Code 85614-5534
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 350.00

Date of Receipt 11 / 04 / 2016
Transaction ID : SA11A.472466
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

B. GODDIK, JOHANNES, , MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 21215 SE NECK RD
 City DAYTON State OR Zip Code 97114-7819
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) FARMER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt 10 / 24 / 2016
Transaction ID : SA11A.443711
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

C. GODDIK, JOHANNES, , MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 21215 SE NECK RD
 City DAYTON State OR Zip Code 97114-7819
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) FARMER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt 11 / 03 / 2016
Transaction ID : SA11A.465277
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 250.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1317 OF 4311
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. GODDIK, JOHANNES, , MR.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 21215 SE NECK RD

City DAYTON	State OR	Zip Code 97114-7819
----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) SELF EMPLOYED	Occupation (for Individual) FARMER
--	---------------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11		04		2016

Transaction ID : SA11A.467669

Amount of Each Receipt this Period
100.00

Memo Item
CONTRIBUTION

B. GODDIK, JOHANNES, , MR.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 21215 SE NECK RD

City DAYTON	State OR	Zip Code 97114-7819
----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) SELF EMPLOYED	Occupation (for Individual) FARMER
--	---------------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11		10		2016

Transaction ID : SA11A.468232

Amount of Each Receipt this Period
100.00

Memo Item
CONTRIBUTION

C. GODFREY, LINDA, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 116 4TH STREET

City DESOTO	State IL	Zip Code 62924-3534
----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) ASTON	Occupation (for Individual) SMALL BUSINESS OWNER
--	---

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
525.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		24		2016

Transaction ID : SA11A.445569

Amount of Each Receipt this Period
50.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	250.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1318 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name A. GODFREY, LINDA, , ,			Date of Receipt M M M / D D D / Y Y Y Y Y Y 10 / 24 / 2016
Mailing Address 116 4TH STREET			Transaction ID : SA11A.445571
City DESOTO	State IL	Zip Code 62924-3534	Amount of Each Receipt this Period 50.00
FEC ID number of contributing federal political committee. C			<input type="checkbox"/> Memo Item CONTRIBUTION
Name of Employer (for Individual) ASTON		Occupation (for Individual) SMALL BUSINESS OWNER	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 525.00		

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name B. GODFREY, LINDA, , ,			Date of Receipt M M M / D D D / Y Y Y Y Y Y 10 / 27 / 2016
Mailing Address 116 4TH STREET			Transaction ID : SA11A.454026
City DESOTO	State IL	Zip Code 62924-3534	Amount of Each Receipt this Period 25.00
FEC ID number of contributing federal political committee. C			<input type="checkbox"/> Memo Item CONTRIBUTION
Name of Employer (for Individual) ASTON		Occupation (for Individual) SMALL BUSINESS OWNER	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 525.00		

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name C. GODFREY, STEVE, , ,			Date of Receipt M M M / D D D / Y Y Y Y Y Y 10 / 27 / 2016
Mailing Address 605 OLD TREATY PL			Transaction ID : SA11A.453649
City SAINT AUGUSTINE	State FL	Zip Code 32086-9112	Amount of Each Receipt this Period 100.00
FEC ID number of contributing federal political committee. C			<input type="checkbox"/> Memo Item CONTRIBUTION
Name of Employer (for Individual) NONE		Occupation (for Individual) RETIRED	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Aggregate Year-to-Date ▼ 300.00		

SUBTOTAL of Receipts This Page (optional).....▶	175.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1319 OF 4311
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. GOETZ, DAVID, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1392 WATERSTON DRIVE

City EVANS	State GA	Zip Code 30809-5037
---------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) AMERIPRISE FINANCIAL	Occupation (for Individual) FRANSHISE OWNER
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	28	/	2016

Transaction ID : SA11A.456255

Amount of Each Receipt this Period
250.00

Memo Item CONTRIBUTION

B. GOFORTH, LINDA, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 845 RIM RD.

City LOS ALAMOS	State NM	Zip Code 87544-2952
--------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
545.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	01	/	2016

Transaction ID : SA11A.462825

Amount of Each Receipt this Period
50.00

Memo Item CONTRIBUTION

C. GOGOLAK, MARION, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 824 RUE DEVILLE

City NAPLES	State FL	Zip Code 34108-8531
----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	28	/	2016

Transaction ID : SA11A.455957

Amount of Each Receipt this Period
100.00

Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	400.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1320 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. GOLD, EDWARD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 10548 CLEARWOOD CT
 City LOS ANGELES State CA Zip Code 90077-2019
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 275.00

Date of Receipt 10 / 23 / 2016
Transaction ID : SA11A.446505
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

B. GOLD, EDWARD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 10548 CLEARWOOD CT
 City LOS ANGELES State CA Zip Code 90077-2019
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 275.00

Date of Receipt 10 / 31 / 2016
Transaction ID : SA11A.464374
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

C. GOLD, EDWARD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 10548 CLEARWOOD CT
 City LOS ANGELES State CA Zip Code 90077-2019
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 275.00

Date of Receipt 11 / 02 / 2016
Transaction ID : SA11A.469880
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶ 100.00
TOTAL This Period (last page this line number only).....▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1321 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
Team Ryan

A. GOLDEN, DENNIS, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3700 SWEETBRIAR LANE
 City COLLEYVILLE State TX Zip Code 76034-8681
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 375.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 30 / 2016
Transaction ID : SA11A.460195
 Amount of Each Receipt this Period
 50.00
 Memo Item
 CONTRIBUTION

B. GOLDEN, DENNIS, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3700 SWEETBRIAR LANE
 City COLLEYVILLE State TX Zip Code 76034-8681
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 375.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 03 / 2016
Transaction ID : SA11A.468523
 Amount of Each Receipt this Period
 50.00
 Memo Item
 CONTRIBUTION

C. GOLDEN, DENNIS, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3700 SWEETBRIAR LANE
 City COLLEYVILLE State TX Zip Code 76034-8681
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 375.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 02 / 2016
Transaction ID : SA11A.470037
 Amount of Each Receipt this Period
 50.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	150.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1322 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. GOLDEN, R., S., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 8550 BARTON ROAD
 APT 253
 City GRANITE BAY State CA Zip Code 95746-8843
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 01 / 2016
Transaction ID : SA11A.461587
 Amount of Each Receipt this Period
 200.00
 Memo Item
 CONTRIBUTION

B. GOLDEN, ROGER, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2117 3RD STREET NW
 City CENTER POINT State AL Zip Code 35215-3431
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) ENGINEER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 25 / 2016
Transaction ID : SA11A.451744
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION

C. GOLDFARB, LAURENCE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 11 GRACE AVENUE, SUITE 405
 City GREAT NECK State NY Zip Code 11021-2417
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) LAURAND ASSOCIATES, INC Occupation (for Individual) COMMODITIES
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 31 / 2016
Transaction ID : SA11A.464539
 Amount of Each Receipt this Period
 250.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	550.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1323 OF 4311
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. GOLDRICH, LAWRNCE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 6474 COLLEGE PARK SQ.
 SUTE 306
 City VIRGINIA BEACH State VA Zip Code 23464-3609
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1250.00

Date of Receipt 10 / 26 / 2016
Transaction ID : SA11A.451032
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

B. GOLDRICH, LAWRNCE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 6474 COLLEGE PARK SQ.
 SUTE 306
 City VIRGINIA BEACH State VA Zip Code 23464-3609
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1250.00

Date of Receipt 11 / 04 / 2016
Transaction ID : SA11A.470845
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

C. GOLDSTONE, ARTHUR, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO BOX 300
 City LITTLE COMPTON State RI Zip Code 02837-0300
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 11 / 01 / 2016
Transaction ID : SA11A.461657
 Amount of Each Receipt this Period 500.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 1000.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1324 OF 4311
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. GOLDSMITH, JOEL, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 6493 ENCLAVE WAY
 City BOCA RATON State FL Zip Code 33496-4076
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 10 / 26 / 2016
Transaction ID : SA11A.454554
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

B. GOLDSPIK, NANCY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1175 YORK AVE. 2K
 City NEW YORK State NY Zip Code 10065-7169
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) LVMH INC Occupation (for Individual) SR ADMINISTRATOR
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 337.00

Date of Receipt 11 / 02 / 2016
Transaction ID : SA11A.469592
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

C. GOLUB, HARVEY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3399 PGA BLVD STE 360 360
 City PALM BEACH GARDENS State FL Zip Code 33410-2804
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 12000.00

Date of Receipt 11 / 14 / 2016
Transaction ID : SA11A.468433
 Amount of Each Receipt this Period 5000.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 5300.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1325 OF 4311
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. GOMES, CHARLES, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 2053 RIESLING WAY

City CAMERON PARK	State CA	Zip Code 95682-7730
----------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) VERISIGN, INC.	Occupation (for Individual) VP
---	-----------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1150.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		26		2016

Transaction ID : SA11A.454503

Amount of Each Receipt this Period
100.00

Memo Item
CONTRIBUTION

B. GOMES, CHARLES, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 2053 RIESLING WAY

City CAMERON PARK	State CA	Zip Code 95682-7730
----------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) VERISIGN, INC.	Occupation (for Individual) VP
---	-----------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1150.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		26		2016

Transaction ID : SA11A.454504

Amount of Each Receipt this Period
100.00

Memo Item
CONTRIBUTION

C. GONG, YUKUAN, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1102 MATTHEWS DR

City ROCKVILLE	State MD	Zip Code 20851-2336
-------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) INFORMATION REQUESTED PER BEST EFFORTS	Occupation (for Individual) INFORMATION REQUESTED PER BES
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
2700.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11		01		2016

Transaction ID : SA11A.461911

Amount of Each Receipt this Period
2700.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	2900.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1326 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. GONSOLIN, CHRIS, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO BOX 11457

City PENSACOLA	State FL	Zip Code 32524-1457
-------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) MB BARGE CO	Occupation (for Individual) OWNER
--	--------------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
350.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 07 / 2016
Transaction ID : SA11A.480332

Amount of Each Receipt this Period
250.00

Memo Item
CONTRIBUTION

B. GONZALEZ, JUAN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 623 GULF LAND DRIVE

City APOPKA	State FL	Zip Code 32712-4843
----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 02 / 2016
Transaction ID : SA11A.466126

Amount of Each Receipt this Period
50.00

Memo Item
CONTRIBUTION

C. GONZALEZ, JUAN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 623 GULF LAND DRIVE

City APOPKA	State FL	Zip Code 32712-4843
----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 02 / 2016
Transaction ID : SA11A.466134

Amount of Each Receipt this Period
50.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	350.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1327 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name A. GONZALEZ, MARCILIO, , ,			Date of Receipt M M M / D D D / Y Y Y Y Y Y 10 / 24 / 2016		
Mailing Address 753 WESTCHESTER DR			Transaction ID : SA11A.449553		
City CORPUS CHRISTI	State TX	Zip Code 78408-2818	Amount of Each Receipt this Period 50.00		
FEC ID number of contributing federal political committee. C			<input type="checkbox"/> Memo Item CONTRIBUTION		
Name of Employer (for Individual) AIR LIQUIDE		Occupation (for Individual) PIPELINE TECH	Aggregate Year-to-Date ▼ 550.00		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼					

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name B. GONZALEZ, MARCILIO, , ,			Date of Receipt M M M / D D D / Y Y Y Y Y Y 10 / 31 / 2016		
Mailing Address 753 WESTCHESTER DR			Transaction ID : SA11A.459265		
City CORPUS CHRISTI	State TX	Zip Code 78408-2818	Amount of Each Receipt this Period 50.00		
FEC ID number of contributing federal political committee. C			<input type="checkbox"/> Memo Item CONTRIBUTION		
Name of Employer (for Individual) AIR LIQUIDE		Occupation (for Individual) PIPELINE TECH	Aggregate Year-to-Date ▼ 550.00		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼					

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name C. GONZALEZ, MARCILIO, , ,			Date of Receipt M M M / D D D / Y Y Y Y Y Y 11 / 02 / 2016		
Mailing Address 753 WESTCHESTER DR			Transaction ID : SA11A.466297		
City CORPUS CHRISTI	State TX	Zip Code 78408-2818	Amount of Each Receipt this Period 50.00		
FEC ID number of contributing federal political committee. C			<input type="checkbox"/> Memo Item CONTRIBUTION		
Name of Employer (for Individual) AIR LIQUIDE		Occupation (for Individual) PIPELINE TECH	Aggregate Year-to-Date ▼ 550.00		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)					

SUBTOTAL of Receipts This Page (optional).....	150.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1328 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
Team Ryan

A. GONZALEZ, MARCILIO, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 753 WESTCHESTER DR
 City CORPUS CHRISTI State TX Zip Code 78408-2818
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) AIR LIQUIDE Occupation (for Individual) PIPELINE TECH
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 550.00

Date of Receipt 11 / 07 / 2016
Transaction ID : SA11A.480639
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

B. GOOD, RAMONA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2104STRATFORD DR. UNIT A UNIT A
 City MONTROSE State CO Zip Code 81401-
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 260.00

Date of Receipt 10 / 20 / 2016
Transaction ID : SA11A.442156
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

C. GOODALL, RICHARD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address P. O. BOX 231265
 City CENTREVILLE State VA Zip Code 20120-7265
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 11 / 06 / 2016
Transaction ID : SA11A.477337
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	325.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1329 OF 4311
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. GOODE, EDWARD, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 14072 CLARION WAY

City ORO VALLEY	State AZ	Zip Code 85755-8600
--------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
235.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		31		2016

Transaction ID : SA11A.458891

Amount of Each Receipt this Period
25.00

Memo Item CONTRIBUTION

B. GOODELL, KAREN, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 6627 SOUTH 107 CIRCLE

City OMAHA	State NE	Zip Code 68127-4542
---------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
210.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11		01		2016

Transaction ID : SA11A.462846

Amount of Each Receipt this Period
27.00

Memo Item CONTRIBUTION

C. GOODEN, MARIKO, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 2112 CENTURY PARK LANE #105

City LOS ANGELES	State CA	Zip Code 90067-3300
---------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
750.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		26		2016

Transaction ID : SA11A.450443

Amount of Each Receipt this Period
100.00

Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	152.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1330 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. GOODEN, MARIKO, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2112 CENTURY PARK LANE #105
 City LOS ANGELES State CA Zip Code 90067-3300
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 750.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 04 / 2016
Transaction ID : SA11A.470772
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION

B. GOODEN, MARIKO, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2112 CENTURY PARK LANE #105
 City LOS ANGELES State CA Zip Code 90067-3300
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 750.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 04 / 2016
Transaction ID : SA11A.473172
 Amount of Each Receipt this Period
 50.00
 Memo Item
 CONTRIBUTION

C. GOODMAN, EDWIN, F., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3740 CLOUDLAND DRIVE NW
 City ATLANTA State GA Zip Code 30327-2910
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 21 / 2016
Transaction ID : SA11A.443641
 Amount of Each Receipt this Period
 50.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	200.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1331 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. GOODMAN, EDWIN, F., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3740 CLOUDLAND DRIVE NW
 City ATLANTA State GA Zip Code 30327-2910
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 11 / 01 / 2016
Transaction ID : SA11A.461784
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

B. GOODMAN, MICHAEL, A., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 107 ROBINHOOD ROAD
 City ASHEVILLE State NC Zip Code 28804-1636
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) BUNCOMBE CONSTRUCTION Occupation (for Individual) PRESIDENT
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 700.00

Date of Receipt 11 / 03 / 2016
Transaction ID : SA11A.465582
 Amount of Each Receipt this Period 200.00
 Memo Item CONTRIBUTION

C. GOODMAN, PAUL, P., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 99 S SERVICE ROAD APT 402
 City NEW HYDE PARK State NY Zip Code 11040-1071
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 420.00

Date of Receipt 11 / 10 / 2016
Transaction ID : SA11A.468198
 Amount of Each Receipt this Period 35.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶ 335.00
TOTAL This Period (last page this line number only).....▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1332 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
Team Ryan

A. GOODROE, GLENN, O., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5058 ORTEGA FOREST DR
 City JACKSONVILLE State FL Zip Code 32210-8114
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SWISHER INTERNATIONAL, INC. Occupation (for Individual) EXECUTIVE
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 2000.00

Date of Receipt 10 / 24 / 2016
Transaction ID : SA11A.443462
 Amount of Each Receipt this Period 2000.00
 Memo Item CONTRIBUTION

B. GOODSON, JOHN, C., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 406 WALNUT ST
 City TEXARKANA State AR Zip Code 71854-5219
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) KEIL & GOODSON Occupation (for Individual) ATTORNEY
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 10000.00

Date of Receipt 10 / 24 / 2016
Transaction ID : SA11A.443454
 Amount of Each Receipt this Period 10000.00
 Memo Item CONTRIBUTION

C. GOODWYN, JENNIFER, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4680 ABERLOUR WAY
 City MARIETTA State GA Zip Code 30067-3507
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 10 / 31 / 2016
Transaction ID : SA11A.459100
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	12100.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1333 OF 4311
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
Team Ryan

A. GOODYEAR, WILLIAM, M., MR.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 155 N WACKER DR.
STE 4250

City CHICAGO State IL Zip Code 60606-1750

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
25000.00

Date of Receipt
10 / 24 / 2016
Transaction ID : SA11A.443493

Amount of Each Receipt this Period
25000.00

Memo Item CONTRIBUTION

B. GOONAN, KATHLEEN, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 949 GLENANGUS DRIVE

City BEL AIR State MD Zip Code 21015-5601

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NAVIGANT CONSULTING Occupation (for Individual) PHYSICIAN

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
300.00

Date of Receipt
11 / 04 / 2016
Transaction ID : SA11A.472098

Amount of Each Receipt this Period
100.00

Memo Item CONTRIBUTION

C. GOPON, GENE, G., MR.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1153 LEE ST
105

City DES PLAINES State IL Zip Code 60016-6516

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
350.00

Date of Receipt
10 / 31 / 2016
Transaction ID : SA11A.458005

Amount of Each Receipt this Period
50.00

Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	25150.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1334 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. GOPON, GENE, G., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1153 LEE ST
 105
 City DES PLAINES State IL Zip Code 60016-6516
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 350.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 31 / 2016
Transaction ID : SA11A.458011
 Amount of Each Receipt this Period
 50.00
 Memo Item
 CONTRIBUTION

B. GORDON, BYFIELD, D., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1117 SANTA ANA AVE SE
 City ALBUQUERQUE State NM Zip Code 87123-4234
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 800.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 31 / 2016
Transaction ID : SA11A.463326
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION

C. GORDON, BYFIELD, D., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1117 SANTA ANA AVE SE
 City ALBUQUERQUE State NM Zip Code 87123-4234
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 800.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 31 / 2016
Transaction ID : SA11A.463331
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	250.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1335 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. GORDON, BYFIELD, D., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1117 SANTA ANA AVE SE
 City ALBUQUERQUE State NM Zip Code 87123-4234
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 800.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 31 / 2016
Transaction ID : SA11A.463353
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION

B. GORDON, BYFIELD, D., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1117 SANTA ANA AVE SE
 City ALBUQUERQUE State NM Zip Code 87123-4234
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 800.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 02 / 2016
Transaction ID : SA11A.469769
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION

C. GORDON, BYFIELD, D., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1117 SANTA ANA AVE SE
 City ALBUQUERQUE State NM Zip Code 87123-4234
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 800.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 02 / 2016
Transaction ID : SA11A.469772
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	300.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1336 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. GORDON, BYFIELD, D., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1117 SANTA ANA AVE SE
 City ALBUQUERQUE State NM Zip Code 87123-4234
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 800.00

Date of Receipt 11 / 02 / 2016
Transaction ID : SA11A.469785
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

B. GORDON, BYFIELD, D., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1117 SANTA ANA AVE SE
 City ALBUQUERQUE State NM Zip Code 87123-4234
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 800.00

Date of Receipt 11 / 02 / 2016
Transaction ID : SA11A.469790
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

C. GORDON, CONSTANCE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1001 PORTUGAL DRIVE
 City STAFFORD State VA Zip Code 22554-2025
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 425.00

Date of Receipt 10 / 26 / 2016
Transaction ID : SA11A.451282
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	300.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1337 OF 4311
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. GORDON, CONSTANCE, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1001 PORTUGAL DRIVE

City STAFFORD	State VA	Zip Code 22554-2025
------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
425.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	01	/	2016

Transaction ID : SA11A.462882

Amount of Each Receipt this Period
50.00

Memo Item CONTRIBUTION

B. GORDON, ROSALITA, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 149 PATRIOTS ROAD

City MORRIS PLAINS	State NJ	Zip Code 07950-1148
-----------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
350.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	27	/	2016

Transaction ID : SA11A.453234

Amount of Each Receipt this Period
25.00

Memo Item CONTRIBUTION

C. GORDON, ROSALITA, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 149 PATRIOTS ROAD

City MORRIS PLAINS	State NJ	Zip Code 07950-1148
-----------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
350.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	04	/	2016

Transaction ID : SA11A.472161

Amount of Each Receipt this Period
25.00

Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	100.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1338 OF 4311
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. GORMAN, BRIAN, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 35 ACORN LN
City PEMBROKE State MA Zip Code 02359-2629
FEC ID number of contributing federal political committee. **C**
Name of Employer (for Individual) IPUBLISH MEDIA Occupation (for Individual) SALES
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 1000.00

Date of Receipt 11 / 04 / 2016
Transaction ID : SA11A.473957
Amount of Each Receipt this Period 500.00
 Memo Item
CONTRIBUTION

B. GORMAN, C., , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 4304 NUTMEG LANE APT 151
City LISLE State IL Zip Code 60532-1793
FEC ID number of contributing federal political committee. **C**
Name of Employer (for Individual) INFORMATION REQUESTED PER BEST EFFORTS Occupation (for Individual) INFORMATION REQUESTED PER BE
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 250.00

Date of Receipt 11 / 02 / 2016
Transaction ID : SA11A.465049
Amount of Each Receipt this Period 250.00
 Memo Item
CONTRIBUTION

C. GORMAN, MICHAEL, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 2008 ALTHEA LANE
City BOWIE State MD Zip Code 20716-1518
FEC ID number of contributing federal political committee. **C**
Name of Employer (for Individual) WHITEMARSH INFORMATION SYSTEMS CORPORA Occupation (for Individual) INFORMATION TECHNOLOGY
Receipt For: Primary General Other (specify)
Aggregate Year-to-Date ▼ 287.00

Date of Receipt 10 / 29 / 2016
Transaction ID : SA11A.460726
Amount of Each Receipt this Period 25.00
 Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 775.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1339 OF 4311
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. GORMAN, MICHAEL, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 2008 ALTHEA LANE

City BOWIE	State MD	Zip Code 20716-1518
---------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) WHITEMARSH INFORMATION SYSTEMS CORPORA	Occupation (for Individual) INFORMATION TECHNOLOGY
---	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
287.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	02	/	2016

Transaction ID : SA11A.466534

Amount of Each Receipt this Period
100.00

Memo Item
CONTRIBUTION

B. GORMAN, SONJA, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 66 PLANTERS ROW

City HILTON HEAD	State SC	Zip Code 29928-5504
---------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) YOUNG INVESTMENT	Occupation (for Individual) EXEC.
---	--------------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
400.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	31	/	2016

Transaction ID : SA11A.458969

Amount of Each Receipt this Period
100.00

Memo Item
CONTRIBUTION

C. GORMAN, SONJA, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 66 PLANTERS ROW

City HILTON HEAD	State SC	Zip Code 29928-5504
---------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) YOUNG INVESTMENT	Occupation (for Individual) EXEC.
---	--------------------------------------

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
400.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	30	/	2016

Transaction ID : SA11A.460318

Amount of Each Receipt this Period
100.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	300.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1340 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
Team Ryan

A. GOSCHI, BARBARA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 525 FOREST AVENUE
 City WILMETTE State IL Zip Code 60091-1923
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) CLINICAL PSYCHOLOGIST
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 300.00

Date of Receipt 11 / 06 / 2016
Transaction ID : SA11A.477156
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

B. GOSCHI, BARBARA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 525 FOREST AVENUE
 City WILMETTE State IL Zip Code 60091-1923
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) CLINICAL PSYCHOLOGIST
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 300.00

Date of Receipt 11 / 06 / 2016
Transaction ID : SA11A.477158
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

C. GOSCHI, BARBARA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 525 FOREST AVENUE
 City WILMETTE State IL Zip Code 60091-1923
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) CLINICAL PSYCHOLOGIST
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 300.00

Date of Receipt 11 / 06 / 2016
Transaction ID : SA11A.477159
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 150.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1341 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. GOSCHI, BARBARA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 525 FOREST AVENUE
 City WILMETTE State IL Zip Code 60091-1923
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) CLINICAL PSYCHOLOGIST
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 300.00

Date of Receipt **11 / 06 / 2016**
Transaction ID : SA11A.477182
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

B. GOSHORN, NEUMON, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1044 BROOKFIELD ROAD , SUITE 102
 City MEMPHIS State TN Zip Code 38119-3877
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) GOSHORN AESTHETIC CLINIC Occupation (for Individual) PLASTIC SURGEON
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 400.00

Date of Receipt **10 / 30 / 2016**
Transaction ID : SA11A.464925
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

C. GOSHORN, NEUMON, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1044 BROOKFIELD ROAD , SUITE 102
 City MEMPHIS State TN Zip Code 38119-3877
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) GOSHORN AESTHETIC CLINIC Occupation (for Individual) PLASTIC SURGEON
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 400.00

Date of Receipt **11 / 04 / 2016**
Transaction ID : SA11A.471018
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	300.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1342 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. GOSMAN, ROBERT, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1530 S WOLCOTT STREET
 City CASPER State WY Zip Code 82601-4343
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 11 / 03 / 2016
Transaction ID : SA11A.474437
 Amount of Each Receipt this Period
 250.00
 Memo Item
 CONTRIBUTION

B. GOSS, ARTHUR, L., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2405 PATRIOT HEIGHTS APT. 4415
 City COLORADO SPRINGS State CO Zip Code 80904-5146
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 800.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 10 / 25 / 2016
Transaction ID : SA11A.447452
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION

C. GOSS, ROBERT, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 34 SOUTH 990 EAST
 City AMERICAN FORK State UT Zip Code 84003-2920
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 375.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 10 / 30 / 2016
Transaction ID : SA11A.459693
 Amount of Each Receipt this Period
 50.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	400.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1343 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. GOSS, ROBERT, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 34 SOUTH 990 EAST
 City AMERICAN FORK State UT Zip Code 84003-2920
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 375.00

Date of Receipt 11 / 04 / 2016
Transaction ID : SA11A.473387
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

B. GOSS, ROBERT, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 34 SOUTH 990 EAST
 City AMERICAN FORK State UT Zip Code 84003-2920
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 375.00

Date of Receipt 11 / 04 / 2016
Transaction ID : SA11A.479658
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

C. GOTTFRID, JOSHUA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 20975 ISLAND SOUND CIRCLE UNIT 103
 City ESTERO State FL Zip Code 33928-8964
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt 10 / 20 / 2016
Transaction ID : SA11A.442131
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶ 150.00
TOTAL This Period (last page this line number only).....▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1344 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
Team Ryan

A. GOTTFRID, JOSHUA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 20975 ISLAND SOUND CIRCLE
 UNIT 103
 City ESTERO State FL Zip Code 33928-8964
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt 10 / 23 / 2016
Transaction ID : SA11A.446378
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

B. GOTTMANN, HENRY, D., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 208 HEATHER LANE
 City RAMSEY State NJ Zip Code 07446-1035
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 355.00

Date of Receipt 10 / 23 / 2016
Transaction ID : SA11A.446318
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

C. GOTTMANN, HENRY, D., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 208 HEATHER LANE
 City RAMSEY State NJ Zip Code 07446-1035
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 355.00

Date of Receipt 10 / 31 / 2016
Transaction ID : SA11A.463931
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 250.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1345 OF 4311
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. GOTTMANN, HENRY, D., MR.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 208 HEATHER LANE

City RAMSEY State NJ Zip Code 07446-1035

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 355.00

Date of Receipt 10 / 31 / 2016
Transaction ID : SA11A.463936

Amount of Each Receipt this Period 50.00

Memo Item CONTRIBUTION

B. GOTTSACKER, SUSAN, C., ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 3313 SKYLINE BOULEVARD

City RENO State NV Zip Code 89509-5658

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) ARTIST

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 600.00

Date of Receipt 10 / 24 / 2016
Transaction ID : SA11A.443686

Amount of Each Receipt this Period 300.00

Memo Item CONTRIBUTION

C. GOUDIE, J. E., , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1938 POMAR WAY

City WALNUT CREEK State CA Zip Code 94598-1431

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 450.00

Date of Receipt 11 / 01 / 2016
Transaction ID : SA11A.461615

Amount of Each Receipt this Period 200.00

Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 550.00

TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1346 OF 4311
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. GOULD, JOHN, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 5613 HATHAWAY CT

City MIDLAND State TX Zip Code 79707-5005

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 25 / 2016

Transaction ID : SA11A.451903

Amount of Each Receipt this Period
 100.00

Memo Item CONTRIBUTION

B. GOULD, JOHN, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 5613 HATHAWAY CT

City MIDLAND State TX Zip Code 79707-5005

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 07 / 2016

Transaction ID : SA11A.480739

Amount of Each Receipt this Period
 100.00

Memo Item CONTRIBUTION

C. GOULD, ROBERT, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 28536 TALORI TERRACE

City BONITA SPRINGS State FL Zip Code 34135-8384

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼ 950.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 25 / 2016

Transaction ID : SA11A.452134

Amount of Each Receipt this Period
 250.00

Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	450.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1347 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. GOWMAN, STEVE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 214 N. NORRIS AVE.
 City PHOENIXVILLE State PA Zip Code 19460-2475
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 29 / 2016
Transaction ID : SA11A.461029
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION

B. GOWMAN, STEVE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 214 N. NORRIS AVE.
 City PHOENIXVILLE State PA Zip Code 19460-2475
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 04 / 2016
Transaction ID : SA11A.471963
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION

C. GRABLE, ROBERT, C., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4447 CRESTLINE ROAD
 City FT WORTH State TX Zip Code 76107-1502
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) KELLY HART & HALLMAN LLP Occupation (for Individual) PARTNER
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 3000.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 24 / 2016
Transaction ID : SA11A.443442
 Amount of Each Receipt this Period
 2500.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	2700.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1348 OF 4311
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. GRACE, OLIVER, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 241 BRADLEY PLACE

City PALM BEACH	State FL	Zip Code 33480-3738
--------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) DEVELOPMENT SERVICES LLC	Occupation (for Individual) MANAGING MEMBER
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
2000.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
10		29		2016

Transaction ID : SA11A.460426

Amount of Each Receipt this Period
1000.00

Memo Item
CONTRIBUTION

B. GRACE, OLIVER, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 241 BRADLEY PLACE

City PALM BEACH	State FL	Zip Code 33480-3738
--------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) DEVELOPMENT SERVICES LLC	Occupation (for Individual) MANAGING MEMBER
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
2000.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
10		29		2016

Transaction ID : SA11A.460427

Amount of Each Receipt this Period
1000.00

Memo Item
CONTRIBUTION

C. GRAD, ASSUNTA, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 850 MELLODY ROAD

City LAKE FOREST	State IL	Zip Code 60045-2044
---------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
250.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
10		27		2016

Transaction ID : SA11A.457033

Amount of Each Receipt this Period
250.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	2250.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1349 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
Team Ryan

A. GRAD, JOHN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 850 MELLODY ROAD
 City LAKE FOREST State IL Zip Code 60045-2044
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 30 / 2016
Transaction ID : SA11A.459829
 Amount of Each Receipt this Period
 250.00
 Memo Item
 CONTRIBUTION

B. GRADEL, ADDISON, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 8613 FLINT AVENUE
 City LUBBOCK State TX Zip Code 79423-3013
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SOLE PROPRIETOR Occupation (for Individual) PSYCHOLOGY DOCTOR
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 950.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 30 / 2016
Transaction ID : SA11A.460245
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION

C. GRADEL, ADDISON, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 8613 FLINT AVENUE
 City LUBBOCK State TX Zip Code 79423-3013
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SOLE PROPRIETOR Occupation (for Individual) PSYCHOLOGY DOCTOR
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 950.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 01 / 2016
Transaction ID : SA11A.467404
 Amount of Each Receipt this Period
 250.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	600.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1350 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
A. GRADEL, ADDISON, , ,

Mailing Address **8613 FLINT AVENUE**

City LUBBOCK	State TX	Zip Code 79423-3013
------------------------	--------------------	-------------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) SOLE PROPRIETOR	Occupation (for Individual) PSYCHOLOGY DOCTOR
---	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
950.00

Date of Receipt
11 / 04 / 2016

Transaction ID : SA11A.471000

Amount of Each Receipt this Period
100.00

Memo Item
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
B. GRADY, JOHN, , ,

Mailing Address **300 LOCKE LANE**

City BENTON	State TN	Zip Code 37307-4737
-----------------------	--------------------	-------------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
--	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
875.00

Date of Receipt
10 / 27 / 2016

Transaction ID : SA11A.453110

Amount of Each Receipt this Period
50.00

Memo Item
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
C. GRADY, JOHN, , ,

Mailing Address **300 LOCKE LANE**

City BENTON	State TN	Zip Code 37307-4737
-----------------------	--------------------	-------------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
--	---

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
875.00

Date of Receipt
10 / 31 / 2016

Transaction ID : SA11A.459212

Amount of Each Receipt this Period
100.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	250.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1351 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. GRADY, JOHN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 300 LOCKE LANE
 City BENTON State TN Zip Code 37307-4737
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 875.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 31 / 2016
Transaction ID : SA11A.463288
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION

B. GRADY, JOHN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 300 LOCKE LANE
 City BENTON State TN Zip Code 37307-4737
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 875.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 02 / 2016
Transaction ID : SA11A.469938
 Amount of Each Receipt this Period
 50.00
 Memo Item
 CONTRIBUTION

C. GRADY, JOHN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 300 LOCKE LANE
 City BENTON State TN Zip Code 37307-4737
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 875.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 02 / 2016
Transaction ID : SA11A.469951
 Amount of Each Receipt this Period
 50.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	200.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1352 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. GRADY, JOHN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 300 LOCKE LANE
 City BENTON State TN Zip Code 37307-4737
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 875.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 02 / 2016
Transaction ID : SA11A.469952
 Amount of Each Receipt this Period
 50.00
 Memo Item
 CONTRIBUTION

B. GRAFF, STEPHEN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 13130 WATERTOWN PLANK RD.
 303
 City ELM GROVE State WI Zip Code 53122-2237
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 450.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 30 / 2016
Transaction ID : SA11A.464853
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION

C. GRAFTON, DANIEL, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1228 STOKES RD
 STOKES RD
 City CANTON State MS Zip Code 39046-8002
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 27 / 2016
Transaction ID : SA11A.456600
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	250.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1353 OF 4311
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. GRAFTON, DANIEL, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1228 STOKES RD
STOKES RD

City CANTON	State MS	Zip Code 39046-8002
----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
300.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		27		2016

Transaction ID : SA11A.456602

Amount of Each Receipt this Period
100.00

Memo Item
CONTRIBUTION

B. GRAHAM, GEORGE, E., , JR.
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1820 VALLEY RD

City MEADOWBROOK	State PA	Zip Code 19046-1312
---------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) INFORMATION REQUESTED PER BEST EFFORTS	Occupation (for Individual) INFORMATION REQUESTED PER BE
---	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
5000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		28		2016

Transaction ID : SA11A.449673

Amount of Each Receipt this Period
5000.00

Memo Item
CONTRIBUTION

C. GRAICHEN, DANA, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 56 DURRELLS WOODS ROAD

City ARUNDEL	State ME	Zip Code 04046-7503
-----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) SELF EMPLOYED	Occupation (for Individual) PHYSICIAN
--	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
300.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		21		2016

Transaction ID : SA11A.444170

Amount of Each Receipt this Period
100.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	5200.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1354 OF 4311
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. GRAICHEN, DANA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 56 DURRELLS WOODS ROAD
 City ARUNDEL State ME Zip Code 04046-7503
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) PHYSICIAN
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 10 / 21 / 2016
Transaction ID : SA11A.444171
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

B. GRAMLEY, JAMEE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 124 108TH AVENUE SE
 City BELLEVUE State WA Zip Code 98004-6262
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NORDSTROM Occupation (for Individual) ANALYST
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 310.00

Date of Receipt 11 / 07 / 2016
Transaction ID : SA11A.480362
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

C. GRANATH, MARYANNE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 244 LONG NECK POINT RD
 City DARIEN State CT Zip Code 06820-5816
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 650.00

Date of Receipt 10 / 31 / 2016
Transaction ID : SA11A.464376
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶ 250.00
TOTAL This Period (last page this line number only).....▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1355 OF 4311
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. GRANATH, MARYANNE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 244 LONG NECK POINT RD
 City DARIEN State CT Zip Code 06820-5816
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 650.00

Date of Receipt 10 / 31 / 2016
Transaction ID : SA11A.464378
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

B. GRANADILLO, PEDRO, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 7218 TORY LN
 City NAPLES State FL Zip Code 34108-8790
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 10 / 26 / 2016
Transaction ID : SA11A.450730
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

C. GRANADILLO, PEDRO, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 7218 TORY LN
 City NAPLES State FL Zip Code 34108-8790
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 11 / 07 / 2016
Transaction ID : SA11A.476203
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	200.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 1356 OF 4311
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Team Ryan

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name A. GRANLUND, CAROLYN, , ,			Date of Receipt MM / DD / YYYY 10 / 26 / 2016
Mailing Address 26 STANDISH RD. P.O. BOX 7			Transaction ID : SA11A.454482
City EAST ORLEANS	State MA	Zip Code 02643-	Amount of Each Receipt this Period 100.00
FEC ID number of contributing federal political committee. C			<input type="checkbox"/> Memo Item CONTRIBUTION
Name of Employer (for Individual) NONE		Occupation (for Individual) RETIRED	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 225.00		

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name B. GRANT, ABIGAIL, , ,			Date of Receipt MM / DD / YYYY 10 / 21 / 2016
Mailing Address 9230 WISTER DRIVE			Transaction ID : SA11A.444461
City LA MESA	State CA	Zip Code 91941-4138	Amount of Each Receipt this Period 50.00
FEC ID number of contributing federal political committee. C			<input type="checkbox"/> Memo Item CONTRIBUTION
Name of Employer (for Individual) NONE		Occupation (for Individual) RETIRED	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 375.00		

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name C. GRANT, ABIGAIL, , ,			Date of Receipt MM / DD / YYYY 11 / 04 / 2016
Mailing Address 9230 WISTER DRIVE			Transaction ID : SA11A.471941
City LA MESA	State CA	Zip Code 91941-4138	Amount of Each Receipt this Period 50.00
FEC ID number of contributing federal political committee. C			<input type="checkbox"/> Memo Item CONTRIBUTION
Name of Employer (for Individual) NONE		Occupation (for Individual) RETIRED	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Aggregate Year-to-Date ▼ 375.00		

SUBTOTAL of Receipts This Page (optional).....▶	200.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1357 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. GRASSEL, CAROL, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 142 RIVERWOOD
 City BOERNE State TX Zip Code 78006-5788
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) INVESTMENTS
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 11 / 06 / 2016
Transaction ID : SA11A.480854
 Amount of Each Receipt this Period
 250.00
 Memo Item
 CONTRIBUTION

B. GRAUSTEIN, JOHN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 57 WAITES LANDING ROAD
 City FALMOUTH State ME Zip Code 04105-1932
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 10 / 30 / 2016
Transaction ID : SA11A.459831
 Amount of Each Receipt this Period
 250.00
 Memo Item
 CONTRIBUTION

C. GRAVES, JOHN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2135 E 47TH STREET
 City TULSA State OK Zip Code 74105-4918
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) CYCLONIC VALUE COMPANY Occupation (for Individual) MFG
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 2700.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 10 / 28 / 2016
Transaction ID : SA11A.454694
 Amount of Each Receipt this Period
 2700.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	3200.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1358 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
A. GRAVES, MICHAEL, A., MR.,

Mailing Address **934 N CATALINA STREET**

City BURBANK	State CA	Zip Code 91505-2605
------------------------	--------------------	-------------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) LITTLEJEHNS CANDIES	Occupation (for Individual) CANDYMAKER
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
400.00

Date of Receipt
11 / 01 / 2016

Transaction ID : SA11A.461856

Amount of Each Receipt this Period
100.00

Memo Item
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
B. GRAY, GEOFFREY, , ,

Mailing Address **8101 E DARTMOUTH #45**

City DENVER	State CO	Zip Code 80231-4259
-----------------------	--------------------	-------------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
--	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
400.00

Date of Receipt
11 / 04 / 2016

Transaction ID : SA11A.474205

Amount of Each Receipt this Period
100.00

Memo Item
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
C. GRAY, LINDA, , ,

Mailing Address **305 WESTLAKE DRIVE**

City AUSTIN	State TX	Zip Code 78746-5305
-----------------------	--------------------	-------------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) TWO HILLS STUDIO INC	Occupation (for Individual) BUSINESS MANAGER
--	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
937.00

Date of Receipt
10 / 20 / 2016

Transaction ID : SA11A.442474

Amount of Each Receipt this Period
50.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	250.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1359 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. GRAY, LINDA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 305 WESTLAKE DRIVE
 City AUSTIN State TX Zip Code 78746-5305
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) TWO HILLS STUDIO INC Occupation (for Individual) BUSINESS MANAGER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 937.00

Date of Receipt 10 / 20 / 2016
Transaction ID : SA11A.442475
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

B. GRAY, LINDA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 305 WESTLAKE DRIVE
 City AUSTIN State TX Zip Code 78746-5305
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) TWO HILLS STUDIO INC Occupation (for Individual) BUSINESS MANAGER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 937.00

Date of Receipt 10 / 26 / 2016
Transaction ID : SA11A.450860
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

C. GRAY, LINDA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 305 WESTLAKE DRIVE
 City AUSTIN State TX Zip Code 78746-5305
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) TWO HILLS STUDIO INC Occupation (for Individual) BUSINESS MANAGER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 937.00

Date of Receipt 10 / 26 / 2016
Transaction ID : SA11A.450878
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶ 125.00
TOTAL This Period (last page this line number only).....▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1360 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. GRAY, LINDA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 305 WESTLAKE DRIVE
 City AUSTIN State TX Zip Code 78746-5305
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) TWO HILLS STUDIO INC Occupation (for Individual) BUSINESS MANAGER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 937.00

Date of Receipt 10 / 26 / 2016
Transaction ID : SA11A.450883
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

B. GRAY, LINDA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 305 WESTLAKE DRIVE
 City AUSTIN State TX Zip Code 78746-5305
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) TWO HILLS STUDIO INC Occupation (for Individual) BUSINESS MANAGER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 937.00

Date of Receipt 10 / 26 / 2016
Transaction ID : SA11A.450886
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

C. GRAY, LINDA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 305 WESTLAKE DRIVE
 City AUSTIN State TX Zip Code 78746-5305
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) TWO HILLS STUDIO INC Occupation (for Individual) BUSINESS MANAGER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 937.00

Date of Receipt 11 / 08 / 2016
Transaction ID : SA11A.479734
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 75.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1361 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name A. GRAY, LINDA, , ,			Date of Receipt MM / DD / YYYY 11 / 08 / 2016
Mailing Address 305 WESTLAKE DRIVE			Transaction ID : SA11A.479736
City AUSTIN	State TX	Zip Code 78746-5305	Amount of Each Receipt this Period 25.00
FEC ID number of contributing federal political committee. C			<input type="checkbox"/> Memo Item CONTRIBUTION
Name of Employer (for Individual) TWO HILLS STUDIO INC		Occupation (for Individual) BUSINESS MANAGER	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 937.00		

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name B. GRAY, ROBERT, B., ,			Date of Receipt MM / DD / YYYY 11 / 08 / 2016
Mailing Address 13953 E. ARIZONA AVE.			Transaction ID : SA11A.467954
City AURORA	State CO	Zip Code 80012-4649	Amount of Each Receipt this Period 40.00
FEC ID number of contributing federal political committee. C			<input type="checkbox"/> Memo Item CONTRIBUTION
Name of Employer (for Individual) NONE		Occupation (for Individual) RETIRED	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 265.00		

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name C. GRAY, ROBERT, B., ,			Date of Receipt MM / DD / YYYY 11 / 07 / 2016
Mailing Address 13953 E. ARIZONA AVE.			Transaction ID : SA11A.480521
City AURORA	State CO	Zip Code 80012-4649	Amount of Each Receipt this Period 25.00
FEC ID number of contributing federal political committee. C			<input type="checkbox"/> Memo Item CONTRIBUTION
Name of Employer (for Individual) NONE		Occupation (for Individual) RETIRED	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Aggregate Year-to-Date ▼ 265.00		

SUBTOTAL of Receipts This Page (optional).....▶	90.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1362 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
Team Ryan

A. GRAY, RODGER, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO BOX 2550
 City HOBBS State NM Zip Code 88241-2550
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 10 / 27 / 2016
Transaction ID : SA11A.452345
 Amount of Each Receipt this Period 500.00
 Memo Item CONTRIBUTION

B. GRAY, RUSSELL, J., MR., JR.
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5180 MEADVILLE STREET
 City EXCELSIOR State MN Zip Code 55331-8790
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 350.00

Date of Receipt 11 / 07 / 2016
Transaction ID : SA11A.467822
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

C. GRAYBILL, RUTH, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 743 ARROUES DRIVE
 City FULLERTON State CA Zip Code 92835-1924
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) GRAYBILL, RUTH ANN Occupation (for Individual) COUNSELING
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 350.00

Date of Receipt 10 / 28 / 2016
Transaction ID : SA11A.456432
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	700.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1363 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
GRAYBILL, RUTH, , ,

Mailing Address **743 ARROUES DRIVE**

City FULLERTON	State CA	Zip Code 92835-1924
--------------------------	--------------------	-------------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) GRAYBILL, RUTH ANN	Occupation (for Individual) COUNSELING
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **350.00**

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		31		2016

Transaction ID : SA11A.463220

Amount of Each Receipt this Period

25.00

Memo Item
CONTRIBUTION

B. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
GRAYBILL, RUTH, , ,

Mailing Address **743 ARROUES DRIVE**

City FULLERTON	State CA	Zip Code 92835-1924
--------------------------	--------------------	-------------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) GRAYBILL, RUTH ANN	Occupation (for Individual) COUNSELING
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **350.00**

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11		05		2016

Transaction ID : SA11A.478826

Amount of Each Receipt this Period

25.00

Memo Item
CONTRIBUTION

C. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
GRAYBILL, RUTH, , ,

Mailing Address **743 ARROUES DRIVE**

City FULLERTON	State CA	Zip Code 92835-1924
--------------------------	--------------------	-------------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) GRAYBILL, RUTH ANN	Occupation (for Individual) COUNSELING
--	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼ **350.00**

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11		05		2016

Transaction ID : SA11A.479239

Amount of Each Receipt this Period

50.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	100.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1364 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. GREAVES, BOBBY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 8510 GREAVES LN.
 City SCHERTZ State TX Zip Code 78154-6221
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) JSR INC. Occupation (for Individual) PRESIDENT
 Receipt For: Primary General
 Other (specify) ▼ Aggregate Year-to-Date ▼ 1700.00

Date of Receipt **11 / 04 / 2016**
Transaction ID : SA11A.472199
 Amount of Each Receipt this Period 250.00
 Memo Item
 CONTRIBUTION

B. GREAVES, DAVID, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 9232 SE ELDORADO WAY
 City HOBE SOUND State FL Zip Code 33455-8924
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) STARR COMPANIES Occupation (for Individual) SR. LOSS CONTROL CONSULTANT
 Receipt For: Primary General
 Other (specify) ▼ Aggregate Year-to-Date ▼ 450.00

Date of Receipt **10 / 29 / 2016**
Transaction ID : SA11A.461154
 Amount of Each Receipt this Period 90.00
 Memo Item
 CONTRIBUTION

C. GREAVES, WILLIAM, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 8851N BAYSIDE DR
 City BAYSIDE State WI Zip Code 53217-1910
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) ABPM Occupation (for Individual) PHYSICIAN
 Receipt For: Primary General
 Other (specify) Aggregate Year-to-Date ▼ 3125.00

Date of Receipt **11 / 07 / 2016**
Transaction ID : SA11A.476560
 Amount of Each Receipt this Period 50.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	390.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1365 OF 4311
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. GRECO, DAVE, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 7307 SHARP AVE

City ST LOUIS	State MO	Zip Code 63116-3039
------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
800.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		25		2016

Transaction ID : SA11A.447894

Amount of Each Receipt this Period
50.00

Memo Item
CONTRIBUTION

B. GRECO, DAVE, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 7307 SHARP AVE

City ST LOUIS	State MO	Zip Code 63116-3039
------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
800.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		27		2016

Transaction ID : SA11A.457073

Amount of Each Receipt this Period
50.00

Memo Item
CONTRIBUTION

C. GRECO, DAVE, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 7307 SHARP AVE

City ST LOUIS	State MO	Zip Code 63116-3039
------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
800.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11		01		2016

Transaction ID : SA11A.467369

Amount of Each Receipt this Period
50.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	150.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1366 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. GRECO, DAVE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 7307 SHARP AVE
 City ST LOUIS State MO Zip Code 63116-3039
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 800.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 07 / 2016
Transaction ID : SA11A.480546
 Amount of Each Receipt this Period
 50.00
 Memo Item
 CONTRIBUTION

B. GRECO, NANCY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1103 WESTFIELD AVE
 City RAHWAY State NJ Zip Code 07065-1916
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 07 / 2016
Transaction ID : SA11A.476658
 Amount of Each Receipt this Period
 250.00
 Memo Item
 CONTRIBUTION

C. GREELY, TED, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2447 LACHMAN AVE NE
 City ST MICHAEL State MN Zip Code 55376-9275
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) MARCO Occupation (for Individual) SALES
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 06 / 2016
Transaction ID : SA11A.480820
 Amount of Each Receipt this Period
 250.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	550.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1367 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. GREEN, BARBARA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 237 SOUTH ST., #40
 City SHREWSBURY State MA Zip Code 01545-5441
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 04 / 2016
Transaction ID : SA11A.474186
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION

B. GREENE, DON, , MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 6640 RIATA DR
 City REDDING State CA Zip Code 96002-9726
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 310.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 21 / 2016
Transaction ID : SA11A.447208
 Amount of Each Receipt this Period
 25.00
 Memo Item
 CONTRIBUTION

C. GREENE, DON, , MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 6640 RIATA DR
 City REDDING State CA Zip Code 96002-9726
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 310.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 21 / 2016
Transaction ID : SA11A.447211
 Amount of Each Receipt this Period
 25.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	150.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1368 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13 <input type="checkbox"/> 11b <input type="checkbox"/> 14 <input type="checkbox"/> 11c <input type="checkbox"/> 15 <input type="checkbox"/> 12 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. GREENE, DON, , MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 6640 RIATA DR
 City REDDING State CA Zip Code 96002-9726
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 310.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 25 / 2016
Transaction ID : SA11A.448240
 Amount of Each Receipt this Period
 30.00
 Memo Item
 CONTRIBUTION

B. GREENE, DON, , MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 6640 RIATA DR
 City REDDING State CA Zip Code 96002-9726
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 310.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 01 / 2016
Transaction ID : SA11A.467434
 Amount of Each Receipt this Period
 25.00
 Memo Item
 CONTRIBUTION

C. GREENWOOD, ELIZABETH, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3163 CHARING CROSS PLACE
 City GLENDALE State CA Zip Code 91206-1446
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 275.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 27 / 2016
Transaction ID : SA11A.454235
 Amount of Each Receipt this Period
 25.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	80.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1369 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. GREENWOOD, ELIZABETH, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3163 CHARING CROSS PLACE
 City GLENDALE State CA Zip Code 91206-1446
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 275.00

Date of Receipt 10 / 26 / 2016
Transaction ID : SA11A.454505
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

B. GREEN, GEORGE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 787 S ROYS AVE
 City COLUMBUS State OH Zip Code 43204-2358
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) OHIO STATE UNIVERSITY Occupation (for Individual) LECTURER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 600.00

Date of Receipt 10 / 25 / 2016
Transaction ID : SA11A.451778
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

C. GREEN, GEORGE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 787 S ROYS AVE
 City COLUMBUS State OH Zip Code 43204-2358
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) OHIO STATE UNIVERSITY Occupation (for Individual) LECTURER
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 600.00

Date of Receipt 11 / 04 / 2016
Transaction ID : SA11A.479341
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	250.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1370 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. GREEN, GEORGE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 787 S ROYS AVE
 City COLUMBUS State OH Zip Code 43204-2358
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) OHIO STATE UNIVERSITY Occupation (for Individual) LECTURER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 600.00

Date of Receipt 11 / 04 / 2016
Transaction ID : SA11A.479342
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

B. GREEN, GEORGE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 787 S ROYS AVE
 City COLUMBUS State OH Zip Code 43204-2358
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) OHIO STATE UNIVERSITY Occupation (for Individual) LECTURER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 600.00

Date of Receipt 11 / 07 / 2016
Transaction ID : SA11A.480519
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

C. GREEN, GEORGE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 787 S ROYS AVE
 City COLUMBUS State OH Zip Code 43204-2358
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) OHIO STATE UNIVERSITY Occupation (for Individual) LECTURER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 600.00

Date of Receipt 11 / 07 / 2016
Transaction ID : SA11A.480520
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 200.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1371 OF 4311
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. GREENWELL, JIM, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1931 QUAIL HOLLOW RD

City PEKIN	State IL	Zip Code 61554-6349
---------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
350.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	27	/	2016

Transaction ID : SA11A.453701

Amount of Each Receipt this Period
50.00

Memo Item CONTRIBUTION

B. GREENWELL, JIM, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1931 QUAIL HOLLOW RD

City PEKIN	State IL	Zip Code 61554-6349
---------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
350.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	04	/	2016

Transaction ID : SA11A.471357

Amount of Each Receipt this Period
100.00

Memo Item CONTRIBUTION

C. GREENFIELD, JOAN, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 876 CENTRAL AVE

City WOODMERE	State NY	Zip Code 11598-2147
------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
400.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	30	/	2016

Transaction ID : SA11A.460123

Amount of Each Receipt this Period
100.00

Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	250.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1372 OF 4311
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. GREENFIELD, JOAN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 876 CENTRAL AVE
 City WOODMERE State NY Zip Code 11598-2147
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt 11 / 04 / 2016
Transaction ID : SA11A.473184
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

B. GREEN, JOHN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1973 PENFOLD WAY
 City BALDWINVILLE State NY Zip Code 13027-8710
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) BSE RECYCLING Occupation (for Individual) SALES
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 347.00

Date of Receipt 10 / 20 / 2016
Transaction ID : SA11A.441954
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

C. GREENWOOD, JON, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1087 STATE HIGHWAY 310
 City CANTON State NY Zip Code 13617-3378
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) FARMER
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 2000.00

Date of Receipt 10 / 27 / 2016
Transaction ID : SA11A.452260
 Amount of Each Receipt this Period 1000.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶ 1200.00
TOTAL This Period (last page this line number only).....▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1373 OF 4311
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. GREEN, KURT, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 146 SOMERSET CT

City NOBLESVILLE	State IN	Zip Code 46060-4281
---------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
257.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	26	/	2016

Transaction ID : SA11A.450243

Amount of Each Receipt this Period
25.00

Memo Item
CONTRIBUTION

B. GREENE, LEIGH, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 7518 WEST C AVENUE

City KALAMAZOO	State MI	Zip Code 49009-8838
-------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) INTERNATIONAL MAIL SERV., INC	Occupation (for Individual) PRINCIPAL/CFO
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
531.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	27	/	2016

Transaction ID : SA11A.453477

Amount of Each Receipt this Period
25.00

Memo Item
CONTRIBUTION

C. GREENEICH, LUCY, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 17144 MAJESTIC VIEW DR.

City RENO	State NV	Zip Code 89521-6862
--------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
350.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	31	/	2016

Transaction ID : SA11A.463438

Amount of Each Receipt this Period
30.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	80.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1374 OF 4311
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. GREENEICH, LUCY, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 17144 MAJESTIC VIEW DR.

City RENO	State NV	Zip Code 89521-6862
--------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
350.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	02	/	2016

Transaction ID : SA11A.465919

Amount of Each Receipt this Period
45.00

Memo Item CONTRIBUTION

B. GREENEICH, LUCY, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 17144 MAJESTIC VIEW DR.

City RENO	State NV	Zip Code 89521-6862
--------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
350.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	02	/	2016

Transaction ID : SA11A.469663

Amount of Each Receipt this Period
45.00

Memo Item CONTRIBUTION

C. GREENEICH, LUCY, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 17144 MAJESTIC VIEW DR.

City RENO	State NV	Zip Code 89521-6862
--------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
350.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	04	/	2016

Transaction ID : SA11A.472303

Amount of Each Receipt this Period
30.00

Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	120.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1375 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. GREENEICH, LUCY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 17144 MAJESTIC VIEW DR.
 City RENO State NV Zip Code 89521-6862
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 350.00

Date of Receipt
 11 / 07 / 2016
Transaction ID : SA11A.479940
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

B. GREENEICH, LUCY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 17144 MAJESTIC VIEW DR.
 City RENO State NV Zip Code 89521-6862
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 350.00

Date of Receipt
 11 / 07 / 2016
Transaction ID : SA11A.479942
 Amount of Each Receipt this Period 45.00
 Memo Item CONTRIBUTION

C. GREENEICH, LUCY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 17144 MAJESTIC VIEW DR.
 City RENO State NV Zip Code 89521-6862
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 350.00

Date of Receipt
 11 / 07 / 2016
Transaction ID : SA11A.479954
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 95.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1376 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. GREENEICH, LUCY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 17144 MAJESTIC VIEW DR.
 City RENO State NV Zip Code 89521-6862
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 350.00

Date of Receipt
 11 / 07 / 2016
Transaction ID : SA11A.479956
 Amount of Each Receipt this Period
 25.00
 Memo Item
 CONTRIBUTION

B. GREENLEAF, MARTIN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 455 MT EDEN RD
 City KIRKWOOD State PA Zip Code 17536-9553
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) FARMER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 315.00

Date of Receipt
 10 / 22 / 2016
Transaction ID : SA11A.446689
 Amount of Each Receipt this Period
 30.00
 Memo Item
 CONTRIBUTION

C. GREEN, MARY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 126 JOHNSTON STREET
 City MOBILE State AL Zip Code 36611-1850
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 430.00

Date of Receipt
 10 / 26 / 2016
Transaction ID : SA11A.451181
 Amount of Each Receipt this Period
 30.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 85.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1377 OF 4311
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. GREENFIELD, MARK, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 114 CEDAR BRANCH

City MADISON	State AL	Zip Code 35756-
-----------------	-------------	--------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) MARK GREENFIELD	Occupation (for Individual) DIRECTOR PROJECT CONTROL
--	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		31		2016

Transaction ID : SA11A.457656

Amount of Each Receipt this Period
250.00

Memo Item CONTRIBUTION

B. GREENLEAF, MARTIN, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 455 MT EDEN RD

City KIRKWOOD	State PA	Zip Code 17536-9553
------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) SELF EMPLOYED	Occupation (for Individual) FARMER
--	---------------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
315.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		31		2016

Transaction ID : SA11A.458209

Amount of Each Receipt this Period
25.00

Memo Item CONTRIBUTION

C. GREENLEAF, MARTIN, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 455 MT EDEN RD

City KIRKWOOD	State PA	Zip Code 17536-9553
------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) SELF EMPLOYED	Occupation (for Individual) FARMER
--	---------------------------------------

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
315.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11		02		2016

Transaction ID : SA11A.470165

Amount of Each Receipt this Period
25.00

Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	300.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1378 OF 4311
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. GREEN, NATHANIEL, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 7328 BARBERRY LANE

City NORFOLK	State VA	Zip Code 23505-3001
-----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) VA PILOT ASSN.	Occupation (for Individual) MARITIME PILOT
---	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
600.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		24		2016

Transaction ID : SA11A.445923

Amount of Each Receipt this Period
500.00

Memo Item
CONTRIBUTION

B. GREEN, NATHANIEL, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 7328 BARBERRY LANE

City NORFOLK	State VA	Zip Code 23505-3001
-----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) VA PILOT ASSN.	Occupation (for Individual) MARITIME PILOT
---	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
600.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11		06		2016

Transaction ID : SA11A.477036

Amount of Each Receipt this Period
100.00

Memo Item
CONTRIBUTION

C. GREEN, RINEY, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 4316 ESTES RD

City NASHVILLE	State TN	Zip Code 37215-3106
-------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) BASS BERRY & SIMS	Occupation (for Individual) ATTORNEY
--	---

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
431.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		27		2016

Transaction ID : SA11A.452736

Amount of Each Receipt this Period
100.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	700.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1379 OF 4311
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. GREEN, STEPHANIE, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 51 EAST LOOP

City MADERA	State CA	Zip Code 93637-4946
----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt

M M / D D / Y Y Y Y Y
11 / 04 / 2016

Transaction ID : SA11A.471547

Amount of Each Receipt this Period
20.00

Memo Item CONTRIBUTION

B. GREEN, STEPHANIE, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 51 EAST LOOP

City MADERA	State CA	Zip Code 93637-4946
----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt

M M / D D / Y Y Y Y Y
11 / 07 / 2016

Transaction ID : SA11A.476026

Amount of Each Receipt this Period
50.00

Memo Item CONTRIBUTION

C. GREEN, TOMMY, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 194 BONNER ROAD

City CARROLLTON	State GA	Zip Code 30117-8873
--------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
500.00

Date of Receipt

M M / D D / Y Y Y Y Y
10 / 29 / 2016

Transaction ID : SA11A.461195

Amount of Each Receipt this Period
250.00

Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	320.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1380 OF 4311
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. GREEN, TOMMY, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 194 BONNER ROAD
City CARROLLTON State GA Zip Code 30117-8873
FEC ID number of contributing federal political committee. **C**
Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 500.00

Date of Receipt 10 / 29 / 2016
Transaction ID : SA11A.461196
Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

B. GREENWOOD, WILLIAM, C., ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 545 E BUCKINGHAM WAY
City FRESNO State CA Zip Code 93704-4149
FEC ID number of contributing federal political committee. **C**
Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 500.00

Date of Receipt 10 / 31 / 2016
Transaction ID : SA11A.457285
Amount of Each Receipt this Period 500.00
 Memo Item CONTRIBUTION

C. GREER, DEBBIE, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 7300 HASENTREE CLUB DR
City WAKE FOREST State NC Zip Code 27587-1711
FEC ID number of contributing federal political committee. **C**
Name of Employer (for Individual) THE GREER GROUO, INC Occupation (for Individual) OWNER
Receipt For: Primary General Other (specify)
Aggregate Year-to-Date ▼ 255.00

Date of Receipt 10 / 25 / 2016
Transaction ID : SA11A.451949
Amount of Each Receipt this Period 30.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 780.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1381 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
Team Ryan

A. GREER, DEBBIE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 7300 HASENTREE CLUB DR
 City WAKE FOREST State NC Zip Code 27587-1711
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) THE GREER GROUO, INC Occupation (for Individual) OWNER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 255.00

Date of Receipt 10 / 31 / 2016
Transaction ID : SA11A.464446
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

B. GREGORY, FREDERICK, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 83 COOK AVE
 City YONKERS State NY Zip Code 10701-6339
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 550.00

Date of Receipt 11 / 04 / 2016
Transaction ID : SA11A.473268
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

C. GREGORY, JAMES, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 7408 HERITAGE GRAND PLACE
 City BRADENTON State FL Zip Code 34212-3257
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt 10 / 31 / 2016
Transaction ID : SA11A.458809
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	225.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1382 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
Team Ryan

A. GREGOR, JANICE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 12 COVENTRY
 City NEWPORT BEACH State CA Zip Code 92660-6809
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) GREGOR AND CO AAC Occupation (for Individual) OFFICE MGR
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 898.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 20 / 2016
Transaction ID : SA11A.442456
 Amount of Each Receipt this Period
 50.00
 Memo Item
 CONTRIBUTION

B. GREGOR, JANICE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 12 COVENTRY
 City NEWPORT BEACH State CA Zip Code 92660-6809
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) GREGOR AND CO AAC Occupation (for Individual) OFFICE MGR
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 898.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 26 / 2016
Transaction ID : SA11A.449862
 Amount of Each Receipt this Period
 25.00
 Memo Item
 CONTRIBUTION

C. GREGOR, JANICE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 12 COVENTRY
 City NEWPORT BEACH State CA Zip Code 92660-6809
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) GREGOR AND CO AAC Occupation (for Individual) OFFICE MGR
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 898.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 02 / 2016
Transaction ID : SA11A.470125
 Amount of Each Receipt this Period
 25.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	100.00
TOTAL This Period (last page this line number only).....▶	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 1383 OF 4311
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. GREGOR, JANICE, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 12 COVENTRY

City NEWPORT BEACH	State CA	Zip Code 92660-6809
-----------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) GREGOR AND CO AAC	Occupation (for Individual) OFFICE MGR
--	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
898.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 02 / 2016

Transaction ID : SA11A.470126

Amount of Each Receipt this Period
25.00

Memo Item
CONTRIBUTION

B. GREGOR, JANICE, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 12 COVENTRY

City NEWPORT BEACH	State CA	Zip Code 92660-6809
-----------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) GREGOR AND CO AAC	Occupation (for Individual) OFFICE MGR
--	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
898.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 04 / 2016

Transaction ID : SA11A.473304

Amount of Each Receipt this Period
50.00

Memo Item
CONTRIBUTION

C. GREGOR, JANICE, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 12 COVENTRY

City NEWPORT BEACH	State CA	Zip Code 92660-6809
-----------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) GREGOR AND CO AAC	Occupation (for Individual) OFFICE MGR
--	---

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
898.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 04 / 2016

Transaction ID : SA11A.474198

Amount of Each Receipt this Period
25.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	100.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1384 OF 4311
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. GREGOR, JANICE, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 12 COVENTRY

City NEWPORT BEACH	State CA	Zip Code 92660-6809
-----------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) GREGOR AND CO AAC	Occupation (for Individual) OFFICE MGR
--	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
898.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	07	/	2016

Transaction ID : SA11A.475292

Amount of Each Receipt this Period
25.00

Memo Item CONTRIBUTION

B. GREGOR, JANICE, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 12 COVENTRY

City NEWPORT BEACH	State CA	Zip Code 92660-6809
-----------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) GREGOR AND CO AAC	Occupation (for Individual) OFFICE MGR
--	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
898.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	07	/	2016

Transaction ID : SA11A.480573

Amount of Each Receipt this Period
25.00

Memo Item CONTRIBUTION

C. GREHAN, JULIA, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 257 DILSTON LANE

City MOBILE	State AL	Zip Code 36608-2019
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
1000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	26	/	2016

Transaction ID : SA11A.447636

Amount of Each Receipt this Period
1000.00

Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	1050.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1385 OF 4311
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. GREINER, DAVID, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 7047 WEST BELMONT DRIVE

City LITTLETON	State CO	Zip Code 80123-0808
-------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
500.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
11 / 05 / 2016

Transaction ID : SA11A.478759

Amount of Each Receipt this Period
250.00

Memo Item CONTRIBUTION

B. GREINER, DAVID, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 7047 WEST BELMONT DRIVE

City LITTLETON	State CO	Zip Code 80123-0808
-------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
500.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
11 / 05 / 2016

Transaction ID : SA11A.478762

Amount of Each Receipt this Period
250.00

Memo Item CONTRIBUTION

C. GREN, CHARLES, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 5266 RIDGEVALE WAY

City PLEASANTON	State CA	Zip Code 94566-5425
--------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
357.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
10 / 23 / 2016

Transaction ID : SA11A.446270

Amount of Each Receipt this Period
25.00

Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	525.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1386 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13 <input type="checkbox"/> 11b <input type="checkbox"/> 14 <input type="checkbox"/> 11c <input type="checkbox"/> 15 <input type="checkbox"/> 12 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. GREN, CHARLES, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5266 RIDGEVALE WAY
 City PLEASANTON State CA Zip Code 94566-5425
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 357.00

Date of Receipt 10 / 23 / 2016
Transaction ID : SA11A.446274
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

B. GREN, CHARLES, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5266 RIDGEVALE WAY
 City PLEASANTON State CA Zip Code 94566-5425
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 357.00

Date of Receipt 10 / 29 / 2016
Transaction ID : SA11A.460505
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

C. GREULICH, JOHN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1327 SAVANNAH LN.
 City CARLSBAD State CA Zip Code 92011-4855
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 850.00

Date of Receipt 10 / 24 / 2016
Transaction ID : SA11A.445941
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	75.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1387 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. GREULICH, JOHN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1327 SAVANNAH LN.
 City CARLSBAD State CA Zip Code 92011-4855
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 850.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 24 / 2016
Transaction ID : SA11A.445944
 Amount of Each Receipt this Period
 25.00
 Memo Item
 CONTRIBUTION

B. GREULICH, JOHN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1327 SAVANNAH LN.
 City CARLSBAD State CA Zip Code 92011-4855
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 850.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 23 / 2016
Transaction ID : SA11A.446402
 Amount of Each Receipt this Period
 25.00
 Memo Item
 CONTRIBUTION

C. GREULICH, JOHN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1327 SAVANNAH LN.
 City CARLSBAD State CA Zip Code 92011-4855
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 850.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 22 / 2016
Transaction ID : SA11A.446943
 Amount of Each Receipt this Period
 50.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	100.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1388 OF 4311		
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14	<input type="checkbox"/> 11c <input type="checkbox"/> 15	<input type="checkbox"/> 12 <input type="checkbox"/> 16

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NAME OF COMMITTEE (In Full)
Team Ryan

A. GREULICH, JOHN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1327 SAVANNAH LN.
 City CARLSBAD State CA Zip Code 92011-4855
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 850.00

Date of Receipt 10 / 26 / 2016
Transaction ID : SA11A.454464
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

B. GREULICH, JOHN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1327 SAVANNAH LN.
 City CARLSBAD State CA Zip Code 92011-4855
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 850.00

Date of Receipt 10 / 26 / 2016
Transaction ID : SA11A.454465
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

C. GREULICH, JOHN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1327 SAVANNAH LN.
 City CARLSBAD State CA Zip Code 92011-4855
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 850.00

Date of Receipt 10 / 26 / 2016
Transaction ID : SA11A.454466
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶ 150.00
TOTAL This Period (last page this line number only).....▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1389 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. GREULICH, JOHN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1327 SAVANNAH LN.
 City CARLSBAD State CA Zip Code 92011-4855
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 850.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 01 / 2016
Transaction ID : SA11A.467392
 Amount of Each Receipt this Period
 50.00
 Memo Item
 CONTRIBUTION

B. GREULICH, JOHN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1327 SAVANNAH LN.
 City CARLSBAD State CA Zip Code 92011-4855
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 850.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 04 / 2016
Transaction ID : SA11A.471031
 Amount of Each Receipt this Period
 50.00
 Memo Item
 CONTRIBUTION

C. GRIDER, BARBARA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 182 MAPLE VIEW DRIVE
 City WESTFIELD State IN Zip Code 46074-3308
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 225.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 07 / 2016
Transaction ID : SA11A.475394
 Amount of Each Receipt this Period
 25.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	125.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1390 OF 4311
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. GRIDER, BARBARA, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 182 MAPLE VIEW DRIVE

City WESTFIELD	State IN	Zip Code 46074-3308
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
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Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
225.00

Date of Receipt
11 / 07 / 2016
Transaction ID : SA11A.480302

Amount of Each Receipt this Period
25.00

Memo Item CONTRIBUTION

B. GRIEVE, TAMI, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1744 PRIMA LANE

City EVERGREEN	State CO	Zip Code 80439-9479
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) VISITING ANGELS	Occupation (for Individual) CAREGIVER
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
900.00

Date of Receipt
10 / 21 / 2016
Transaction ID : SA11A.444214

Amount of Each Receipt this Period
100.00

Memo Item CONTRIBUTION

C. GRIEVE, TAMI, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1744 PRIMA LANE

City EVERGREEN	State CO	Zip Code 80439-9479
-------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) VISITING ANGELS	Occupation (for Individual) CAREGIVER
--	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
900.00

Date of Receipt
10 / 21 / 2016
Transaction ID : SA11A.444215

Amount of Each Receipt this Period
100.00

Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	225.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1391 OF 4311
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
Team Ryan

A. GRIEVE, TAMI, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 1744 PRIMA LANE

City EVERGREEN	State CO	Zip Code 80439-9479
-------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) VISITING ANGELS	Occupation (for Individual) CAREGIVER
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
900.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	24	/	2016

Transaction ID : SA11A.449326

Amount of Each Receipt this Period
100.00

Memo Item
CONTRIBUTION

B. GRIEVE, TAMI, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 1744 PRIMA LANE

City EVERGREEN	State CO	Zip Code 80439-9479
-------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) VISITING ANGELS	Occupation (for Individual) CAREGIVER
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
900.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	26	/	2016

Transaction ID : SA11A.450009

Amount of Each Receipt this Period
100.00

Memo Item
CONTRIBUTION

C. GRIEVE, TAMI, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 1744 PRIMA LANE

City EVERGREEN	State CO	Zip Code 80439-9479
-------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) VISITING ANGELS	Occupation (for Individual) CAREGIVER
--	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
900.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	07	/	2016

Transaction ID : SA11A.480506

Amount of Each Receipt this Period
100.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	300.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1392 OF 4311
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. GRIFFIN, AMY, , MRS,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1030 5TH AVE APT 8W

City NEW YORK	State NY	Zip Code 10028-0136
------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) HOMEMAKER
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
50000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		21		2016

Transaction ID : SA11A.441917

Amount of Each Receipt this Period
50000.00

Memo Item
CONTRIBUTION

B. GRIFFITHS, DEBRA, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 111 PENN WOODS DRIVE

City IRWIN	State PA	Zip Code 15642-9434
---------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) POWER PIPING COMPANY	Occupation (for Individual) CONTROLLER
---	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
275.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11		02		2016

Transaction ID : SA11A.466765

Amount of Each Receipt this Period
25.00

Memo Item
CONTRIBUTION

C. GRIFFITH, DIANNE, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address PO BOX 122

City WATERTOWN	State MN	Zip Code 55388-0122
-------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
660.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		29		2016

Transaction ID : SA11A.460941

Amount of Each Receipt this Period
30.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	50055.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1393 OF 4311
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. GRIFFITH, DIANNE, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address **PO BOX 122**

City **WATERTOWN** State **MN** Zip Code **55388-0122**

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) **NONE** Occupation (for Individual) **RETIRED**

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **660.00**

Date of Receipt **10 / 29 / 2016**

Transaction ID : SA11A.460943

Amount of Each Receipt this Period **30.00**

Memo Item CONTRIBUTION

B. GRIFFIN, ERIC, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address **1418 CORNELL RD NE**

City **ATLANTA** State **GA** Zip Code **30306-2404**

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) **THE W. E. GRIFFIN CO** Occupation (for Individual) **SMALL BUSINESS OWNER**

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **800.00**

Date of Receipt **11 / 04 / 2016**

Transaction ID : SA11A.473930

Amount of Each Receipt this Period **400.00**

Memo Item CONTRIBUTION

C. GRIFFIN, GERALD, A., ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address **727 LARI DAWN**

City **SAN ANTONIO** State **TX** Zip Code **78258-4007**

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) **BRUNDAGE MGT CO** Occupation (for Individual) **EXEC**

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼ **450.00**

Date of Receipt **10 / 27 / 2016**

Transaction ID : SA11A.452259

Amount of Each Receipt this Period **200.00**

Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... **630.00**

TOTAL This Period (last page this line number only).....

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1394 OF 4311
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
Team Ryan

A. GRIFFIN, JOHN, A., MR.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1030 5TH AVE APT 8W

City NEW YORK	State NY	Zip Code 10028-0136
------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) BLUE RIDGE CAPITAL	Occupation (for Individual) EXECUTIVE
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
50000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	21	/	2016

Transaction ID : SA11A.441916

Amount of Each Receipt this Period
50000.00

Memo Item
CONTRIBUTION

B. GRIFFEY, LEE, , MR.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 6317 HORSEMANS CANYON DRIVE

City WALNUT CREEK	State CA	Zip Code 94595-4308
----------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
600.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	03	/	2016

Transaction ID : SA11A.465388

Amount of Each Receipt this Period
500.00

Memo Item
CONTRIBUTION

C. GRIFFIN, LINDA, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 5741 INDIAN CIRCLE

City HOUSTON	State TX	Zip Code 77057-1302
-----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	28	/	2016

Transaction ID : SA11A.455387

Amount of Each Receipt this Period
250.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	50750.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1395 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. GRIFFIN, LYNDA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 8 ROCK CREST LANE
 City SIGNAL MOUNTAIN State TN Zip Code 37377-2304
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) LOOKOUT TRAVEL AGENCY Occupation (for Individual) TRAVEL AGENT & AGENCY OWNER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 975.00

Date of Receipt **10 / 27 / 2016**
Transaction ID : SA11A.452705
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

B. GRIFFIN, LYNDA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 8 ROCK CREST LANE
 City SIGNAL MOUNTAIN State TN Zip Code 37377-2304
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) LOOKOUT TRAVEL AGENCY Occupation (for Individual) TRAVEL AGENT & AGENCY OWNER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 975.00

Date of Receipt **11 / 01 / 2016**
Transaction ID : SA11A.467388
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

C. GRIFFIN, LYNDA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 8 ROCK CREST LANE
 City SIGNAL MOUNTAIN State TN Zip Code 37377-2304
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) LOOKOUT TRAVEL AGENCY Occupation (for Individual) TRAVEL AGENT & AGENCY OWNER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 975.00

Date of Receipt **11 / 01 / 2016**
Transaction ID : SA11A.467391
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶ 150.00
TOTAL This Period (last page this line number only).....▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1396 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. GRIFFIN, LYNDA, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 8 ROCK CREST LANE

City SIGNAL MOUNTAIN	State TN	Zip Code 37377-2304
-------------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) LOOKOUT TRAVEL AGENCY	Occupation (for Individual) TRAVEL AGENT & AGENCY OWNER
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
975.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
11 / 04 / 2016

Transaction ID : SA11A.470364

Amount of Each Receipt this Period
25.00

Memo Item
CONTRIBUTION

B. GRIFFIN, LYNDA, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 8 ROCK CREST LANE

City SIGNAL MOUNTAIN	State TN	Zip Code 37377-2304
-------------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) LOOKOUT TRAVEL AGENCY	Occupation (for Individual) TRAVEL AGENT & AGENCY OWNER
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
975.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
11 / 04 / 2016

Transaction ID : SA11A.470382

Amount of Each Receipt this Period
50.00

Memo Item
CONTRIBUTION

C. GRIFFIN, LYNDA, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 8 ROCK CREST LANE

City SIGNAL MOUNTAIN	State TN	Zip Code 37377-2304
-------------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) LOOKOUT TRAVEL AGENCY	Occupation (for Individual) TRAVEL AGENT & AGENCY OWNER
--	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
975.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
11 / 04 / 2016

Transaction ID : SA11A.470407

Amount of Each Receipt this Period
200.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	275.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1397 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. GRIFFIN, LYNDA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 8 ROCK CREST LANE
 City SIGNAL MOUNTAIN State TN Zip Code 37377-2304
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) LOOKOUT TRAVEL AGENCY Occupation (for Individual) TRAVEL AGENT & AGENCY OWNER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 975.00

Date of Receipt 11 / 04 / 2016
Transaction ID : SA11A.470451
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

B. GRIFFIN, LYNDA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 8 ROCK CREST LANE
 City SIGNAL MOUNTAIN State TN Zip Code 37377-2304
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) LOOKOUT TRAVEL AGENCY Occupation (for Individual) TRAVEL AGENT & AGENCY OWNER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 975.00

Date of Receipt 11 / 04 / 2016
Transaction ID : SA11A.470458
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

C. GRIFFIN, LYNDA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 8 ROCK CREST LANE
 City SIGNAL MOUNTAIN State TN Zip Code 37377-2304
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) LOOKOUT TRAVEL AGENCY Occupation (for Individual) TRAVEL AGENT & AGENCY OWNER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 975.00

Date of Receipt 11 / 07 / 2016
Transaction ID : SA11A.474716
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	300.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1398 OF 4311
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. GRIFFIN, LYNDA, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 8 ROCK CREST LANE

City SIGNAL MOUNTAIN	State TN	Zip Code 37377-2304
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) LOOKOUT TRAVEL AGENCY	Occupation (for Individual) TRAVEL AGENT & AGENCY OWNER
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
975.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
11		07		2016

Transaction ID : SA11A.475687

Amount of Each Receipt this Period
100.00

Memo Item
CONTRIBUTION

B. GRIFFIN, LYNDA, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 8 ROCK CREST LANE

City SIGNAL MOUNTAIN	State TN	Zip Code 37377-2304
-------------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) LOOKOUT TRAVEL AGENCY	Occupation (for Individual) TRAVEL AGENT & AGENCY OWNER
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
975.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
11		08		2016

Transaction ID : SA11A.479760

Amount of Each Receipt this Period
50.00

Memo Item
CONTRIBUTION

C. GRIFFIN, LYNDA, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 8 ROCK CREST LANE

City SIGNAL MOUNTAIN	State TN	Zip Code 37377-2304
-------------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) LOOKOUT TRAVEL AGENCY	Occupation (for Individual) TRAVEL AGENT & AGENCY OWNER
--	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
975.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
11		08		2016

Transaction ID : SA11A.479763

Amount of Each Receipt this Period
50.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	200.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1399 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. GRIFFIN, LYNDA, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address **8 ROCK CREST LANE**

City SIGNAL MOUNTAIN	State TN	Zip Code 37377-2304
--------------------------------	--------------------	-------------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) LOOKOUT TRAVEL AGENCY	Occupation (for Individual) TRAVEL AGENT & AGENCY OWNER
---	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **975.00**

Date of Receipt
11 / 08 / 2016

Transaction ID : SA11A.479764

Amount of Each Receipt this Period
50.00

Memo Item
CONTRIBUTION

B. GRIFFIN, PETER, BAKEWELL, ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address **8 WINDABOUT DR**

City GREENWICH	State CT	Zip Code 06831-3702
--------------------------	--------------------	-------------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) LEXUS OF GREENWICH	Occupation (for Individual) BUSINESS OWNER
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **925.00**

Date of Receipt
10 / 30 / 2016

Transaction ID : SA11A.464909

Amount of Each Receipt this Period
100.00

Memo Item
CONTRIBUTION

C. GRIFFIN, PETER, BAKEWELL, ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address **8 WINDABOUT DR**

City GREENWICH	State CT	Zip Code 06831-3702
--------------------------	--------------------	-------------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) LEXUS OF GREENWICH	Occupation (for Individual) BUSINESS OWNER
--	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼ **925.00**

Date of Receipt
11 / 08 / 2016

Transaction ID : SA11A.479725

Amount of Each Receipt this Period
100.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	250.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1400 OF 4311
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
Team Ryan

A. GRIFFIN, ROBERT, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 41 BELLEGARDE DRIVE

City LITTLE ROCK	State AR	Zip Code 72223-9182
---------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
350.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11		05		2016

Transaction ID : SA11A.478347

Amount of Each Receipt this Period
25.00

Memo Item CONTRIBUTION

B. GRIFFITH, SCOTT, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 9 FAWN RIDGE CT

City REISTERSTOWN	State MD	Zip Code 21136-5654
----------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
275.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		22		2016

Transaction ID : SA11A.446845

Amount of Each Receipt this Period
50.00

Memo Item CONTRIBUTION

C. GRIFFITH, SCOTT, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 9 FAWN RIDGE CT

City REISTERSTOWN	State MD	Zip Code 21136-5654
----------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
275.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11		04		2016

Transaction ID : SA11A.471972

Amount of Each Receipt this Period
50.00

Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	125.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1401 OF 4311
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. GRIFFIN, WALTER, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 5213 HAYNES STERCHI RD.

City KNOXVILLE	State TN	Zip Code 37912-2816
-------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		30		2016

Transaction ID : SA11A.460171

Amount of Each Receipt this Period
100.00

Memo Item
CONTRIBUTION

B. GRIFFIN, WILLIAM, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 900 WASHINGTON STREET

City PEKIN	State IL	Zip Code 61554-4831
---------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
700.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		26		2016

Transaction ID : SA11A.449770

Amount of Each Receipt this Period
100.00

Memo Item
CONTRIBUTION

C. GRIFFIN, WILLIAM, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 900 WASHINGTON STREET

City PEKIN	State IL	Zip Code 61554-4831
---------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
700.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		27		2016

Transaction ID : SA11A.453222

Amount of Each Receipt this Period
250.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	450.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1402 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. GRIFFIN, WILLIAM, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 900 WASHINGTON STREET

City PEKIN	State IL	Zip Code 61554-4831
---------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
700.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	03	/	2016

Transaction ID : SA11A.469305

Amount of Each Receipt this Period
50.00

Memo Item
CONTRIBUTION

B. GRIFFIN, WILLIAM, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 900 WASHINGTON STREET

City PEKIN	State IL	Zip Code 61554-4831
---------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
700.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	06	/	2016

Transaction ID : SA11A.477286

Amount of Each Receipt this Period
50.00

Memo Item
CONTRIBUTION

C. GRIFFIN, Z.W., , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 10250 CONSTELLATION BLVD, STE 2600

City LOS ANGELES	State CA	Zip Code 90067-6240
---------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
2764.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	25	/	2016

Transaction ID : SA11A.448766

Amount of Each Receipt this Period
250.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	350.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1403 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. GRIFFIN, Z.W., , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 10250 CONSTELLATION BLVD, STE 2600

City LOS ANGELES	State CA	Zip Code 90067-6240
---------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
2764.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 27 / 2016
Transaction ID : SA11A.452558

Amount of Each Receipt this Period
 100.00

Memo Item
CONTRIBUTION

B. GRIFFIN, Z.W., , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 10250 CONSTELLATION BLVD, STE 2600

City LOS ANGELES	State CA	Zip Code 90067-6240
---------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
2764.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 28 / 2016
Transaction ID : SA11A.455788

Amount of Each Receipt this Period
 100.00

Memo Item
CONTRIBUTION

C. GRIFFIN, Z.W., , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 10250 CONSTELLATION BLVD, STE 2600

City LOS ANGELES	State CA	Zip Code 90067-6240
---------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
2764.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 07 / 2016
Transaction ID : SA11A.474912

Amount of Each Receipt this Period
 200.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	400.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1404 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. GRIM, DOUGLAS, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 170 GARDENDALE RD
 City TERRE HAUTE State IN Zip Code 47803-1732
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) ONI RISK PARTNERS Occupation (for Individual) PROPERTY AND CASUALTY INSURA
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 11 / 01 / 2016
Transaction ID : SA11A.462280
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

B. GRIM, DOUGLAS, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 170 GARDENDALE RD
 City TERRE HAUTE State IN Zip Code 47803-1732
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) ONI RISK PARTNERS Occupation (for Individual) PROPERTY AND CASUALTY INSURA
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 11 / 04 / 2016
Transaction ID : SA11A.472811
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

C. GRIM, DOUGLAS, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 170 GARDENDALE RD
 City TERRE HAUTE State IN Zip Code 47803-1732
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) ONI RISK PARTNERS Occupation (for Individual) PROPERTY AND CASUALTY INSURA
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 11 / 04 / 2016
Transaction ID : SA11A.473198
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶ 125.00
TOTAL This Period (last page this line number only).....▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1405 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. GRIMM, GARY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4785 CORNERSTONE DRIVE
 City WHITE LAKE State MI Zip Code 48383-3282
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 335.00

Date of Receipt 10 / 31 / 2016
Transaction ID : SA11A.458168
 Amount of Each Receipt this Period 30.00
 Memo Item CONTRIBUTION

B. GRIMM, GARY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4785 CORNERSTONE DRIVE
 City WHITE LAKE State MI Zip Code 48383-3282
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 335.00

Date of Receipt 10 / 31 / 2016
Transaction ID : SA11A.458191
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

C. GRIMM, GARY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4785 CORNERSTONE DRIVE
 City WHITE LAKE State MI Zip Code 48383-3282
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 335.00

Date of Receipt 11 / 02 / 2016
Transaction ID : SA11A.469398
 Amount of Each Receipt this Period 30.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 85.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1406 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. GRIMM, GARY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4785 CORNERSTONE DRIVE
 City WHITE LAKE State MI Zip Code 48383-3282
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 335.00

Date of Receipt 11 / 05 / 2016
Transaction ID : SA11A.478822
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

B. GRINDSTAFF, ROGER, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2696 INDIAN HILL'S CIRCLE 25
 City HICKORY State NC Zip Code 28601-7141
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) KNIGHTSTAFF INC. Occupation (for Individual) OWNER/PARTNER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 800.00

Date of Receipt 10 / 31 / 2016
Transaction ID : SA11A.457715
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

C. GRINDSTAFF, ROGER, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2696 INDIAN HILL'S CIRCLE 25
 City HICKORY State NC Zip Code 28601-7141
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) KNIGHTSTAFF INC. Occupation (for Individual) OWNER/PARTNER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 800.00

Date of Receipt 10 / 31 / 2016
Transaction ID : SA11A.457733
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	225.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1407 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. GRINDSTAFF, ROGER, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2696 INDIAN HILL'S CIRCLE
 25
 City HICKORY State NC Zip Code 28601-7141
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) KNIGHTSTAFF INC. Occupation (for Individual) OWNER/PARTNER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 800.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 31 / 2016
Transaction ID : SA11A.457737
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION

B. GRINDSTAFF, ROGER, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2696 INDIAN HILL'S CIRCLE
 25
 City HICKORY State NC Zip Code 28601-7141
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) KNIGHTSTAFF INC. Occupation (for Individual) OWNER/PARTNER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 800.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 02 / 2016
Transaction ID : SA11A.466990
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION

C. GRINDSTAFF, ROGER, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2696 INDIAN HILL'S CIRCLE
 25
 City HICKORY State NC Zip Code 28601-7141
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) KNIGHTSTAFF INC. Occupation (for Individual) OWNER/PARTNER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 800.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 07 / 2016
Transaction ID : SA11A.475369
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	300.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1408 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. GRINDSTAFF, ROGER, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2696 INDIAN HILL'S CIRCLE
 25
 City HICKORY State NC Zip Code 28601-7141
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) KNIGHTSTAFF INC. Occupation (for Individual) OWNER/PARTNER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 800.00

Date of Receipt 11 / 05 / 2016
Transaction ID : SA11A.478510
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

B. GRISETO, JAMES, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 524 BRADBURY LN.
 City GENEVA State IL Zip Code 60134-3644
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 700.00

Date of Receipt 10 / 24 / 2016
Transaction ID : SA11A.446188
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

C. GRISETO, JAMES, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 524 BRADBURY LN.
 City GENEVA State IL Zip Code 60134-3644
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 700.00

Date of Receipt 10 / 26 / 2016
Transaction ID : SA11A.449712
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	250.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1409 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. GRISETO, JAMES, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 524 BRADBURY LN.
 City GENEVA State IL Zip Code 60134-3644
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 700.00

Date of Receipt 11 / 04 / 2016
Transaction ID : SA11A.473257
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

B. GRIST, ARTHUR, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 15 SOUTHAMPTON PARISH RD5358
 City LANDENBERG State PA Zip Code 19350-9380
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 225.00

Date of Receipt 10 / 22 / 2016
Transaction ID : SA11A.446865
 Amount of Each Receipt this Period 45.00
 Memo Item CONTRIBUTION

C. GRIST, ARTHUR, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 15 SOUTHAMPTON PARISH RD5358
 City LANDENBERG State PA Zip Code 19350-9380
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 225.00

Date of Receipt 11 / 04 / 2016
Transaction ID : SA11A.471371
 Amount of Each Receipt this Period 45.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 140.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1410 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. GRISWOLD, GERALD, W., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 11792 ARROYO AVE
 City SANTA ANA State CA Zip Code 92705-3007
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Occupation (for Individual)
 INFORMATION REQUESTED PER BEST EFFORTS INFORMATION REQUESTED PER BE
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 350.00

Date of Receipt 10 / 20 / 2016
Transaction ID : SA11A.433451
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

B. GRISWOLD, LEONIE, B., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 977 WHITE POINT RD
 City FRIDAY HARBOR State WA Zip Code 98250-9184
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Occupation (for Individual)
 NONE RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 11 / 01 / 2016
Transaction ID : SA11A.462834
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

C. GRISWOLD, SUSAN, S., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4305 GALAX TRAIL
 City GREENSBORO State NC Zip Code 27410-8861
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Occupation (for Individual)
 INFORMATION REQUESTED PER BEST EFFORTS INFORMATION REQUESTED PER BE
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 11 / 07 / 2016
Transaction ID : SA11A.467894
 Amount of Each Receipt this Period 200.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	550.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1411 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. GROFF, LAURA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 13111 BIRMINGHAM COURT
 City BEACH PARK State IL Zip Code 60083-3061
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 205.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 26 / 2016
Transaction ID : SA11A.450572
 Amount of Each Receipt this Period
 30.00
 Memo Item CONTRIBUTION

B. GROFF, LAURA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 13111 BIRMINGHAM COURT
 City BEACH PARK State IL Zip Code 60083-3061
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 205.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 26 / 2016
Transaction ID : SA11A.450607
 Amount of Each Receipt this Period
 25.00
 Memo Item CONTRIBUTION

C. GROFF, LAURA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 13111 BIRMINGHAM COURT
 City BEACH PARK State IL Zip Code 60083-3061
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 205.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 26 / 2016
Transaction ID : SA11A.450610
 Amount of Each Receipt this Period
 25.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	80.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1412 OF 4311
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. GROFF, MICHAEL, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 270 WIGMORE DR

City PASADENA	State CA	Zip Code 91105-3337
------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NORTHWEST BUSINESS PARK	Occupation (for Individual) OWNER
--	--------------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
5400.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11		03		2016

Transaction ID : SA11A.465200

Amount of Each Receipt this Period
5400.00

Memo Item
CONTRIBUTION

B. GROFF, PAMELA, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 270 WIGMORE DR

City PASADENA	State CA	Zip Code 91105-3337
------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NORTHWEST BUSINESS PARK	Occupation (for Individual) OWNER
--	--------------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
5400.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11		03		2016

Transaction ID : SA11A.465201

Amount of Each Receipt this Period
5400.00

Memo Item
CONTRIBUTION

C. GROISMAN, HORACIO, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 3201 NE 183RD STREET, APT 2001

City NORTH MIAMI BEACH	State FL	Zip Code 33160-2895
---------------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) SELF EMPLOYED	Occupation (for Individual) PHYSICIAN
--	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11		02		2016

Transaction ID : SA11A.465107

Amount of Each Receipt this Period
500.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	11300.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1413 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. GROOS, JOANI, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 8316 CARRANZO DR
 City AUSTIN State TX Zip Code 78735-1821
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt
 11 / 07 / 2016
Transaction ID : SA11A.475316
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

B. GROOS, JOANI, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 8316 CARRANZO DR
 City AUSTIN State TX Zip Code 78735-1821
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt
 11 / 07 / 2016
Transaction ID : SA11A.475317
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

C. GROSSMAN, JAY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2568 NW 59TH STREET
 City BOCA RATON State FL Zip Code 33496-2223
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) INFORMATION REQUESTED PER BEST EFFORTS Occupation (for Individual) INFORMATION REQUESTED PER BEST EFFORTS
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt
 10 / 28 / 2016
Transaction ID : SA11A.454697
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	300.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1414 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. GROSS, JERRY, M., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 62 WATERFORD BEND
 City THE WOODLANDS State TX Zip Code 77381-6611
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 10 / 24 / 2016
Transaction ID : SA11A.444006
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

B. GROSSMAN, RAYMOND, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 11126 ELMVIEW PLACE
 City GREAT FALLS State VA Zip Code 22066-3014
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) HOULIHAN LOKEY Occupation (for Individual) INVESTMENT BANKER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 10 / 26 / 2016
Transaction ID : SA11A.449971
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

C. GROVES, LEA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 46 WHEEL WRIGHT CT
 City GREENSBORO State NC Zip Code 27455-3447
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 10 / 27 / 2016
Transaction ID : SA11A.453236
 Amount of Each Receipt this Period 500.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 800.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1415 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. GRUBER, JACK, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 7131 ST EDMUNDS DR
 City CINCINNATI State OH Zip Code 45230-3879
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) LINCOLN FINANCIAL ADV Occupation (for Individual) SALES
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date **300.00**

Date of Receipt **10 / 31 / 2016**
Transaction ID : SA11A.458265
 Amount of Each Receipt this Period **50.00**
 Memo Item CONTRIBUTION

B. GRUETZMACHER, FRANK, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 951 KAILIU PL
 City HONOLULU State HI Zip Code 96825-1335
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date **575.00**

Date of Receipt **10 / 27 / 2016**
Transaction ID : SA11A.452881
 Amount of Each Receipt this Period **100.00**
 Memo Item CONTRIBUTION

C. GRUNDMANN, JOHN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 6230 FRANK CHRISTIAN RD
 City AZLE State TX Zip Code 76020-7303
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date **575.00**

Date of Receipt **11 / 01 / 2016**
Transaction ID : SA11A.462755
 Amount of Each Receipt this Period **50.00**
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	200.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1416 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. GRUNDMANN, JOHN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 6230 FRANK CHRISTIAN RD
 City AZLE State TX Zip Code 76020-7303
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 575.00

Date of Receipt 11 / 01 / 2016
Transaction ID : SA11A.462756
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

B. GRUWELL, STEPHEN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 185 E PALISADE AVE C1B
 City ENGLEWOOD State NJ Zip Code 07631-3168
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 10 / 30 / 2016
Transaction ID : SA11A.459988
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

C. GUASTAVINO JR, RAFAEL, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 23050 COLONEL LEONARD RD
 City ROCK HALL State MD Zip Code 21661-2069
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) ISL PT FARM Occupation (for Individual) FARM MGR
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 640.00

Date of Receipt 10 / 25 / 2016
Transaction ID : SA11A.451491
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	350.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1417 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
Team Ryan

A. GUASTAVINO JR, RAFAEL, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 23050 COLONEL LEONARD RD
 City ROCK HALL State MD Zip Code 21661-2069
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) ISL PT FARM Occupation (for Individual) FARM MGR
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 640.00

Date of Receipt 10 / 25 / 2016
Transaction ID : SA11A.451496
 Amount of Each Receipt this Period 50.00
 Memo Item
CONTRIBUTION

B. GUASTAVINO JR, RAFAEL, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 23050 COLONEL LEONARD RD
 City ROCK HALL State MD Zip Code 21661-2069
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) ISL PT FARM Occupation (for Individual) FARM MGR
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 640.00

Date of Receipt 10 / 28 / 2016
Transaction ID : SA11A.455909
 Amount of Each Receipt this Period 25.00
 Memo Item
CONTRIBUTION

C. GUASTAVINO JR, RAFAEL, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 23050 COLONEL LEONARD RD
 City ROCK HALL State MD Zip Code 21661-2069
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) ISL PT FARM Occupation (for Individual) FARM MGR
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 640.00

Date of Receipt 10 / 28 / 2016
Transaction ID : SA11A.455916
 Amount of Each Receipt this Period 25.00
 Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	100.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1418 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. GUASTAVINO JR, RAFAEL, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 23050 COLONEL LEONARD RD
 City ROCK HALL State MD Zip Code 21661-2069
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) ISL PT FARM Occupation (for Individual) FARM MGR
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 640.00

Date of Receipt 10 / 29 / 2016
Transaction ID : SA11A.461044
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

B. GUASTAVINO JR, RAFAEL, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 23050 COLONEL LEONARD RD
 City ROCK HALL State MD Zip Code 21661-2069
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) ISL PT FARM Occupation (for Individual) FARM MGR
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 640.00

Date of Receipt 10 / 31 / 2016
Transaction ID : SA11A.463433
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

C. GUASTAVINO JR, RAFAEL, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 23050 COLONEL LEONARD RD
 City ROCK HALL State MD Zip Code 21661-2069
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) ISL PT FARM Occupation (for Individual) FARM MGR
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 640.00

Date of Receipt 10 / 31 / 2016
Transaction ID : SA11A.463445
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	75.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1419 OF 4311
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. GUASTAVINO JR, RAFAEL, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 23050 COLONEL LEONARD RD

City ROCK HALL	State MD	Zip Code 21661-2069
-------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) ISL PT FARM	Occupation (for Individual) FARM MGR
--	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
640.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	04	/	2016

Transaction ID : SA11A.472222

Amount of Each Receipt this Period
25.00

Memo Item
CONTRIBUTION

B. GUASTAVINO JR, RAFAEL, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 23050 COLONEL LEONARD RD

City ROCK HALL	State MD	Zip Code 21661-2069
-------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) ISL PT FARM	Occupation (for Individual) FARM MGR
--	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
640.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	07	/	2016

Transaction ID : SA11A.476126

Amount of Each Receipt this Period
25.00

Memo Item
CONTRIBUTION

C. GUASTAVINO JR, RAFAEL, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 23050 COLONEL LEONARD RD

City ROCK HALL	State MD	Zip Code 21661-2069
-------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) ISL PT FARM	Occupation (for Individual) FARM MGR
--	---

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
640.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	06	/	2016

Transaction ID : SA11A.478055

Amount of Each Receipt this Period
20.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	70.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1420 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. GUERIN, KATHRYN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 17002 GRANT ST.
 City OMAHA State NE Zip Code 68116-2665
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 10 / 26 / 2016
Transaction ID : SA11A.451037
 Amount of Each Receipt this Period
 50.00
 Memo Item
 CONTRIBUTION

B. GUERIN, KATHRYN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 17002 GRANT ST.
 City OMAHA State NE Zip Code 68116-2665
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 11 / 04 / 2016
Transaction ID : SA11A.472288
 Amount of Each Receipt this Period
 50.00
 Memo Item
 CONTRIBUTION

C. GUERRA, ESTHER, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2801 QUEEN ALBERTA DR
 City VALRICO State FL Zip Code 33596-6523
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 287.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 10 / 25 / 2016
Transaction ID : SA11A.448756
 Amount of Each Receipt this Period
 25.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	125.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1421 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
Team Ryan

A. GUERRA, ESTHER, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2801 QUEEN ALBERTA DR
 City VALRICO State FL Zip Code 33596-6523
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 287.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 10 / 26 / 2016
Transaction ID : SA11A.454380
 Amount of Each Receipt this Period
 30.00
 Memo Item
 CONTRIBUTION

B. GUERRA, ESTHER, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2801 QUEEN ALBERTA DR
 City VALRICO State FL Zip Code 33596-6523
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 287.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 11 / 01 / 2016
Transaction ID : SA11A.462952
 Amount of Each Receipt this Period
 25.00
 Memo Item
 CONTRIBUTION

C. GUERRA, ESTHER, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2801 QUEEN ALBERTA DR
 City VALRICO State FL Zip Code 33596-6523
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 287.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 11 / 05 / 2016
Transaction ID : SA11A.479158
 Amount of Each Receipt this Period
 30.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	85.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1422 OF 4311
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
Team Ryan

A. GUERRIERO, JAMES, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1003 MEADOW CT

City SOUTHLAKE	State TX	Zip Code 76092-8341
-------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
700.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	04	/	2016

Transaction ID : SA11A.472168

Amount of Each Receipt this Period
100.00

Memo Item
CONTRIBUTION

B. GUILS, KAY, , MR.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 340 M STREET SW

City WASHINGTON	State DC	Zip Code 20024-4002
--------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) LIBRARY OF CONGRESS	Occupation (for Individual) LIBRARIAN
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
800.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	26	/	2016

Transaction ID : SA11A.447651

Amount of Each Receipt this Period
200.00

Memo Item
CONTRIBUTION

C. GUILS, KAY, , MR.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 340 M STREET SW

City WASHINGTON	State DC	Zip Code 20024-4002
--------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) LIBRARY OF CONGRESS	Occupation (for Individual) LIBRARIAN
--	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
800.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	07	/	2016

Transaction ID : SA11A.467890

Amount of Each Receipt this Period
200.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	500.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1423 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
Team Ryan

A. GUILLOT, RENEE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 9 MULBERRY POINT
 City COVINGTON State LA Zip Code 70433-8511
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 350.00

Date of Receipt 10 / 28 / 2016
Transaction ID : SA11A.455549
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

B. GUIN, BOB, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 470 PARISH BOULEVARD
 City MARY ESTHER State FL Zip Code 32569-1477
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 205.00

Date of Receipt 11 / 03 / 2016
Transaction ID : SA11A.465291
 Amount of Each Receipt this Period 35.00
 Memo Item CONTRIBUTION

C. GUINDON, KEITH, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1902 WHARF RD
 City GALVESTON State TX Zip Code 77550-1652
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) KATIE'S SEAFOOD Occupation (for Individual) OWNER
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 30000.00

Date of Receipt 10 / 20 / 2016
Transaction ID : SA11A.433375
 Amount of Each Receipt this Period 10000.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	10085.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1424 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. GUINN, ALFRED, B., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1111 7TH STREET
 City WICHITA FALLS State TX Zip Code 76301-2301
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) WALSH AND WATTS, INC Occupation (for Individual) OIL AND GAS PRODUCTION
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 11 / 04 / 2016
Transaction ID : SA11A.467456
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

B. GULYAS, STEPHEN, , MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 314 GRANT AVE
 City CRESSKILL State NJ Zip Code 07626-1204
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 10 / 25 / 2016
Transaction ID : SA11A.451479
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

C. GULYAS, STEPHEN, , MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 314 GRANT AVE
 City CRESSKILL State NJ Zip Code 07626-1204
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 10 / 25 / 2016
Transaction ID : SA11A.451480
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	350.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1425 OF 4311
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. GUNN, ROBERT, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 6504 TIMBERLAND DR

City SANDSTON	State VA	Zip Code 23150-5442
------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
655.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		21		2016

Transaction ID : SA11A.444364

Amount of Each Receipt this Period
50.00

Memo Item
CONTRIBUTION

B. GUNN, ROBERT, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 6504 TIMBERLAND DR

City SANDSTON	State VA	Zip Code 23150-5442
------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
655.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		20		2016

Transaction ID : SA11A.444891

Amount of Each Receipt this Period
100.00

Memo Item
CONTRIBUTION

C. GUNN, ROBERT, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 6504 TIMBERLAND DR

City SANDSTON	State VA	Zip Code 23150-5442
------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
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Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
655.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		25		2016

Transaction ID : SA11A.448496

Amount of Each Receipt this Period
50.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	200.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1426 OF 4311
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. GUNN, ROBERT, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 6504 TIMBERLAND DR

City SANDSTON	State VA	Zip Code 23150-5442
------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
655.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		27		2016

Transaction ID : SA11A.453407

Amount of Each Receipt this Period
50.00

Memo Item CONTRIBUTION

B. GUNN, ROBERT, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 6504 TIMBERLAND DR

City SANDSTON	State VA	Zip Code 23150-5442
------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
655.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		29		2016

Transaction ID : SA11A.460725

Amount of Each Receipt this Period
50.00

Memo Item CONTRIBUTION

C. GUNN, ROBERT, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 6504 TIMBERLAND DR

City SANDSTON	State VA	Zip Code 23150-5442
------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
655.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11		01		2016

Transaction ID : SA11A.462896

Amount of Each Receipt this Period
50.00

Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	150.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1427 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. GUNN, ROBERT, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 6504 TIMBERLAND DR
 City SANDSTON State VA Zip Code 23150-5442
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 655.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 03 / 2016
Transaction ID : SA11A.468801
 Amount of Each Receipt this Period
 50.00
 Memo Item
 CONTRIBUTION

B. GUPTA, KAVI, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 167 PERRY ST APT 4NQ
 City NEW YORK State NY Zip Code 10014-2438
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) MERRILL LYNCH Occupation (for Individual) MANAGING DIRECTOR, FIXED INCO
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 10000.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 21 / 2016
Transaction ID : SA11A.481016
 Amount of Each Receipt this Period
 10000.00
 Memo Item
 CONTRIBUTION

C. GUPTA, VED, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 15 WOODGATE LANE
 City BRYN MAWR State PA Zip Code 19010-1838
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 01 / 2016
Transaction ID : SA11A.462802
 Amount of Each Receipt this Period
 25.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	10075.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1428 OF 4311
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. GUPTILL, WILLIAM, K., MR.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 2573 SAN ANDRES WAY

City CLAREMONT	State CA	Zip Code 91711-1555
-------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1327.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	01	/	2016

Transaction ID : SA11A.461863

Amount of Each Receipt this Period
500.00

Memo Item CONTRIBUTION

B. GUPTILL, WILLIAM, K., MR.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 2573 SAN ANDRES WAY

City CLAREMONT	State CA	Zip Code 91711-1555
-------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1327.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	04	/	2016

Transaction ID : SA11A.467575

Amount of Each Receipt this Period
400.00

Memo Item CONTRIBUTION

C. GUSTAFSSON, ELVY, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 311 N. ALMANSOR STREET

City ALHAMBRA	State CA	Zip Code 91801-2622
------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	31	/	2016

Transaction ID : SA11A.464265

Amount of Each Receipt this Period
50.00

Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	950.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1429 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. GUSTAFSSON, ELVY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 311 N. ALMANSOR STREET
 City ALHAMBRA State CA Zip Code 91801-2622
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 10 / 31 / 2016
Transaction ID : SA11A.464266
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

B. GUSTAFSSON, ELVY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 311 N. ALMANSOR STREET
 City ALHAMBRA State CA Zip Code 91801-2622
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 11 / 04 / 2016
Transaction ID : SA11A.472543
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

C. GUSTAVSON, JOHN, B., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2265 HILLSDALE CIRCLE
 City BOULDER State CO Zip Code 80305-5621
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt 10 / 23 / 2016
Transaction ID : SA11A.446598
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 200.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1430 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. GUSTAVSON, JOHN, B., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2265 HILLSDALE CIRCLE
 City BOULDER State CO Zip Code 80305-5621
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt 10 / 23 / 2016
Transaction ID : SA11A.446599
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

B. GUTHRIE, GINGER, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 31 LOMAS DE TESUQUE
 City SANTA FE State NM Zip Code 87506-1234
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) EDUCATION
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 563.00

Date of Receipt 11 / 02 / 2016
Transaction ID : SA11A.470175
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

C. GUTHRIE, GINGER, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 31 LOMAS DE TESUQUE
 City SANTA FE State NM Zip Code 87506-1234
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) EDUCATION
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 563.00

Date of Receipt 11 / 04 / 2016
Transaction ID : SA11A.472351
 Amount of Each Receipt this Period 75.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	275.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1431 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
Team Ryan

A. GUTHRIE, GINGER, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 31 LOMAS DE TESUQUE
 City SANTA FE State NM Zip Code 87506-1234
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) EDUCATION
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 563.00

Date of Receipt 11 / 04 / 2016
Transaction ID : SA11A.474251
 Amount of Each Receipt this Period 30.00
 Memo Item CONTRIBUTION

B. GUTHRIE, GINGER, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 31 LOMAS DE TESUQUE
 City SANTA FE State NM Zip Code 87506-1234
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) EDUCATION
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 563.00

Date of Receipt 11 / 06 / 2016
Transaction ID : SA11A.478268
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

C. GUTHRIE, GINGER, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 31 LOMAS DE TESUQUE
 City SANTA FE State NM Zip Code 87506-1234
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) EDUCATION
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 563.00

Date of Receipt 11 / 06 / 2016
Transaction ID : SA11A.478269
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶ 80.00
TOTAL This Period (last page this line number only).....▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1432 OF 4311
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
Team Ryan

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name A. GUZZETTI, LOUIS, , MR., JR.		Date of Receipt M M M / D D D / Y Y Y Y Y Y 10 / 23 / 2016
Mailing Address 205 MAIN ST. APT 27		Transaction ID : SA11A.449581
City NEW CANAAN	State CT	Zip Code 06840-5635
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 100.00
Name of Employer (for Individual) SPINNAKER COATING, LLC	Occupation (for Individual) CHAIRMAN & CEO	<input type="checkbox"/> Memo Item CONTRIBUTION
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 550.00	

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name B. GUZZETTI, LOUIS, , MR., JR.		Date of Receipt M M M / D D D / Y Y Y Y Y Y 10 / 28 / 2016
Mailing Address 205 MAIN ST. APT 27		Transaction ID : SA11A.461496
City NEW CANAAN	State CT	Zip Code 06840-5635
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 50.00
Name of Employer (for Individual) SPINNAKER COATING, LLC	Occupation (for Individual) CHAIRMAN & CEO	<input type="checkbox"/> Memo Item CONTRIBUTION
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 550.00	

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name C. GWILLIAM, JANET, S., MS.,		Date of Receipt M M M / D D D / Y Y Y Y Y Y 10 / 25 / 2016
Mailing Address 361 E. WILFORD AVENUE		Transaction ID : SA11A.448200
City MURRAY	State UT	Zip Code 84107-7410
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 30.00
Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED	<input type="checkbox"/> Memo Item CONTRIBUTION
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Aggregate Year-to-Date ▼ 455.00	

SUBTOTAL of Receipts This Page (optional).....▶	180.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1433 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
Team Ryan

A. GWILLIAM, JANET, S., MS.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 361 E. WILFORD AVENUE

City MURRAY	State UT	Zip Code 84107-7410
----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
455.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	02	/	2016

Transaction ID : SA11A.466245

Amount of Each Receipt this Period
25.00

Memo Item
CONTRIBUTION

B. GWILLIAM, JANET, S., MS.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 361 E. WILFORD AVENUE

City MURRAY	State UT	Zip Code 84107-7410
----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
455.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	07	/	2016

Transaction ID : SA11A.475493

Amount of Each Receipt this Period
25.00

Memo Item
CONTRIBUTION

C. GWIN, DAVID, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 107 ASHLEY HALL RD

City COLUMBIA	State SC	Zip Code 29229-9179
------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) BCBSSC	Occupation (for Individual) VP, SALES
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
375.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	04	/	2016

Transaction ID : SA11A.471751

Amount of Each Receipt this Period
50.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	100.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1434 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. GWIN, DAVID, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 107 ASHLEY HALL RD
 City COLUMBIA State SC Zip Code 29229-9179
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) BCBSSC Occupation (for Individual) VP, SALES
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 375.00

Date of Receipt 11 / 07 / 2016
Transaction ID : SA11A.480419
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

B. GWIN, DAVID, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 107 ASHLEY HALL RD
 City COLUMBIA State SC Zip Code 29229-9179
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) BCBSSC Occupation (for Individual) VP, SALES
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 375.00

Date of Receipt 11 / 07 / 2016
Transaction ID : SA11A.480421
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

C. GWIN, WILLIAM, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 439 N COLLEGE STREET
 City AUBURN State AL Zip Code 36830-3869
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) INFORMATION REQUESTED PER BEST EFFORTS Occupation (for Individual) INFORMATION REQUESTED PER BEST EFFORTS
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 11 / 10 / 2016
Transaction ID : SA11A.468207
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶ 150.00
TOTAL This Period (last page this line number only).....▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1435 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
Team Ryan

A. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
HA, ANDREW, K., MR.,

Mailing Address **623 BETTY ROSE AVENUE**

City GIBBSTOWN	State NJ	Zip Code 08027-1431
--------------------------	--------------------	-------------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
--	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1351.00

Date of Receipt
10 / 21 / 2016

Transaction ID : SA11A.447128

Amount of Each Receipt this Period
25.00

Memo Item CONTRIBUTION

B. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
HA, ANDREW, K., MR.,

Mailing Address **623 BETTY ROSE AVENUE**

City GIBBSTOWN	State NJ	Zip Code 08027-1431
--------------------------	--------------------	-------------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
--	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1351.00

Date of Receipt
10 / 21 / 2016

Transaction ID : SA11A.447129

Amount of Each Receipt this Period
25.00

Memo Item CONTRIBUTION

C. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
HA, ANDREW, K., MR.,

Mailing Address **623 BETTY ROSE AVENUE**

City GIBBSTOWN	State NJ	Zip Code 08027-1431
--------------------------	--------------------	-------------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
--	---

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
1351.00

Date of Receipt
10 / 27 / 2016

Transaction ID : SA11A.453780

Amount of Each Receipt this Period
25.00

Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	75.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1436 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
HA, ANDREW, K., MR.,

Mailing Address **623 BETTY ROSE AVENUE**

City GIBBSTOWN	State NJ	Zip Code 08027-1431
--------------------------	--------------------	-------------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
--	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1351.00

Date of Receipt
11 / 04 / 2016

Transaction ID : SA11A.471759

Amount of Each Receipt this Period
50.00

Memo Item CONTRIBUTION

B. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
HA, ANDREW, K., MR.,

Mailing Address **623 BETTY ROSE AVENUE**

City GIBBSTOWN	State NJ	Zip Code 08027-1431
--------------------------	--------------------	-------------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
--	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1351.00

Date of Receipt
11 / 05 / 2016

Transaction ID : SA11A.478361

Amount of Each Receipt this Period
25.00

Memo Item CONTRIBUTION

C. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
HA, ANDREW, K., MR.,

Mailing Address **623 BETTY ROSE AVENUE**

City GIBBSTOWN	State NJ	Zip Code 08027-1431
--------------------------	--------------------	-------------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
--	---

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
1351.00

Date of Receipt
11 / 07 / 2016

Transaction ID : SA11A.480263

Amount of Each Receipt this Period
50.00

Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	125.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1437 OF 4311
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. HA, ANDREW, K., MR.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address **623 BETTY ROSE AVENUE**

City GIBBSTOWN	State NJ	Zip Code 08027-1431
--------------------------	--------------------	-------------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
--	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1351.00

Date of Receipt
11 / 07 / 2016

Transaction ID : SA11A.480265

Amount of Each Receipt this Period
50.00

Memo Item
CONTRIBUTION

B. HAAS, MARLENE, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address **4008 CAPSTAN PL**

City DISCOVERY BAY	State CA	Zip Code 94505-1109
------------------------------	--------------------	-------------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
--	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
465.00

Date of Receipt
11 / 04 / 2016

Transaction ID : SA11A.473520

Amount of Each Receipt this Period
25.00

Memo Item
CONTRIBUTION

C. HAAS, MARLENE, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address **4008 CAPSTAN PL**

City DISCOVERY BAY	State CA	Zip Code 94505-1109
------------------------------	--------------------	-------------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
--	---

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
465.00

Date of Receipt
11 / 08 / 2016

Transaction ID : SA11A.479804

Amount of Each Receipt this Period
50.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	125.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1438 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. HAASE, DAVID, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 9146 STITT RD
 City WHITEHOUSE State OH Zip Code 43571-9761
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 550.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 26 / 2016
Transaction ID : SA11A.454346
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION

B. HAASE, DAVID, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 9146 STITT RD
 City WHITEHOUSE State OH Zip Code 43571-9761
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 550.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 26 / 2016
Transaction ID : SA11A.454347
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION

C. HAASE, DAVID, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 9146 STITT RD
 City WHITEHOUSE State OH Zip Code 43571-9761
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 550.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 06 / 2016
Transaction ID : SA11A.480853
 Amount of Each Receipt this Period
 50.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	250.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1439 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. HAASE, DAVID, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 9146 STITT RD
 City WHITEHOUSE State OH Zip Code 43571-9761
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 550.00

Date of Receipt
 11 / 06 / 2016
Transaction ID : SA11A.480856
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

B. HABEL, DANIEL, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1381 GOLDEN RAIN RD.
 21 G
 City SEAL BEACH State CA Zip Code 90740-4888
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 320.00

Date of Receipt
 10 / 21 / 2016
Transaction ID : SA11A.447180
 Amount of Each Receipt this Period 35.00
 Memo Item CONTRIBUTION

C. HABEL, DANIEL, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1381 GOLDEN RAIN RD.
 21 G
 City SEAL BEACH State CA Zip Code 90740-4888
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 320.00

Date of Receipt
 10 / 25 / 2016
Transaction ID : SA11A.449075
 Amount of Each Receipt this Period 35.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶ 120.00
TOTAL This Period (last page this line number only).....▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1440 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
Team Ryan

A. HABEL, DANIEL, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1381 GOLDEN RAIN RD.
 21 G
 City SEAL BEACH State CA Zip Code 90740-4888
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 320.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 03 / 2016
Transaction ID : SA11A.468474
 Amount of Each Receipt this Period
 50.00
 Memo Item
 CONTRIBUTION

B. HABER, DEBBIE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1 GREENBRIAR LN
 1
 City DIX HILLS State NY Zip Code 11746-5313
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) REAL ESTATE INVESTOR
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 330.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 24 / 2016
Transaction ID : SA11A.449192
 Amount of Each Receipt this Period
 25.00
 Memo Item
 CONTRIBUTION

C. HABER, DEBBIE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1 GREENBRIAR LN
 1
 City DIX HILLS State NY Zip Code 11746-5313
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) REAL ESTATE INVESTOR
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 330.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 05 / 2016
Transaction ID : SA11A.480950
 Amount of Each Receipt this Period
 25.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	100.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1441 OF 4311
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. HABER, DEBBIE, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1 GREENBRIAR LN
1

City DIX HILLS State NY Zip Code 11746-5313

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) REAL ESTATE INVESTOR

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
330.00

Date of Receipt
11 / 05 / 2016
Transaction ID : SA11A.480951

Amount of Each Receipt this Period
25.00

Memo Item CONTRIBUTION

B. HABER, ROBERT, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 36 RIDGE HILL FARM ROAD

City WELLESLEY State MA Zip Code 02482-7312

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) PROFICIO CAPITA Occupation (for Individual) INVESTMENTS

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
10000.00

Date of Receipt
10 / 25 / 2016
Transaction ID : SA11A.451717

Amount of Each Receipt this Period
10000.00

Memo Item CONTRIBUTION

C. HABERKORN, RONALD, L., ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 6500 SMITHOWN ROAD

City EXCELSIOR State MN Zip Code 55331-8210

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
500.00

Date of Receipt
10 / 24 / 2016
Transaction ID : SA11A.444061

Amount of Each Receipt this Period
500.00

Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 10525.00

TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1442 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. HABIB, AMELIA, J., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 845 LEBRUN ROAD
 City BUFFALO State NY Zip Code 14226-4206
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) FARMER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1250.00

Date of Receipt 10 / 24 / 2016
Transaction ID : SA11A.443713
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

B. HADDOCK, RAYMUND, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 287 CENTURY CIRCLE STE 101
 City LOUISVILLE State CO Zip Code 80027-1684
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) INDEPENDENT INSURANCE AGENT
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 475.00

Date of Receipt 10 / 24 / 2016
Transaction ID : SA11A.446117
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

C. HADDOCK, RAYMUND, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 287 CENTURY CIRCLE STE 101
 City LOUISVILLE State CO Zip Code 80027-1684
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) INDEPENDENT INSURANCE AGENT
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 475.00

Date of Receipt 10 / 31 / 2016
Transaction ID : SA11A.458851
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	300.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1443 OF 4311
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. HADDOCK, RAYMUND, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 287 CENTURY CIRCLE STE 101

City LOUISVILLE	State CO	Zip Code 80027-1684
--------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) SELF EMPLOYED	Occupation (for Individual) INDEPENDENT INSURANCE AGENT
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
475.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	07	/	2016

Transaction ID : SA11A.475827

Amount of Each Receipt this Period
25.00

Memo Item CONTRIBUTION

B. HADI, HUSEIN, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 5523 CAMDEN SPRINGS LANE

City SUGAR LAND	State TX	Zip Code 77479-1698
--------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) SELF EMPLOYED	Occupation (for Individual) ATTORNEY
--	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	27	/	2016

Transaction ID : SA11A.452679

Amount of Each Receipt this Period
500.00

Memo Item CONTRIBUTION

C. HADLEY, CHARLES, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 4840 THUNDERBIRD DRIVE
APT 383

City BOULDER	State CO	Zip Code 80303-3830
-----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
300.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	04	/	2016

Transaction ID : SA11A.467499

Amount of Each Receipt this Period
150.00

Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	675.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1444 OF 4311
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/>	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. HADLEY, DEB, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 12 HARBORAGE COURT

City BLUFFTON	State SC	Zip Code 29910-9576
------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) WTCC	Occupation (for Individual) PROFESSOR
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		21		2016

Transaction ID : SA11A.444634

Amount of Each Receipt this Period
250.00

Memo Item
CONTRIBUTION

B. HAFNER, JOSEPH, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 23 FARNHAM PARK DR

City HOUSTON	State TX	Zip Code 77024-7501
-----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
600.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		20		2016

Transaction ID : SA11A.441955

Amount of Each Receipt this Period
100.00

Memo Item
CONTRIBUTION

C. HAFNER, JOSEPH, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 23 FARNHAM PARK DR

City HOUSTON	State TX	Zip Code 77024-7501
-----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
600.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		31		2016

Transaction ID : SA11A.458281

Amount of Each Receipt this Period
250.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	600.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1445 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. HAGANS, BONNIE, J., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address P.O. B OX 518

City MORRILTON	State AR	Zip Code 72110-
-------------------	-------------	--------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
432.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 23 / 2016
Transaction ID : SA11A.446562

Amount of Each Receipt this Period
25.00

Memo Item
CONTRIBUTION

B. HAGANS, BONNIE, J., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address P.O. B OX 518

City MORRILTON	State AR	Zip Code 72110-
-------------------	-------------	--------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
432.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 04 / 2016
Transaction ID : SA11A.472566

Amount of Each Receipt this Period
25.00

Memo Item
CONTRIBUTION

C. HAGANS, BONNIE, J., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address P.O. B OX 518

City MORRILTON	State AR	Zip Code 72110-
-------------------	-------------	--------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
432.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 07 / 2016
Transaction ID : SA11A.475620

Amount of Each Receipt this Period
25.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	75.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1446 OF 4311
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. HAGANS, BONNIE, J., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address P.O. B OX 518
 City MORRILTON State AR Zip Code 72110-
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 432.00

Date of Receipt 11 / 07 / 2016
Transaction ID : SA11A.475621
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

B. HAGAN, JOHN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4542 TOWER GROVE PLACE
 City SAINT LOUIS State MO Zip Code 63110-3413
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NOOTER CONSTRUCTION CO Occupation (for Individual) CONTROLLER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt 10 / 25 / 2016
Transaction ID : SA11A.448550
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

C. HAGAN, JOHN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4542 TOWER GROVE PLACE
 City SAINT LOUIS State MO Zip Code 63110-3413
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NOOTER CONSTRUCTION CO Occupation (for Individual) CONTROLLER
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt 10 / 25 / 2016
Transaction ID : SA11A.448551
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 225.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1447 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. HAGAN, LAUREN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 80 MANOR LANE
 City YARDLEY State PA Zip Code 19067-1800
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SHERIDAN HEALTHCARE Occupation (for Individual) NURSE ANESTHETIST
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 450.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 26 / 2016
Transaction ID : SA11A.454391
 Amount of Each Receipt this Period
 50.00
 Memo Item
 CONTRIBUTION

B. HAGAN, LAUREN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 80 MANOR LANE
 City YARDLEY State PA Zip Code 19067-1800
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SHERIDAN HEALTHCARE Occupation (for Individual) NURSE ANESTHETIST
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 450.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 30 / 2016
Transaction ID : SA11A.464858
 Amount of Each Receipt this Period
 50.00
 Memo Item
 CONTRIBUTION

C. HAGBERG, ROY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1605 MICHAEL CT
 City BEDFORD State TX Zip Code 76022-7242
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 234.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 30 / 2016
Transaction ID : SA11A.460235
 Amount of Each Receipt this Period
 30.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶ 130.00
TOTAL This Period (last page this line number only).....▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1448 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. HAGBERG, ROY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1605 MICHAEL CT
 City BEDFORD State TX Zip Code 76022-7242
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 234.00

Date of Receipt
 11 / 02 / 2016
Transaction ID : SA11A.465759
 Amount of Each Receipt this Period 30.00
 Memo Item CONTRIBUTION

B. HAGBERG, ROY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1605 MICHAEL CT
 City BEDFORD State TX Zip Code 76022-7242
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 234.00

Date of Receipt
 11 / 04 / 2016
Transaction ID : SA11A.471030
 Amount of Each Receipt this Period 30.00
 Memo Item CONTRIBUTION

C. HAGGERTY, CHRIS, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO BOX 4391
 City SANTA CLARA State CA Zip Code 95056-4391
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) CHURCH OF SCIENTOLOGY Occupation (for Individual) PASTORAL COUNSELOR
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 310.00

Date of Receipt
 11 / 07 / 2016
Transaction ID : SA11A.474683
 Amount of Each Receipt this Period 20.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	80.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1449 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. HAGGERTY, CHRIS, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO BOX 4391
 City SANTA CLARA State CA Zip Code 95056-4391
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) CHURCH OF SCIENTOLOGY Occupation (for Individual) PASTORAL COUNSELOR
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 310.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 07 / 2016
Transaction ID : SA11A.474685
 Amount of Each Receipt this Period
 20.00
 Memo Item
 CONTRIBUTION

B. HAGSTROM, NORM, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 14321 N 77TH LANE
 City PEORIA State AZ Zip Code 85381-8514
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 27 / 2016
Transaction ID : SA11A.453825
 Amount of Each Receipt this Period
 50.00
 Memo Item
 CONTRIBUTION

C. HAGSTROM, NORM, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 14321 N 77TH LANE
 City PEORIA State AZ Zip Code 85381-8514
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 04 / 2016
Transaction ID : SA11A.470975
 Amount of Each Receipt this Period
 50.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	120.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1450 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
Team Ryan

A. HAHN, JAMES, J., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 90 MAPLEWOOD DR
 City BREWSTER State NY Zip Code 10509-5003
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) ENGINEER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt **11 / 04 / 2016**
Transaction ID : SA11A.472964
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

B. HAHN, RICHARD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 7 EAST 14 ST. APT. 20T
 City NEW YORK State NY Zip Code 10003-3127
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt **10 / 25 / 2016**
Transaction ID : SA11A.449028
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

C. HAIGHT, HARRY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 12211 SE 201ST ST.
 City KENT State WA Zip Code 98031-1624
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt **11 / 02 / 2016**
Transaction ID : SA11A.466533
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	300.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1451 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. HAINES, JOHN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 621 CHURCHGROVE RD
 City FRANKENMUTH State MI Zip Code 48734-9791
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 475.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 20 / 2016
Transaction ID : SA11A.442043
 Amount of Each Receipt this Period
 50.00
 Memo Item
 CONTRIBUTION

B. HAINES, JOHN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 621 CHURCHGROVE RD
 City FRANKENMUTH State MI Zip Code 48734-9791
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 475.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 20 / 2016
Transaction ID : SA11A.442047
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION

C. HAINES, JOHN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 621 CHURCHGROVE RD
 City FRANKENMUTH State MI Zip Code 48734-9791
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 475.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 25 / 2016
Transaction ID : SA11A.448057
 Amount of Each Receipt this Period
 50.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	200.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1452 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
Team Ryan

A. HAINES, JOHN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 621 CHURCHGROVE RD
 City FRANKENMUTH State MI Zip Code 48734-9791
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 475.00

Date of Receipt
 11 / 02 / 2016
Transaction ID : SA11A.467020
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

B. HAKOLA, CAROLYN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1359 MARYLAND CT
 City SANFORD State NC Zip Code 27332-8314
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 325.00

Date of Receipt
 10 / 21 / 2016
Transaction ID : SA11A.444223
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

C. HAKOLA, CAROLYN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1359 MARYLAND CT
 City SANFORD State NC Zip Code 27332-8314
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 325.00

Date of Receipt
 10 / 27 / 2016
Transaction ID : SA11A.453715
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	150.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1453 OF 4311
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
Team Ryan

A. HAKOLA, CAROLYN, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1359 MARYLAND CT

City SANFORD	State NC	Zip Code 27332-8314
-----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
325.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	01	/	2016

Transaction ID : SA11A.467248

Amount of Each Receipt this Period
25.00

Memo Item CONTRIBUTION

B. HAKOLA, CAROLYN, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1359 MARYLAND CT

City SANFORD	State NC	Zip Code 27332-8314
-----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
325.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	01	/	2016

Transaction ID : SA11A.467249

Amount of Each Receipt this Period
25.00

Memo Item CONTRIBUTION

C. HAKY, CAROLE, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 6776 WALLINGS ROAD

City BRECKSVILLE	State OH	Zip Code 44141-1022
---------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) SUBSTITUTE TEACHER	Occupation (for Individual) RENHILL
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
205.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	20	/	2016

Transaction ID : SA11A.441920

Amount of Each Receipt this Period
25.00

Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	75.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1454 OF 4311
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. HAKY, CAROLE, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 6776 WALLINGS ROAD

City BRECKSVILLE	State OH	Zip Code 44141-1022
---------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) SUBSTITUTE TEACHER	Occupation (for Individual) RENHILL
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
205.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		20		2016

Transaction ID : SA11A.441933

Amount of Each Receipt this Period
25.00

Memo Item CONTRIBUTION

B. HAKY, CAROLE, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 6776 WALLINGS ROAD

City BRECKSVILLE	State OH	Zip Code 44141-1022
---------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) SUBSTITUTE TEACHER	Occupation (for Individual) RENHILL
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
205.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		20		2016

Transaction ID : SA11A.441934

Amount of Each Receipt this Period
25.00

Memo Item CONTRIBUTION

C. HAKY, CAROLE, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 6776 WALLINGS ROAD

City BRECKSVILLE	State OH	Zip Code 44141-1022
---------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) SUBSTITUTE TEACHER	Occupation (for Individual) RENHILL
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
205.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		26		2016

Transaction ID : SA11A.449720

Amount of Each Receipt this Period
10.00

Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	60.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1455 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. HAKY, CAROLE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 6776 WALLINGS ROAD
 City BRECKSVILLE State OH Zip Code 44141-1022
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SUBSTITUTE TEACHER Occupation (for Individual) RENHILL
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 205.00

Date of Receipt 10 / 26 / 2016
Transaction ID : SA11A.449721
 Amount of Each Receipt this Period 10.00
 Memo Item CONTRIBUTION

B. HAKY, CAROLE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 6776 WALLINGS ROAD
 City BRECKSVILLE State OH Zip Code 44141-1022
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SUBSTITUTE TEACHER Occupation (for Individual) RENHILL
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 205.00

Date of Receipt 10 / 28 / 2016
Transaction ID : SA11A.461451
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

C. HAKY, CAROLE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 6776 WALLINGS ROAD
 City BRECKSVILLE State OH Zip Code 44141-1022
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SUBSTITUTE TEACHER Occupation (for Individual) RENHILL
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 205.00

Date of Receipt 10 / 31 / 2016
Transaction ID : SA11A.464785
 Amount of Each Receipt this Period 20.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 55.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1456 OF 4311
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. HAKY, CAROLE, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 6776 WALLINGS ROAD

City BRECKSVILLE	State OH	Zip Code 44141-1022
---------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) SUBSTITUTE TEACHER	Occupation (for Individual) RENHILL
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
205.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		31		2016

Transaction ID : SA11A.464787

Amount of Each Receipt this Period
20.00

Memo Item
CONTRIBUTION

B. HAKY, CAROLE, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 6776 WALLINGS ROAD

City BRECKSVILLE	State OH	Zip Code 44141-1022
---------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) SUBSTITUTE TEACHER	Occupation (for Individual) RENHILL
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
205.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11		07		2016

Transaction ID : SA11A.476201

Amount of Each Receipt this Period
25.00

Memo Item
CONTRIBUTION

C. HALBACH, VALERIE, A., MRS.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 8869 HALVERSON DRIVE

City ELK GROVE	State CA	Zip Code 95624-1630
-------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
440.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		31		2016

Transaction ID : SA11A.457349

Amount of Each Receipt this Period
100.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	145.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1457 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. HALBACH, VALERIE, A., MRS.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 8869 HALVERSON DRIVE
 City ELK GROVE State CA Zip Code 95624-1630
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 440.00

Date of Receipt 11 / 03 / 2016
Transaction ID : SA11A.465525
 Amount of Each Receipt this Period 70.00
 Memo Item CONTRIBUTION

B. HALEY, JAMES, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 604 CACTUS TRAIL
 City MT. JULIET State TN Zip Code 37122-2332
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 330.00

Date of Receipt 10 / 27 / 2016
Transaction ID : SA11A.452906
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

C. HALEY, JAMES, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 604 CACTUS TRAIL
 City MT. JULIET State TN Zip Code 37122-2332
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 330.00

Date of Receipt 10 / 27 / 2016
Transaction ID : SA11A.452907
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	270.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1458 OF 4311
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. HALEY, JAMES, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 604 CACTUS TRAIL

City MT. JULIET	State TN	Zip Code 37122-2332
--------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
330.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	02	/	2016

Transaction ID : SA11A.466906

Amount of Each Receipt this Period
100.00

Memo Item CONTRIBUTION

B. HALL, JERRY, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 122 E. FIRST ST.

City WHITEVILLE	State NC	Zip Code 28472-
--------------------	-------------	--------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
225.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	24	/	2016

Transaction ID : SA11A.449428

Amount of Each Receipt this Period
25.00

Memo Item CONTRIBUTION

C. HALL, JERRY, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 122 E. FIRST ST.

City WHITEVILLE	State NC	Zip Code 28472-
--------------------	-------------	--------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
225.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	04	/	2016

Transaction ID : SA11A.473034

Amount of Each Receipt this Period
50.00

Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	175.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1459 OF 4311		
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14	<input type="checkbox"/> 11c <input type="checkbox"/> 15	<input type="checkbox"/> 12 <input type="checkbox"/> 16

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NAME OF COMMITTEE (In Full)
Team Ryan

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name A. HALL, KEITH, E., MR.,		Date of Receipt M M M / D D D / Y Y Y Y Y Y 10 / 31 / 2016
Mailing Address 11365 BEECHER CIRCLE EAST		Transaction ID : SA11A.458350
City JACKSONVILLE	State FL	Zip Code 32223-7944
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 100.00
Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED	<input type="checkbox"/> Memo Item CONTRIBUTION
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 400.00	

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name B. HALL, KEITH, E., MR.,		Date of Receipt M M M / D D D / Y Y Y Y Y Y 10 / 31 / 2016
Mailing Address 11365 BEECHER CIRCLE EAST		Transaction ID : SA11A.458373
City JACKSONVILLE	State FL	Zip Code 32223-7944
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 100.00
Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED	<input type="checkbox"/> Memo Item CONTRIBUTION
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 400.00	

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name C. HALL, KEITH, E., MR.,		Date of Receipt M M M / D D D / Y Y Y Y Y Y 10 / 31 / 2016
Mailing Address 11365 BEECHER CIRCLE EAST		Transaction ID : SA11A.458375
City JACKSONVILLE	State FL	Zip Code 32223-7944
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 100.00
Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED	<input type="checkbox"/> Memo Item CONTRIBUTION
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Aggregate Year-to-Date ▼ 400.00	

SUBTOTAL of Receipts This Page (optional).....▶	300.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1460 OF 4311
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. HALL, VERNON, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1455 NO MELROSE DRIVE
211

City VISTA State CA Zip Code 92083-4873

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
475.00

Date of Receipt
10 / 25 / 2016
Transaction ID : SA11A.448839

Amount of Each Receipt this Period
50.00

Memo Item CONTRIBUTION

B. HALL, VERNON, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1455 NO MELROSE DRIVE
211

City VISTA State CA Zip Code 92083-4873

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
475.00

Date of Receipt
10 / 30 / 2016
Transaction ID : SA11A.464886

Amount of Each Receipt this Period
25.00

Memo Item CONTRIBUTION

C. HALL, VERNON, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1455 NO MELROSE DRIVE
211

City VISTA State CA Zip Code 92083-4873

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
475.00

Date of Receipt
11 / 04 / 2016
Transaction ID : SA11A.471843

Amount of Each Receipt this Period
25.00

Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶ 100.00

TOTAL This Period (last page this line number only).....▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1462 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
Team Ryan

A. HALLAM, JAMES, R., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1805 RECORD XING
 City DALLAS State TX Zip Code 75235-6220
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) BEN E. KEITH BEVERAGE Occupation (for Individual) MARKETING
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 10 / 24 / 2016
Transaction ID : SA11A.443510
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

B. HALLAHAN, RICHARD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1113 FORD AVE.
 City REDONDO BEACH State CA Zip Code 90278-4021
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 280.00

Date of Receipt 10 / 24 / 2016
Transaction ID : SA11A.445951
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

C. HALLAHAN, RICHARD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1113 FORD AVE.
 City REDONDO BEACH State CA Zip Code 90278-4021
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 280.00

Date of Receipt 11 / 06 / 2016
Transaction ID : SA11A.477907
 Amount of Each Receipt this Period 30.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	330.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1463 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
Team Ryan

A. HALLINGBY, MAI, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 200 BRADLEY PLACE
 103
 City PALM BEACH State FL Zip Code 33480-3764
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 350.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 24 / 2016
Transaction ID : SA11A.445706
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION

B. HALLINGBY, MAI, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 200 BRADLEY PLACE
 103
 City PALM BEACH State FL Zip Code 33480-3764
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 350.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 02 / 2016
Transaction ID : SA11A.469489
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION

C. HALLORAN, C, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 21 WISTAR ROAD
 City VILLANOVA State PA Zip Code 19085-1512
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) INFORMATION REQUESTED PER BEST EFFORTS Occupation (for Individual) INFORMATION REQUESTED PER BEST EFFORTS
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 25 / 2016
Transaction ID : SA11A.447262
 Amount of Each Receipt this Period
 500.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	700.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1464 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. HALVORSEN, RALPH, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO BOX 571897
 City TARZANA State CA Zip Code 91357-1897
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 575.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 25 / 2016
Transaction ID : SA11A.449097
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION

B. HALVORSEN, RALPH, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO BOX 571897
 City TARZANA State CA Zip Code 91357-1897
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 575.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 04 / 2016
Transaction ID : SA11A.479486
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION

C. HAMADE, RUDAINA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 6446 CALHOUN
 City DEARBORN State MI Zip Code 48126-2207
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RPMS GROUP Occupation (for Individual) CO-FOUNDER
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 725.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 04 / 2016
Transaction ID : SA11A.473747
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	300.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1465 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. HAMEL SR., ROBERT, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 110 PUDDING HILL RD.
 City HAMPTON State CT Zip Code 06247-2119
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 480.00

Date of Receipt 10 / 28 / 2016
Transaction ID : SA11A.461346
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

B. HAMERSMITH , CHERYL, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 725 N.E. 125 STREET
 City NORTH MIAMI State FL Zip Code 33161-5611
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) HHADVERTISING.NET Occupation (for Individual) ADVERTISING
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt 11 / 03 / 2016
Transaction ID : SA11A.468637
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

C. HAMERSMITH , CHERYL, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 725 N.E. 125 STREET
 City NORTH MIAMI State FL Zip Code 33161-5611
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) HHADVERTISING.NET Occupation (for Individual) ADVERTISING
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt 11 / 03 / 2016
Transaction ID : SA11A.468638
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	225.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1466 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. HAMERSMITH , CHERYL, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 725 N.E. 125 STREET
 City NORTH MIAMI State FL Zip Code 33161-5611
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) HHADVERTISING.NET Occupation (for Individual) ADVERTISING
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt 11 / 06 / 2016
Transaction ID : SA11A.476998
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

B. HAMERSMITH , CHERYL, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 725 N.E. 125 STREET
 City NORTH MIAMI State FL Zip Code 33161-5611
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) HHADVERTISING.NET Occupation (for Individual) ADVERTISING
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt 11 / 06 / 2016
Transaction ID : SA11A.476999
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

C. HAMER, GLADYS, M., MRS,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 143 N OAKVIEW DRIVE
 City KENOVA State WV Zip Code 25530-1909
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) JIM C. HAMER CO. Occupation (for Individual) EXECUTIVE
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt 10 / 24 / 2016
Transaction ID : SA11A.444039
 Amount of Each Receipt this Period 1000.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	1200.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1467 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. HAMER, LORI, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO BOX 418
 City KENOVA State WV Zip Code 25530-0418
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) HAMER PELLET FUEL Occupation (for Individual) PRES
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 3000.00

Date of Receipt 10 / 24 / 2016
Transaction ID : SA11A.443730
 Amount of Each Receipt this Period 3000.00
 Memo Item CONTRIBUTION

B. HAMILTON, ANDREW, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3846 SIDESTREET
 City ATLANTA State GA Zip Code 30341-1773
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) HWAA LLC Occupation (for Individual) ATTORNEY
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 10 / 30 / 2016
Transaction ID : SA11A.460261
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

C. HAMILTON, ANDREW, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3846 SIDESTREET
 City ATLANTA State GA Zip Code 30341-1773
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) HWAA LLC Occupation (for Individual) ATTORNEY
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 11 / 04 / 2016
Transaction ID : SA11A.470871
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	3100.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1468 OF 4311
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. HAMILTON, ANDREW, , MR.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 208 HANTY BRANCH HILL

City BREVARD	State NC	Zip Code 28712-7506
-----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) SELF EMPLOYED	Occupation (for Individual) WRITER
--	---------------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
450.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		31		2016

Transaction ID : SA11A.464547

Amount of Each Receipt this Period
100.00

Memo Item
CONTRIBUTION

B. HAMILTON, EARL, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 55 PINEY MOUNTAIN DRIVE
507

City ASHEVILLE	State NC	Zip Code 28805-1297
-------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1075.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11		03		2016

Transaction ID : SA11A.469101

Amount of Each Receipt this Period
100.00

Memo Item
CONTRIBUTION

C. HAMILTON, FRANK, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 7762 S. GUTHRIE AVE

City TULSA	State OK	Zip Code 74132-2832
---------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) ST JOHN CLINIC	Occupation (for Individual) FAMILY PHYSICIAN
---	---

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
1150.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		24		2016

Transaction ID : SA11A.445830

Amount of Each Receipt this Period
100.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	300.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1469 OF 4311		
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14	<input type="checkbox"/> 11c <input type="checkbox"/> 15	<input type="checkbox"/> 12 <input type="checkbox"/> 16

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NAME OF COMMITTEE (In Full)
Team Ryan

A. HAMILTON, FRANK, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 7762 S. GUTHRIE AVE
 City TULSA State OK Zip Code 74132-2832
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) ST JOHN CLINIC Occupation (for Individual) FAMILY PHYSICIAN
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1150.00

Date of Receipt **10 / 26 / 2016**
Transaction ID : SA11A.454649
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

B. HAMILTON, GEORGE, , MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 10295 SHERWOOD MANOR DRIVE
 City SAINT MICHAELS State MD Zip Code 21663-2410
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt **11 / 03 / 2016**
Transaction ID : SA11A.465340
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

C. HAMILTON, JANE, M., MS.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5 POLO CLUB ROAD
 City DENVER State CO Zip Code 80209-3312
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) INVESTOR
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 5000.00

Date of Receipt **11 / 08 / 2016**
Transaction ID : SA11A.468159
 Amount of Each Receipt this Period 5000.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	5350.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1470 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. HAMILTON, JUDITH, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1329 GRANVIA ALTAMIRA
 City PALOS VERDES ESTAT State CA Zip Code 90274-2005
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 233.00

Date of Receipt 11 / 01 / 2016
Transaction ID : SA11A.462746
 Amount of Each Receipt this Period 30.00
 Memo Item CONTRIBUTION

B. HAMILTON, JUDITH, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1329 GRANVIA ALTAMIRA
 City PALOS VERDES ESTAT State CA Zip Code 90274-2005
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 233.00

Date of Receipt 11 / 01 / 2016
Transaction ID : SA11A.462747
 Amount of Each Receipt this Period 30.00
 Memo Item CONTRIBUTION

C. HAMILTON, PATRICIA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2813 LA SALLE ST.
 City RACINE State WI Zip Code 53402-4139
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 202.00

Date of Receipt 10 / 30 / 2016
Transaction ID : SA11A.460124
 Amount of Each Receipt this Period 32.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶ 92.00
TOTAL This Period (last page this line number only).....▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1471 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
Team Ryan

A. HAMILTON, PATRICIA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2813 LA SALLE ST.
 City RACINE State WI Zip Code 53402-4139
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 202.00

Date of Receipt 11 / 04 / 2016
Transaction ID : SA11A.472753
 Amount of Each Receipt this Period 32.00
 Memo Item CONTRIBUTION

B. HAMILTON, STEPHEN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 985 SISKIYOU DRIVE
 City MENLO PARK State CA Zip Code 94025-7046
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt 10 / 27 / 2016
Transaction ID : SA11A.453802
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

C. HAMILTON, STEPHEN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 985 SISKIYOU DRIVE
 City MENLO PARK State CA Zip Code 94025-7046
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt 11 / 04 / 2016
Transaction ID : SA11A.472329
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	132.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1472 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. HAMM, EDWARD, H., MR.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 243 S BEACH RD

City HOBE SOUND	State FL	Zip Code 33455-2512
--------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) ACOMA OIL	Occupation (for Individual) PARTNER
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
13300.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	14	/	2016

Transaction ID : SA11A.468265

Amount of Each Receipt this Period
900.00

Memo Item
CONTRIBUTION

B. HAMMOND, JAMES, M., MR.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 780 WIGGINS BAY DRIVE

City NAPLES	State FL	Zip Code 34110-6023
----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1081.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	30	/	2016

Transaction ID : SA11A.459644

Amount of Each Receipt this Period
100.00

Memo Item
CONTRIBUTION

C. HAMMOND, JAMES, M., MR.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 780 WIGGINS BAY DRIVE

City NAPLES	State FL	Zip Code 34110-6023
----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
1081.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	30	/	2016

Transaction ID : SA11A.459645

Amount of Each Receipt this Period
100.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	1100.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1473 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
Team Ryan

A. HAMMOND, LUTHER, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 10400 SE138TH PLACE ROAD
 City SUMMERFIELD State FL Zip Code 34491-
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 10 / 31 / 2016
Transaction ID : SA11A.459241
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

B. HAMMOND, LUTHER, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 10400 SE138TH PLACE ROAD
 City SUMMERFIELD State FL Zip Code 34491-
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 10 / 31 / 2016
Transaction ID : SA11A.459242
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

C. HAMPE, CARL, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3821 JENIFER ST NW
 City WASHINGTON State DC Zip Code 20015-1917
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) ATTORNEY
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 10 / 25 / 2016
Transaction ID : SA11A.451879
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	300.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1474 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. HAMPE, CARL, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3821 JENIFER ST NW
 City WASHINGTON State DC Zip Code 20015-1917
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) ATTORNEY
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 300.00

Date of Receipt 10 / 25 / 2016
Transaction ID : SA11A.451884
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

B. HAMPTON, JENNIE, R., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2403 S ARDSON PLACE, UNIT 5028
 City TAMPA State FL Zip Code 33629-7346
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) INFORMATION REQUESTED PER BEST EFFORTS Occupation (for Individual) INFORMATION REQUESTED PER BE
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 300.00

Date of Receipt 10 / 21 / 2016
Transaction ID : SA11A.443640
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

C. HAMPTON, MERRY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3133ROLAND GARROS LN
 City MODESTO State CA Zip Code 95355-8438
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) DESIGNER URNS
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 350.00

Date of Receipt 11 / 04 / 2016
Transaction ID : SA11A.471692
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	250.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1475 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
Team Ryan

A. HAMPTON JR, WARREN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1589 KIRKWOOD PIKE BX 54
 City KIRKWOOD State PA Zip Code 17536-9629
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) DEAN MYLIN Occupation (for Individual) TRUCKER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt
 11 / 03 / 2016
Transaction ID : SA11A.468973
 Amount of Each Receipt this Period
 100.00
 Memo Item CONTRIBUTION

B. HAMPTON JR, WARREN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1589 KIRKWOOD PIKE BX 54
 City KIRKWOOD State PA Zip Code 17536-9629
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) DEAN MYLIN Occupation (for Individual) TRUCKER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt
 11 / 03 / 2016
Transaction ID : SA11A.468977
 Amount of Each Receipt this Period
 100.00
 Memo Item CONTRIBUTION

C. HAMPTON JR, WARREN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1589 KIRKWOOD PIKE BX 54
 City KIRKWOOD State PA Zip Code 17536-9629
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) DEAN MYLIN Occupation (for Individual) TRUCKER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt
 11 / 06 / 2016
Transaction ID : SA11A.477014
 Amount of Each Receipt this Period
 100.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	300.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1476 OF 4311
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
Team Ryan

A. HAMPTON JR, WARREN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1589 KIRKWOOD PIKE BX 54
 City KIRKWOOD State PA Zip Code 17536-9629
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) DEAN MYLIN Occupation (for Individual) TRUCKER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 11 / 06 / 2016
Transaction ID : SA11A.477026
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

B. HAN, LIANCHAO, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 847 N ABINGDON ST
 City ARLINGTON State VA Zip Code 22203-1537
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) INFORMATION REQUESTED PER BEST EFFORTS Occupation (for Individual) INFORMATION REQUESTED PER BE
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 2700.00

Date of Receipt 11 / 01 / 2016
Transaction ID : SA11A.461913
 Amount of Each Receipt this Period 2700.00
 Memo Item CONTRIBUTION

C. HANCHAK, JOHN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 290 WILSON AVE
 City SATELLITE BCH State FL Zip Code 32937-2934
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 225.00

Date of Receipt 10 / 29 / 2016
Transaction ID : SA11A.460865
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 2850.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1477 OF 4311
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. HANCOCK, JACK, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 305WHEATFIELD CIRCLE
GV132

City BRENTWOOD State TN Zip Code 37027-4474

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
527.00

Date of Receipt
10 / 20 / 2016
Transaction ID : SA11A.442444

Amount of Each Receipt this Period
50.00

Memo Item
CONTRIBUTION

B. HANCOCK, JACK, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 305WHEATFIELD CIRCLE
GV132

City BRENTWOOD State TN Zip Code 37027-4474

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
527.00

Date of Receipt
11 / 04 / 2016
Transaction ID : SA11A.473063

Amount of Each Receipt this Period
50.00

Memo Item
CONTRIBUTION

C. HANCOCK, LARRY, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 4513 SANDBRIDGE CT

City RALEIGH State NC Zip Code 27612-4162

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NC STATE UNIVERSITY Occupation (for Individual) EXTENSION 4-H SPECIALIST

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
225.00

Date of Receipt
10 / 30 / 2016
Transaction ID : SA11A.460153

Amount of Each Receipt this Period
25.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 125.00

TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1478 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
Team Ryan

A. HANCOCK, LARRY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4513 SANDBRIDGE CT
 City RALEIGH State NC Zip Code 27612-4162
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NC STATE UNIVERSITY Occupation (for Individual) EXTENSION 4-H SPECIALIST
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 225.00

Date of Receipt 11 / 04 / 2016
Transaction ID : SA11A.473723
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

B. HANDAL, ROBERT, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 243 STURBRIDGE LANE
 City SOUTHPORT State CT Zip Code 06890-1050
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 534.00

Date of Receipt 10 / 27 / 2016
Transaction ID : SA11A.452915
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

C. HANEN-SMITH, MIKE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4323 EAST LAKE STREET
 City MINNEAPOLIS State MN Zip Code 55406-2307
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RIVER LAKE CLINIC Occupation (for Individual) OPTOMETRIST
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt 11 / 04 / 2016
Transaction ID : SA11A.473622
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	225.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1479 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. HANFORD, DENTON, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 505 BROADWAY
 701
 City TACOMA State WA Zip Code 98402-3997
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 600.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 27 / 2016
Transaction ID : SA11A.452734
 Amount of Each Receipt this Period
 100.00
 Memo Item CONTRIBUTION

B. HANNA, ROBERT, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 39 MOORGATE LANE
 City LAKE PLACID State NY Zip Code 12946-1015
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 27 / 2016
Transaction ID : SA11A.453302
 Amount of Each Receipt this Period
 100.00
 Memo Item CONTRIBUTION

C. HANNA, ROBERT, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 39 MOORGATE LANE
 City LAKE PLACID State NY Zip Code 12946-1015
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 27 / 2016
Transaction ID : SA11A.453311
 Amount of Each Receipt this Period
 100.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	300.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1480 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. HANNA, ROBERT, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 39 MOORGATE LANE
 City LAKE PLACID State NY Zip Code 12946-1015
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 10 / 31 / 2016
Transaction ID : SA11A.463977
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

B. HANNA, ROBERT, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 39 MOORGATE LANE
 City LAKE PLACID State NY Zip Code 12946-1015
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 10 / 31 / 2016
Transaction ID : SA11A.464034
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

C. HANNERS, MELVIN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 9400 EAST ILIFF AVE. NO. 55
 City DENVER State CO Zip Code 80231-3484
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) PRPERTY RENTALS
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 10 / 26 / 2016
Transaction ID : SA11A.451205
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶ 100.00
TOTAL This Period (last page this line number only).....▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1481 OF 4311
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. HANNERS, MELVIN, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 9400 EAST ILIFF AVE. NO. 55

City DENVER	State CO	Zip Code 80231-3484
----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) SELF EMPLOYED	Occupation (for Individual) PRPERTY RENTALS
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
500.00

Date of Receipt
11 / 03 / 2016
Transaction ID : SA11A.468524

Amount of Each Receipt this Period
100.00

Memo Item
CONTRIBUTION

B. HANNERS, MELVIN, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 9400 EAST ILIFF AVE. NO. 55

City DENVER	State CO	Zip Code 80231-3484
----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) SELF EMPLOYED	Occupation (for Individual) PRPERTY RENTALS
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
500.00

Date of Receipt
11 / 03 / 2016
Transaction ID : SA11A.468527

Amount of Each Receipt this Period
100.00

Memo Item
CONTRIBUTION

C. HANSEN, BRUCE, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 85 HIGHLAND RD

City TIVERTON	State RI	Zip Code 02878-4421
------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
1100.00

Date of Receipt
10 / 27 / 2016
Transaction ID : SA11A.453773

Amount of Each Receipt this Period
1000.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	1200.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1482 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. HANSEN, DAVID, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 296 BISHOPS FOREST DR.
 City WALTHAM State MA Zip Code 02452-8808
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) DEERWALK, INC Occupation (for Individual) DIRECTOR AND CFO
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 375.00

Date of Receipt 10 / 31 / 2016
Transaction ID : SA11A.459060
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

B. HANSEN, EARLENE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 14889 S. SUNTERRA LOOP
 City OREGON CITY State OR Zip Code 97045-7465
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 10 / 20 / 2016
Transaction ID : SA11A.444768
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

C. HANSEN, EARLENE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 14889 S. SUNTERRA LOOP
 City OREGON CITY State OR Zip Code 97045-7465
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 10 / 31 / 2016
Transaction ID : SA11A.463311
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	250.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1483 OF 4311
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. HANSEN, EARLENE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 14889 S. SUNTERRA LOOP
 City OREGON CITY State OR Zip Code 97045-7465
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 10 / 31 / 2016
Transaction ID : SA11A.463773
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

B. HANSEN, EARLENE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 14889 S. SUNTERRA LOOP
 City OREGON CITY State OR Zip Code 97045-7465
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 10 / 31 / 2016
Transaction ID : SA11A.463781
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

C. HANSEN, JAMES, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 10175 CORNERSTONE LN
 City SOUTH JORDAN State UT Zip Code 84095-4593
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 750.00

Date of Receipt 11 / 05 / 2016
Transaction ID : SA11A.478358
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	350.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1484 OF 4311
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. HANSEN, MICHAEL, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 7648 SOUTH PINE AVE

City OAK CREEK	State WI	Zip Code 53154-2343
-------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) JACSTEN HOLDINGS LLC	Occupation (for Individual) BUSINESS ADVISOR
---	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
2000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	31	/	2016

Transaction ID : SA11A.459057

Amount of Each Receipt this Period
1000.00

Memo Item
CONTRIBUTION

B. HANSEN, PETER, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address RIO MONDAY 185

City ASUNCION	State FL	Zip Code 34202-
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
325.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	02	/	2016

Transaction ID : SA11A.469711

Amount of Each Receipt this Period
100.00

Memo Item
CONTRIBUTION

C. HANSEN, REID, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 830 W. SOUTH LINKS DRIVE

City WASHINGTON	State UT	Zip Code 84780-8524
--------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
400.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	06	/	2016

Transaction ID : SA11A.476958

Amount of Each Receipt this Period
25.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	1125.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1485 OF 4311
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. HANSEN, REID, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 830 W. SOUTH LINKS DRIVE

City WASHINGTON	State UT	Zip Code 84780-8524
--------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
400.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	06	/	2016

Transaction ID : SA11A.476959

Amount of Each Receipt this Period
25.00

Memo Item
CONTRIBUTION

B. HANSEN, RICHARD, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address P.O. BOX 159

City BATAVIA	State IL	Zip Code 60510-0159
-----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
300.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	26	/	2016

Transaction ID : SA11A.450068

Amount of Each Receipt this Period
100.00

Memo Item
CONTRIBUTION

C. HANSEN, RICHARD, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address P.O. BOX 159

City BATAVIA	State IL	Zip Code 60510-0159
-----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
300.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	26	/	2016

Transaction ID : SA11A.450069

Amount of Each Receipt this Period
100.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	225.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1486 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
Team Ryan

A. HANSEN, STEPHEN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 403 KELLY AVENUE
 City HALF MOON BAY State CA Zip Code 94019-1635
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 627.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 20 / 2016
Transaction ID : SA11A.442571
 Amount of Each Receipt this Period
 25.00
 Memo Item
 CONTRIBUTION

B. HANSEN, STEPHEN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 403 KELLY AVENUE
 City HALF MOON BAY State CA Zip Code 94019-1635
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 627.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 21 / 2016
Transaction ID : SA11A.444281
 Amount of Each Receipt this Period
 25.00
 Memo Item
 CONTRIBUTION

C. HANSEN, STEPHEN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 403 KELLY AVENUE
 City HALF MOON BAY State CA Zip Code 94019-1635
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 627.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 25 / 2016
Transaction ID : SA11A.448248
 Amount of Each Receipt this Period
 30.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	80.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1487 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
Team Ryan

A. HANSEN, STEPHEN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 403 KELLY AVENUE

City HALF MOON BAY	State CA	Zip Code 94019-1635
-----------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
627.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 27 / 2016

Transaction ID : SA11A.453106

Amount of Each Receipt this Period
25.00

Memo Item CONTRIBUTION

B. HANSEN, STEPHEN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 403 KELLY AVENUE

City HALF MOON BAY	State CA	Zip Code 94019-1635
-----------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
627.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 30 / 2016

Transaction ID : SA11A.459754

Amount of Each Receipt this Period
38.00

Memo Item CONTRIBUTION

C. HANSEN, STEPHEN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 403 KELLY AVENUE

City HALF MOON BAY	State CA	Zip Code 94019-1635
-----------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
627.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 31 / 2016

Transaction ID : SA11A.463381

Amount of Each Receipt this Period
25.00

Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	88.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1488 OF 4311
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. HANSEN, STEPHEN, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 403 KELLY AVENUE

City HALF MOON BAY	State CA	Zip Code 94019-1635
-----------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
627.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
11		07		2016

Transaction ID : SA11A.475161

Amount of Each Receipt this Period
50.00

Memo Item
CONTRIBUTION

B. HANSEN, TAMMY, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 46814 846TH RD

City BURWELL	State NE	Zip Code 68823-8001
-----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) SELF EMPLOYED	Occupation (for Individual) RANCHER
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
275.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
10		24		2016

Transaction ID : SA11A.449157

Amount of Each Receipt this Period
25.00

Memo Item
CONTRIBUTION

C. HANSEN, TAMMY, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 46814 846TH RD

City BURWELL	State NE	Zip Code 68823-8001
-----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) SELF EMPLOYED	Occupation (for Individual) RANCHER
--	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
275.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
10		24		2016

Transaction ID : SA11A.449162

Amount of Each Receipt this Period
50.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	125.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1489 OF 4311
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. HANSEN, TAMMY, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 46814 846TH RD

City BURWELL	State NE	Zip Code 68823-8001
-----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) SELF EMPLOYED	Occupation (for Individual) RANCHER
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
275.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11		02		2016

Transaction ID : SA11A.470240

Amount of Each Receipt this Period
25.00

Memo Item
CONTRIBUTION

B. HANSEN, TAMMY, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 46814 846TH RD

City BURWELL	State NE	Zip Code 68823-8001
-----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) SELF EMPLOYED	Occupation (for Individual) RANCHER
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
275.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11		02		2016

Transaction ID : SA11A.470253

Amount of Each Receipt this Period
25.00

Memo Item
CONTRIBUTION

C. HANSEN, TAMMY, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 46814 846TH RD

City BURWELL	State NE	Zip Code 68823-8001
-----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) SELF EMPLOYED	Occupation (for Individual) RANCHER
--	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
275.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11		07		2016

Transaction ID : SA11A.480510

Amount of Each Receipt this Period
25.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	75.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1490 OF 4311
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. HANSEN, TAMMY, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 46814 846TH RD

City BURWELL State NE Zip Code 68823-8001

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) RANCHER

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 275.00

Date of Receipt 11 / 07 / 2016
Transaction ID : SA11A.480540

Amount of Each Receipt this Period 25.00

Memo Item CONTRIBUTION

B. HANSON, PAULINE, P., ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 30445 AVENIDA MARAVILLA

City CATHEDRAL CITY State CA Zip Code 92234-6221

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt 10 / 20 / 2016
Transaction ID : SA11A.442598

Amount of Each Receipt this Period 500.00

Memo Item CONTRIBUTION

C. HANTHORN, LARRY, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1317 E 6TH

City PELLA State IA Zip Code 50219-1352

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) MICROSOFT CORPORATION Occupation (for Individual) DELIVERY EXECUTIVE

Receipt For: Primary General Other (specify)

Aggregate Year-to-Date ▼ 1300.00

Date of Receipt 10 / 31 / 2016
Transaction ID : SA11A.458515

Amount of Each Receipt this Period 250.00

Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 775.00

TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1491 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. HARA, YOSHINO, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2455 ACHILLES DR.
 City LOS ANGELES State CA Zip Code 90046-1625
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) OSADA Occupation (for Individual) MANAGER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 850.00

Date of Receipt 10 / 27 / 2016
Transaction ID : SA11A.453306
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

B. HARA, YOSHINO, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2455 ACHILLES DR.
 City LOS ANGELES State CA Zip Code 90046-1625
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) OSADA Occupation (for Individual) MANAGER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 850.00

Date of Receipt 10 / 31 / 2016
Transaction ID : SA11A.458678
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

C. HARA, YOSHINO, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2455 ACHILLES DR.
 City LOS ANGELES State CA Zip Code 90046-1625
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) OSADA Occupation (for Individual) MANAGER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 850.00

Date of Receipt 11 / 02 / 2016
Transaction ID : SA11A.465708
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 225.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1492 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. HARA, YOSHINO, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2455 ACHILLES DR.
 City LOS ANGELES State CA Zip Code 90046-1625
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) OSADA Occupation (for Individual) MANAGER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 850.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 02 / 2016
Transaction ID : SA11A.465711
 Amount of Each Receipt this Period
 25.00
 Memo Item
CONTRIBUTION

B. HARA, YOSHINO, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2455 ACHILLES DR.
 City LOS ANGELES State CA Zip Code 90046-1625
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) OSADA Occupation (for Individual) MANAGER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 850.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 06 / 2016
Transaction ID : SA11A.477472
 Amount of Each Receipt this Period
 100.00
 Memo Item
CONTRIBUTION

C. HARA, YOSHINO, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2455 ACHILLES DR.
 City LOS ANGELES State CA Zip Code 90046-1625
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) OSADA Occupation (for Individual) MANAGER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 850.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 05 / 2016
Transaction ID : SA11A.478668
 Amount of Each Receipt this Period
 100.00
 Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	225.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1493 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
Team Ryan

A. HARBOUR, LAUREL, J., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2501 WEST 120TH PLACE
 City LEAWOOD State KS Zip Code 66209-1115
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 07 / 2016
Transaction ID : SA11A.474707
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION

B. HARDEN, BOB, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 8704 GLENLAKE DRIVE
 City AUSTIN State TX Zip Code 78730-3324
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) R.W. HARDEN & ASSOCIATES Occupation (for Individual) ENGINEER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 02 / 2016
Transaction ID : SA11A.465798
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION

C. HARDEN, BOB, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 8704 GLENLAKE DRIVE
 City AUSTIN State TX Zip Code 78730-3324
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) R.W. HARDEN & ASSOCIATES Occupation (for Individual) ENGINEER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 04 / 2016
Transaction ID : SA11A.471691
 Amount of Each Receipt this Period
 50.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	250.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1494 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
Team Ryan

A. HARDEN, JEFFREY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 17851 WESTVIEW DRIVE
 City LAKE OSWEGO State OR Zip Code 97034-7330
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) CLOTHING IMPORTER
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 250.00

Date of Receipt **10 / 28 / 2016**
Transaction ID : SA11A.456331
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

B. HARDING, GEORGE, T., , IV
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 25134 HURON STREET
 City LOMA LINDA State CA Zip Code 92354-3425
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 500.00

Date of Receipt **10 / 31 / 2016**
Transaction ID : SA11A.457274
 Amount of Each Receipt this Period 500.00
 Memo Item CONTRIBUTION

C. HARDWICKE, LAWRENCE, G., DR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1625 WESTWOOD DR
 City ABILENE State TX Zip Code 79603-4253
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 865.00

Date of Receipt **10 / 28 / 2016**
Transaction ID : SA11A.454788
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	850.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1495 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. HARDWICKE, LAWRENCE, G., DR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1625 WESTWOOD DR
 City ABILENE State TX Zip Code 79603-4253
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 865.00

Date of Receipt 11 / 03 / 2016
Transaction ID : SA11A.465600
 Amount of Each Receipt this Period 200.00
 Memo Item CONTRIBUTION

B. HARDWICKE, LAWRENCE, G., DR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1625 WESTWOOD DR
 City ABILENE State TX Zip Code 79603-4253
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 865.00

Date of Receipt 11 / 04 / 2016
Transaction ID : SA11A.467569
 Amount of Each Receipt this Period 30.00
 Memo Item CONTRIBUTION

C. HARDWICKE, LAWRENCE, G., DR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1625 WESTWOOD DR
 City ABILENE State TX Zip Code 79603-4253
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 865.00

Date of Receipt 11 / 08 / 2016
Transaction ID : SA11A.468028
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	330.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1496 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
Team Ryan

A. HARDY, DAVID, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 6209 AIRPORT RD
 City SYRACUSE State NY Zip Code 13209-9754
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) CONSTRUCTION
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 27 / 2016
Transaction ID : SA11A.457077
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION

B. HARDY, DAVID, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 6209 AIRPORT RD
 City SYRACUSE State NY Zip Code 13209-9754
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) CONSTRUCTION
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 02 / 2016
Transaction ID : SA11A.466714
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION

C. HARE, JAMES, W., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 13903 NORTH CHASE PLACE
 City MIDLOTHIAN State VA Zip Code 23112-2446
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 210.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 08 / 2016
Transaction ID : SA11A.467999
 Amount of Each Receipt this Period
 50.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	250.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1497 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. HARKER, PRUDENCE, A., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 11123 WALTON DRIVE
 City ROSCOE State IL Zip Code 61073-8124
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) LIFE CIRCLE Occupation (for Individual) PRESIDENT
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1035.00

Date of Receipt 11 / 03 / 2016
Transaction ID : SA11A.465190
 Amount of Each Receipt this Period 1000.00
 Memo Item CONTRIBUTION

B. HARLFINGER, CHARLES, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 7830 MANASOTA KEY ROAD
 City ENGLEWOOD State FL Zip Code 34223-9359
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) FBM Occupation (for Individual) BUSINESSMAN
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 2000.00

Date of Receipt 10 / 28 / 2016
Transaction ID : SA11A.461444
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

C. HARLOW, BRYCE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1812 SOLITAIRE LANE
 City MC LEAN State VA Zip Code 22101-4200
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) TIMMONS & CO., INC. Occupation (for Individual) PRESIDENT AND MANAGING PARTNER
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 10000.00

Date of Receipt 10 / 25 / 2016
Transaction ID : SA11A.445021
 Amount of Each Receipt this Period 2500.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	3750.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1498 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
Team Ryan

A. HARNER, STEPHEN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 209 LOUELLA LN
 City NOKOMIS State FL Zip Code 34275-3021
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) CROWS NEST Occupation (for Individual) OWNER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 450.00

Date of Receipt 10 / 28 / 2016
Transaction ID : SA11A.455520
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

B. HARNER, STEPHEN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 209 LOUELLA LN
 City NOKOMIS State FL Zip Code 34275-3021
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) CROWS NEST Occupation (for Individual) OWNER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 450.00

Date of Receipt 10 / 28 / 2016
Transaction ID : SA11A.455521
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

C. HARPER, DAVID, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 41 LANCASTER LANE
 City LINCOLNSHIRE State IL Zip Code 60069-3127
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) ALLSTATE INSURANCE COMPANY Occupation (for Individual) ATTORNEY
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 10 / 20 / 2016
Transaction ID : SA11A.442048
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	450.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1499 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. HARPER, JACKLYN, M., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3 HERMITAGE LANE
 City NEWPORT BEACH State CA Zip Code 92660-5213
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 325.00

Date of Receipt 11 / 01 / 2016
Transaction ID : SA11A.461812
 Amount of Each Receipt this Period 200.00
 Memo Item CONTRIBUTION

B. HARPER, JON, W., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5000 BOARDWALK DRIVE #31 UNIT 31
 City FORT COLLINS State CO Zip Code 80525-6220
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 750.00

Date of Receipt 11 / 04 / 2016
Transaction ID : SA11A.470579
 Amount of Each Receipt this Period 500.00
 Memo Item CONTRIBUTION

C. HARRIS, CONWAY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 13221 HWY 1
 City SHREVEPORT State LA Zip Code 71115-9432
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 11 / 07 / 2016
Transaction ID : SA11A.476515
 Amount of Each Receipt this Period 500.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 1200.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1500 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. HARRIS, JAMES, H., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 419 E. FAIRWAY DR.
 City KILMARNOCK State VA Zip Code 22482-3623
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 11 / 04 / 2016
Transaction ID : SA11A.472215
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

B. HARRIMAN, N, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address P.O. BOX 549
 City WOODACRE State CA Zip Code 94973-0549
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt 11 / 07 / 2016
Transaction ID : SA11A.475566
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

C. HARRIMAN, N, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address P.O. BOX 549
 City WOODACRE State CA Zip Code 94973-0549
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt 11 / 07 / 2016
Transaction ID : SA11A.475567
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	300.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1501 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. HARRIMAN, N, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address P.O. BOX 549
 City WOODACRE State CA Zip Code 94973-0549
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt 11 / 07 / 2016
Transaction ID : SA11A.475577
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

B. HARRIMAN, N, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address P.O. BOX 549
 City WOODACRE State CA Zip Code 94973-0549
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt 11 / 07 / 2016
Transaction ID : SA11A.475578
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

C. HARRIMAN, NANCY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 121 REDWOOD DR. P.O. BOX 549
 City WOODACRE State CA Zip Code 94973-
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt 10 / 26 / 2016
Transaction ID : SA11A.454305
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 300.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1502 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. HARRISON, PAUL, S., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 9 PARK FOREST DRIVE
 City PITTSFORD State NY Zip Code 14534-3560
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) INFORMATION REQUESTED PER BEST EFFORTS Occupation (for Individual) INFORMATION REQUESTED PER BE
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 500.00

Date of Receipt 10 / 20 / 2016
Transaction ID : SA11A.433394
 Amount of Each Receipt this Period 500.00
 Memo Item CONTRIBUTION

B. HARRIS , RHELDA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 18467 N WIMBLEDON DR
 City KATY State TX Zip Code 77449-8436
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 250.00

Date of Receipt 10 / 23 / 2016
Transaction ID : SA11A.449628
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

C. HARRIS , RHELDA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 18467 N WIMBLEDON DR
 City KATY State TX Zip Code 77449-8436
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 250.00

Date of Receipt 11 / 07 / 2016
Transaction ID : SA11A.475050
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 625.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1503 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. HARRIS, VAN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1106 ROLLING HILLS DRIVE
 City AUGUSTA State KS Zip Code 67010-2436
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) ALEXANDER & TOWNSEND Occupation (for Individual) SALES
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 281.00

Date of Receipt 10 / 31 / 2016
Transaction ID : SA11A.464258
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

B. HARROLD, CHARLES, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 645 DEMARINI DR.
 City WALLA WALLA State WA Zip Code 99362-5032
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 800.00

Date of Receipt 10 / 29 / 2016
Transaction ID : SA11A.460744
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

C. HART, GEORGE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1346 W. 16TH PLACE
 City YUMA State AZ Zip Code 85364-5310
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RESTCORP Occupation (for Individual) UXO SPECIALIST
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 600.00

Date of Receipt 10 / 23 / 2016
Transaction ID : SA11A.446404
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	450.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1504 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
Team Ryan

A. HART, PETER, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 101 BUBIER ROAD
 City MARBLEHEAD State MA Zip Code 01945-3620
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 31 / 2016
Transaction ID : SA11A.464718
 Amount of Each Receipt this Period
 250.00
 Memo Item
 CONTRIBUTION

B. HART, PETER, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 101 BUBIER ROAD
 City MARBLEHEAD State MA Zip Code 01945-3620
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 07 / 2016
Transaction ID : SA11A.474817
 Amount of Each Receipt this Period
 250.00
 Memo Item
 CONTRIBUTION

C. HART, RAYMOND, K., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 145 GROGANS LAKE DR
 City SANDY SPRINGS State GA Zip Code 30350-3115
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 325.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 04 / 2016
Transaction ID : SA11A.472299
 Amount of Each Receipt this Period
 50.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	550.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1505 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
Team Ryan

A. HARTER, GILBERT, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1014 PEPPERIDGE COURT
 City MIDLAND State MI Zip Code 48640-2717
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 03 / 2016
Transaction ID : SA11A.465579
 Amount of Each Receipt this Period
 200.00
 Memo Item CONTRIBUTION

B. HARTER, TERRANCE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 260 CAMPBELL DR
 City CANYON LAKE State TX Zip Code 78133-6409
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 600.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 27 / 2016
Transaction ID : SA11A.454072
 Amount of Each Receipt this Period
 100.00
 Memo Item CONTRIBUTION

C. HARTER, TERRANCE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 260 CAMPBELL DR
 City CANYON LAKE State TX Zip Code 78133-6409
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 600.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 02 / 2016
Transaction ID : SA11A.465786
 Amount of Each Receipt this Period
 200.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	500.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1506 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
Team Ryan

A. HARTING, WILLIAM, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 101 TAYLOR RD
 City ESTILL SPRINGS State TN Zip Code 37330-3831
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 01 / 2016
Transaction ID : SA11A.467435
 Amount of Each Receipt this Period
 250.00
 Memo Item
 CONTRIBUTION

B. HARTLEY, MICHEAL, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1338 COMANCHE DR
 City ALLEN State TX Zip Code 75013-5497
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) INWOOD NATIONAL BANK Occupation (for Individual) BANKER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 375.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 28 / 2016
Transaction ID : SA11A.455871
 Amount of Each Receipt this Period
 50.00
 Memo Item
 CONTRIBUTION

C. HARTLEY, MICHEAL, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1338 COMANCHE DR
 City ALLEN State TX Zip Code 75013-5497
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) INWOOD NATIONAL BANK Occupation (for Individual) BANKER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 375.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 04 / 2016
Transaction ID : SA11A.473203
 Amount of Each Receipt this Period
 25.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	325.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1507 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. HARTMAN, LYNDA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2387 MOUNT OLYMPUS DRIVE
 City LOS ANGELES State CA Zip Code 90046-1660
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) REAL ESTATE
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1100.00

Date of Receipt 10 / 25 / 2016
Transaction ID : SA11A.448149
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

B. HARTMAN, LYNDA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2387 MOUNT OLYMPUS DRIVE
 City LOS ANGELES State CA Zip Code 90046-1660
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) REAL ESTATE
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1100.00

Date of Receipt 10 / 25 / 2016
Transaction ID : SA11A.448150
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

C. HARTMAN, LYNDA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2387 MOUNT OLYMPUS DRIVE
 City LOS ANGELES State CA Zip Code 90046-1660
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) REAL ESTATE
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1100.00

Date of Receipt 10 / 26 / 2016
Transaction ID : SA11A.454664
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	600.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1508 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. HARTMAN, LYNDA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2387 MOUNT OLYMPUS DRIVE
 City LOS ANGELES State CA Zip Code 90046-1660
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) REAL ESTATE
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1100.00

Date of Receipt 10 / 26 / 2016
Transaction ID : SA11A.454665
 Amount of Each Receipt this Period 100.00
 Memo Item
CONTRIBUTION

B. HARTMAN, MARCIA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 771 HAYES ST
 City MARNE State MI Zip Code 49435-9601
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) H&H METAL SOURCE Occupation (for Individual) CFO
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1100.00

Date of Receipt 10 / 30 / 2016
Transaction ID : SA11A.460112
 Amount of Each Receipt this Period 100.00
 Memo Item
CONTRIBUTION

C. HARTMAN, MARCIA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 771 HAYES ST
 City MARNE State MI Zip Code 49435-9601
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) H&H METAL SOURCE Occupation (for Individual) CFO
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1100.00

Date of Receipt 11 / 04 / 2016
Transaction ID : SA11A.472725
 Amount of Each Receipt this Period 100.00
 Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 300.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1509 OF 4311
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. HARTRY, ERIC, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 920 SOUTH MALGREN AVE.

City SAN PEDRO	State CA	Zip Code 90732-3718
-------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) SELF EMPLOYED	Occupation (for Individual) MUSICIAN
--	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
437.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		23		2016

Transaction ID : SA11A.446416

Amount of Each Receipt this Period
25.00

Memo Item
CONTRIBUTION

B. HARTRY, ERIC, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 920 SOUTH MALGREN AVE.

City SAN PEDRO	State CA	Zip Code 90732-3718
-------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) SELF EMPLOYED	Occupation (for Individual) MUSICIAN
--	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
437.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		31		2016

Transaction ID : SA11A.463245

Amount of Each Receipt this Period
25.00

Memo Item
CONTRIBUTION

C. HARTRY, ERIC, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 920 SOUTH MALGREN AVE.

City SAN PEDRO	State CA	Zip Code 90732-3718
-------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) SELF EMPLOYED	Occupation (for Individual) MUSICIAN
--	---

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
437.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11		02		2016

Transaction ID : SA11A.470117

Amount of Each Receipt this Period
25.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	75.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 1510 OF 4311
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. HARTRY, ERIC, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 920 SOUTH MALGREN AVE.
City SAN PEDRO State CA Zip Code 90732-3718
FEC ID number of contributing federal political committee. **C**
Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) MUSICIAN
Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 437.00

Date of Receipt **11 / 06 / 2016**
Transaction ID : SA11A.477361
Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

B. HARTRY, ERIC, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 920 SOUTH MALGREN AVE.
City SAN PEDRO State CA Zip Code 90732-3718
FEC ID number of contributing federal political committee. **C**
Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) MUSICIAN
Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 437.00

Date of Receipt **11 / 05 / 2016**
Transaction ID : SA11A.478564
Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

C. HARTRY, ERIC, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 920 SOUTH MALGREN AVE.
City SAN PEDRO State CA Zip Code 90732-3718
FEC ID number of contributing federal political committee. **C**
Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) MUSICIAN
Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 437.00

Date of Receipt **11 / 07 / 2016**
Transaction ID : SA11A.480007
Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 75.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1511 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. HARTRY, ERIC, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 920 SOUTH MALGREN AVE.
 City SAN PEDRO State CA Zip Code 90732-3718
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) MUSICIAN
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 437.00

Date of Receipt **11 / 07 / 2016**
Transaction ID : SA11A.480581
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

B. HARTZLER, DOROTHY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 839 SIMMONS CT.
 City SOUTHLAKE State TX Zip Code 76092-5556
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 1000.00

Date of Receipt **10 / 25 / 2016**
Transaction ID : SA11A.448843
 Amount of Each Receipt this Period 200.00
 Memo Item CONTRIBUTION

C. HARTZLER, DOROTHY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 839 SIMMONS CT.
 City SOUTHLAKE State TX Zip Code 76092-5556
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 1000.00

Date of Receipt **11 / 04 / 2016**
Transaction ID : SA11A.471549
 Amount of Each Receipt this Period 200.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	425.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1512 OF 4311
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. HARVEY, MARVIN, C., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1427 MARSH BROOK ROAD
 City ROCHESTER State VT Zip Code 05767-9643
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 10 / 31 / 2016
Transaction ID : SA11A.457271
 Amount of Each Receipt this Period 500.00
 Memo Item CONTRIBUTION

B. HARWARD, TERRY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 704 N. 1890 W. 41A
 City PROVO State UT Zip Code 84601-1331
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) 820 N. BUSINESS PARK Occupation (for Individual) REAL ESTATE
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 10 / 24 / 2016
Transaction ID : SA11A.445963
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

C. HARWICK, WAYNE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 19360 RINALDI ST. 684
 City PORTER RANCH State CA Zip Code 91326-1607
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NORTHROP GRUMMAN Occupation (for Individual) COST ENGINEER
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 503.00

Date of Receipt 10 / 25 / 2016
Transaction ID : SA11A.448395
 Amount of Each Receipt this Period 30.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 630.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1513 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
Team Ryan

A. HARWICK, WAYNE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 19360 RINALDI ST.
684

City PORTER RANCH	State CA	Zip Code 91326-1607
----------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NORTHROP GRUMMAN	Occupation (for Individual) COST ENGINEER
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
503.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 26 / 2016

Transaction ID : SA11A.450948

Amount of Each Receipt this Period
5.00

Memo Item
CONTRIBUTION

B. HARWICK, WAYNE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 19360 RINALDI ST.
684

City PORTER RANCH	State CA	Zip Code 91326-1607
----------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NORTHROP GRUMMAN	Occupation (for Individual) COST ENGINEER
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
503.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 26 / 2016

Transaction ID : SA11A.450950

Amount of Each Receipt this Period
25.00

Memo Item
CONTRIBUTION

C. HARWICK, WAYNE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 19360 RINALDI ST.
684

City PORTER RANCH	State CA	Zip Code 91326-1607
----------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NORTHROP GRUMMAN	Occupation (for Individual) COST ENGINEER
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
503.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 26 / 2016

Transaction ID : SA11A.450954

Amount of Each Receipt this Period
18.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	48.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1514 OF 4311
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. HARWICK, WAYNE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 19360 RINALDI ST.
 684
 City PORTER RANCH State CA Zip Code 91326-1607
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NORTHROP GRUMMAN Occupation (for Individual) COST ENGINEER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 503.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 26 / 2016
Transaction ID : SA11A.450980
 Amount of Each Receipt this Period
 30.00
 Memo Item
 CONTRIBUTION

B. HARWICK, WAYNE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 19360 RINALDI ST.
 684
 City PORTER RANCH State CA Zip Code 91326-1607
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NORTHROP GRUMMAN Occupation (for Individual) COST ENGINEER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 503.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 26 / 2016
Transaction ID : SA11A.450981
 Amount of Each Receipt this Period
 30.00
 Memo Item
 CONTRIBUTION

C. HARWICK, WAYNE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 19360 RINALDI ST.
 684
 City PORTER RANCH State CA Zip Code 91326-1607
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NORTHROP GRUMMAN Occupation (for Individual) COST ENGINEER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 503.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 25 / 2016
Transaction ID : SA11A.451458
 Amount of Each Receipt this Period
 30.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	90.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1515 OF 4311
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. HARWICK, WAYNE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 19360 RINALDI ST.
 684
 City PORTER RANCH State CA Zip Code 91326-1607
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NORTHROP GRUMMAN Occupation (for Individual) COST ENGINEER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 503.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 25 / 2016
Transaction ID : SA11A.451459
 Amount of Each Receipt this Period
 30.00
 Memo Item
 CONTRIBUTION

B. HARWICK, WAYNE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 19360 RINALDI ST.
 684
 City PORTER RANCH State CA Zip Code 91326-1607
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NORTHROP GRUMMAN Occupation (for Individual) COST ENGINEER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 503.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 27 / 2016
Transaction ID : SA11A.453469
 Amount of Each Receipt this Period
 25.00
 Memo Item
 CONTRIBUTION

C. HARWICK, WAYNE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 19360 RINALDI ST.
 684
 City PORTER RANCH State CA Zip Code 91326-1607
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NORTHROP GRUMMAN Occupation (for Individual) COST ENGINEER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 503.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 27 / 2016
Transaction ID : SA11A.453472
 Amount of Each Receipt this Period
 25.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	80.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1516 OF 4311
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. HARWICK, WAYNE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 19360 RINALDI ST.
 684
 City PORTER RANCH State CA Zip Code 91326-1607
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NORTHROP GRUMMAN Occupation (for Individual) COST ENGINEER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 503.00

Date of Receipt 10 / 31 / 2016
Transaction ID : SA11A.458825
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

B. HARWICK, WAYNE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 19360 RINALDI ST.
 684
 City PORTER RANCH State CA Zip Code 91326-1607
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NORTHROP GRUMMAN Occupation (for Individual) COST ENGINEER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 503.00

Date of Receipt 10 / 31 / 2016
Transaction ID : SA11A.458827
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

C. HARWICK, WAYNE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 19360 RINALDI ST.
 684
 City PORTER RANCH State CA Zip Code 91326-1607
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NORTHROP GRUMMAN Occupation (for Individual) COST ENGINEER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 503.00

Date of Receipt 11 / 02 / 2016
Transaction ID : SA11A.467072
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 75.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1517 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
Team Ryan

A. HARWICK, WAYNE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 19360 RINALDI ST.
 684
 City PORTER RANCH State CA Zip Code 91326-1607
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NORTHROP GRUMMAN Occupation (for Individual) COST ENGINEER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 503.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 07 / 2016
Transaction ID : SA11A.474987
 Amount of Each Receipt this Period
 30.00
 Memo Item
 CONTRIBUTION

B. HARWOOD, MICHAEL, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5105 RAINTREE CIRCLE
 City CULVER CITY State CA Zip Code 90230-4433
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 28 / 2016
Transaction ID : SA11A.456050
 Amount of Each Receipt this Period
 50.00
 Memo Item
 CONTRIBUTION

C. HARWOOD, MICHAEL, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5105 RAINTREE CIRCLE
 City CULVER CITY State CA Zip Code 90230-4433
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 04 / 2016
Transaction ID : SA11A.473236
 Amount of Each Receipt this Period
 50.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	130.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1518 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. HASKIN, TERRY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 256 GREEN VALLEY ROAD
 City FREEDOM State CA Zip Code 95019-3139
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 700.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 06 / 2016
Transaction ID : SA11A.477968
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION

B. HASKIN, TERRY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 256 GREEN VALLEY ROAD
 City FREEDOM State CA Zip Code 95019-3139
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 700.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 06 / 2016
Transaction ID : SA11A.477970
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION

C. HASKIN, TERRY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 256 GREEN VALLEY ROAD
 City FREEDOM State CA Zip Code 95019-3139
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 700.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 06 / 2016
Transaction ID : SA11A.477981
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	300.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1519 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
Team Ryan

A. HASKIN, TERRY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 256 GREEN VALLEY ROAD
 City FREEDOM State CA Zip Code 95019-3139
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 700.00

Date of Receipt
 11 / 06 / 2016
Transaction ID : SA11A.477982
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION

B. HASKIN, TERRY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 256 GREEN VALLEY ROAD
 City FREEDOM State CA Zip Code 95019-3139
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 700.00

Date of Receipt
 11 / 05 / 2016
Transaction ID : SA11A.479323
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION

C. HASKIN, TERRY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 256 GREEN VALLEY ROAD
 City FREEDOM State CA Zip Code 95019-3139
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 700.00

Date of Receipt
 11 / 05 / 2016
Transaction ID : SA11A.479331
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	300.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1520 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
-----------------------------	-----------------------------	-----------------------------

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NAME OF COMMITTEE (In Full)
Team Ryan

A. HASLAM, SUSAN, B., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO BOX 10528

City KNOXVILLE	State TN	Zip Code 37939-0528
-------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) RIVR MEDIA	Occupation (for Individual) CEO
---	------------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
100000.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 01 / 2016
Transaction ID : SA11A.461905

Amount of Each Receipt this Period
50000.00

Memo Item
CONTRIBUTION

B. HATCH, STEPHEN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 110 WEST CENTER

City SCIPIO	State UT	Zip Code 84656-7701
----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) SELF EMPLOYED	Occupation (for Individual) REAL ESTATE APPRAISER/RANCHE
--	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
277.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 30 / 2016
Transaction ID : SA11A.460100

Amount of Each Receipt this Period
50.00

Memo Item
CONTRIBUTION

C. HATCH, STEPHEN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 110 WEST CENTER

City SCIPIO	State UT	Zip Code 84656-7701
----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) SELF EMPLOYED	Occupation (for Individual) REAL ESTATE APPRAISER/RANCHE
--	---

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
277.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 04 / 2016
Transaction ID : SA11A.472446

Amount of Each Receipt this Period
50.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	50100.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1521 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name A. HAUBRICH, CHARLES, O., MR.,			Date of Receipt M M M / D D D / Y Y Y Y Y Y 10 / 24 / 2016 Transaction ID : SA11A.449237		
Mailing Address 33343 ACADEMY RD			Amount of Each Receipt this Period 100.00		
City BURLINGTON	State WI	Zip Code 53105-9614	<input type="checkbox"/> Memo Item CONTRIBUTION		
FEC ID number of contributing federal political committee. C					
Name of Employer (for Individual) NONE		Occupation (for Individual) RETIRED			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 700.00			

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name B. HAUBRICH, CHARLES, O., MR.,			Date of Receipt M M M / D D D / Y Y Y Y Y Y 10 / 24 / 2016 Transaction ID : SA11A.449242		
Mailing Address 33343 ACADEMY RD			Amount of Each Receipt this Period 100.00		
City BURLINGTON	State WI	Zip Code 53105-9614	<input type="checkbox"/> Memo Item CONTRIBUTION		
FEC ID number of contributing federal political committee. C					
Name of Employer (for Individual) NONE		Occupation (for Individual) RETIRED			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 700.00			

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name C. HAUBRICH, CHARLES, O., MR.,			Date of Receipt M M M / D D D / Y Y Y Y Y Y 10 / 24 / 2016 Transaction ID : SA11A.449244		
Mailing Address 33343 ACADEMY RD			Amount of Each Receipt this Period 100.00		
City BURLINGTON	State WI	Zip Code 53105-9614	<input type="checkbox"/> Memo Item CONTRIBUTION		
FEC ID number of contributing federal political committee. C					
Name of Employer (for Individual) NONE		Occupation (for Individual) RETIRED			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		Aggregate Year-to-Date ▼ 700.00			

SUBTOTAL of Receipts This Page (optional).....	300.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1522 OF 4311
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. HAUBRICH, CHARLES, O., MR.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 33343 ACADEMY RD

City BURLINGTON	State WI	Zip Code 53105-9614
--------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
700.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		24		2016

Transaction ID : SA11A.449245

Amount of Each Receipt this Period
100.00

Memo Item
CONTRIBUTION

B. HAUF, ALLEN, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 27 STACEY CIRCLE

City WINDHAM	State NH	Zip Code 03087-1644
-----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) UNIFIED OFFICE	Occupation (for Individual) SALES AND MARKETING EXECUTIV
---	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
280.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		24		2016

Transaction ID : SA11A.445630

Amount of Each Receipt this Period
100.00

Memo Item
CONTRIBUTION

C. HAUF, ALLEN, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 27 STACEY CIRCLE

City WINDHAM	State NH	Zip Code 03087-1644
-----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) UNIFIED OFFICE	Occupation (for Individual) SALES AND MARKETING EXECUTIV
---	---

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
280.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11		02		2016

Transaction ID : SA11A.466310

Amount of Each Receipt this Period
30.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	230.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1523 OF 4311
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. HAUGNER, SANDRA, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 5137 HEAVENLY RIDGE LANE

City EL SOBRANTE	State CA	Zip Code 94803-2543
---------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
225.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		31		2016

Transaction ID : SA11A.464050

Amount of Each Receipt this Period
100.00

Memo Item CONTRIBUTION

B. HAUGNER, SANDRA, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 5137 HEAVENLY RIDGE LANE

City EL SOBRANTE	State CA	Zip Code 94803-2543
---------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
225.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11		01		2016

Transaction ID : SA11A.467354

Amount of Each Receipt this Period
25.00

Memo Item CONTRIBUTION

C. HAUPTFUHRER, BRYAN, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1249 GULPH CREEK DRIVE

City RADNOR	State PA	Zip Code 19087-4687
----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		31		2016

Transaction ID : SA11A.464600

Amount of Each Receipt this Period
250.00

Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	375.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1524 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
Team Ryan

A. HAVENS, KATHLEEN, G., MS.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 127 , GLENMERE DR.
 City CHATHAM TWP State NJ Zip Code 07928-1307
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) KATHLEEN HAVENS Occupation (for Individual) ARTIST
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 390.00

Date of Receipt **10 / 30 / 2016**
Transaction ID : SA11A.460031
 Amount of Each Receipt this Period 20.00
 Memo Item CONTRIBUTION

B. HAVENS, KATHLEEN, G., MS.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 127 , GLENMERE DR.
 City CHATHAM TWP State NJ Zip Code 07928-1307
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) KATHLEEN HAVENS Occupation (for Individual) ARTIST
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 390.00

Date of Receipt **11 / 05 / 2016**
Transaction ID : SA11A.479006
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

C. HAVEN, LAVONNE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 9060 ASHVILLE DR.
 City PENSACOLA State FL Zip Code 32514-5691
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) CAMP FIRE GULF WIND, INC. Occupation (for Individual) YOUTH DEVELOPMENT
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 825.00

Date of Receipt **11 / 04 / 2016**
Transaction ID : SA11A.471557
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	95.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1525 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
Team Ryan

A. HAVEN, LAVONNE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 9060 ASHVILLE DR.
 City PENSACOLA State FL Zip Code 32514-5691
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) CAMP FIRE GULF WIND, INC. Occupation (for Individual) YOUTH DEVELOPMENT
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 825.00

Date of Receipt **11 / 04 / 2016**
Transaction ID : SA11A.472374
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

B. HAVEN, MARIE, L., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 9060 ASHVILLE DR.
 City PENSACOLA State FL Zip Code 32514-5691
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) CAMP FIRE GULF WIND, INC. Occupation (for Individual) YOUTH DEVELOPMENT
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 385.00

Date of Receipt **10 / 25 / 2016**
Transaction ID : SA11A.448637
 Amount of Each Receipt this Period 30.00
 Memo Item CONTRIBUTION

C. HAVEN, MARIE, L., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 9060 ASHVILLE DR.
 City PENSACOLA State FL Zip Code 32514-5691
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) CAMP FIRE GULF WIND, INC. Occupation (for Individual) YOUTH DEVELOPMENT
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 385.00

Date of Receipt **10 / 25 / 2016**
Transaction ID : SA11A.448641
 Amount of Each Receipt this Period 30.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	85.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1526 OF 4311
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. HAVEN, MARIE, L., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 9060 ASHVILLE DR.
 City PENSACOLA State FL Zip Code 32514-5691
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Occupation (for Individual)
 CAMP FIRE GULF WIND, INC. YOUTH DEVELOPMENT
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 385.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 26 / 2016
Transaction ID : SA11A.454614
 Amount of Each Receipt this Period
 25.00
 Memo Item
 CONTRIBUTION

B. HAVEN, MARIE, L., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 9060 ASHVILLE DR.
 City PENSACOLA State FL Zip Code 32514-5691
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Occupation (for Individual)
 CAMP FIRE GULF WIND, INC. YOUTH DEVELOPMENT
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 385.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 26 / 2016
Transaction ID : SA11A.454616
 Amount of Each Receipt this Period
 25.00
 Memo Item
 CONTRIBUTION

C. HAVEN, MARIE, L., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 9060 ASHVILLE DR.
 City PENSACOLA State FL Zip Code 32514-5691
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Occupation (for Individual)
 CAMP FIRE GULF WIND, INC. YOUTH DEVELOPMENT
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 385.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 31 / 2016
Transaction ID : SA11A.458934
 Amount of Each Receipt this Period
 50.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶ 100.00
TOTAL This Period (last page this line number only).....▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1527 OF 4311
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. HAVER, DAVID, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 140 WOODBINE STREET

City BERGENFIELD State NJ Zip Code 07621-3520

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 439.00

Date of Receipt 10 / 27 / 2016
Transaction ID : SA11A.453450

Amount of Each Receipt this Period 100.00

Memo Item CONTRIBUTION

B. HAWES, GEORGE, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 6 RICHMOND ROAD

City NORWALK State CT Zip Code 06853-1620

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 400.00

Date of Receipt 10 / 27 / 2016
Transaction ID : SA11A.454053

Amount of Each Receipt this Period 50.00

Memo Item CONTRIBUTION

C. HAWES, GEORGE, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 6 RICHMOND ROAD

City NORWALK State CT Zip Code 06853-1620

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 400.00

Date of Receipt 10 / 31 / 2016
Transaction ID : SA11A.458088

Amount of Each Receipt this Period 50.00

Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 200.00

TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1528 OF 4311
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. HAWES, GEORGE, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 6 RICHMOND ROAD

City NORWALK	State CT	Zip Code 06853-1620
-----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
400.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11		02		2016

Transaction ID : SA11A.469715

Amount of Each Receipt this Period
25.00

Memo Item
CONTRIBUTION

B. HAWES, GEORGE, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 6 RICHMOND ROAD

City NORWALK	State CT	Zip Code 06853-1620
-----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
400.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11		02		2016

Transaction ID : SA11A.469716

Amount of Each Receipt this Period
25.00

Memo Item
CONTRIBUTION

C. HAWKINS, ORVAL, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 45 CEDAR TREE LANE

City PARKERSBURG	State WV	Zip Code 26104-7256
---------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
514.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		25		2016

Transaction ID : SA11A.448505

Amount of Each Receipt this Period
25.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	75.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1529 OF 4311
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. HAWKINS, ORVAL, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 45 CEDAR TREE LANE
 City PARKERSBURG State WV Zip Code 26104-7256
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 514.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 26 / 2016
Transaction ID : SA11A.450460
 Amount of Each Receipt this Period
 25.00
 Memo Item
 CONTRIBUTION

B. HAWKINS, ORVAL, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 45 CEDAR TREE LANE
 City PARKERSBURG State WV Zip Code 26104-7256
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 514.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 31 / 2016
Transaction ID : SA11A.463882
 Amount of Each Receipt this Period
 25.00
 Memo Item
 CONTRIBUTION

C. HAWKINS, ORVAL, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 45 CEDAR TREE LANE
 City PARKERSBURG State WV Zip Code 26104-7256
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 514.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 02 / 2016
Transaction ID : SA11A.465815
 Amount of Each Receipt this Period
 25.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	75.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1530 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. HAWKINS, ORVAL, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 45 CEDAR TREE LANE
 City PARKERSBURG State WV Zip Code 26104-7256
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 514.00

Date of Receipt 11 / 07 / 2016
Transaction ID : SA11A.474648
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

B. HAWKINS, ORVAL, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 45 CEDAR TREE LANE
 City PARKERSBURG State WV Zip Code 26104-7256
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 514.00

Date of Receipt 11 / 07 / 2016
Transaction ID : SA11A.475690
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

C. HAWRAN, PAUL, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 515 LIDO DRIVE
 City FT LAUDERDALE State FL Zip Code 33301-2537
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 10 / 24 / 2016
Transaction ID : SA11A.445986
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 300.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1531 OF 4311
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. HAWS, FRANK, P., DR., M.D.
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 421 MCCLUNG AVENUE SE

City HUNTSVILLE	State AL	Zip Code 35801-3111
--------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
600.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		27		2016

Transaction ID : SA11A.452316

Amount of Each Receipt this Period
100.00

Memo Item CONTRIBUTION

B. HAWTHORNE, JERROLD, D., MR.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 5724 ODESSA STREET

City BEL AIRE	State KS	Zip Code 67220-1840
------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
217.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		30		2016

Transaction ID : SA11A.460253

Amount of Each Receipt this Period
50.00

Memo Item CONTRIBUTION

C. HAWTHORNE, JERROLD, D., MR.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 5724 ODESSA STREET

City BEL AIRE	State KS	Zip Code 67220-1840
------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
217.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11		04		2016

Transaction ID : SA11A.470700

Amount of Each Receipt this Period
50.00

Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	200.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1532 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
-----------------------------	-----------------------------	-----------------------------

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NAME OF COMMITTEE (In Full)
Team Ryan

A. HAY, JAMES, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1245 E. BRAEMERE RD.
 City BOISE State ID Zip Code 83702-1853
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 800.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 30 / 2016
Transaction ID : SA11A.459558
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION

B. HAY, KATHY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 12491 55TH
 City OTTUMWA State IA Zip Code 52501-8171
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 225.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 26 / 2016
Transaction ID : SA11A.449846
 Amount of Each Receipt this Period
 50.00
 Memo Item
 CONTRIBUTION

C. HAY, PETER, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 14344 N ROME AVE
 City TAMPA State FL Zip Code 33613-2030
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 21 / 2016
Transaction ID : SA11A.447192
 Amount of Each Receipt this Period
 200.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	350.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1533 OF 4311
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. HAY, PETER, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 14344 N ROME AVE

City TAMPA	State FL	Zip Code 33613-2030
---------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
400.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		21		2016

Transaction ID : SA11A.447193

Amount of Each Receipt this Period
100.00

Memo Item CONTRIBUTION

B. HAY, PETER, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 14344 N ROME AVE

City TAMPA	State FL	Zip Code 33613-2030
---------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
400.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		21		2016

Transaction ID : SA11A.447194

Amount of Each Receipt this Period
100.00

Memo Item CONTRIBUTION

C. HAYCOCK, COLLEEN, J., ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 7657 SPANISH LAKE DRIVE

City LAS VEGAS	State NV	Zip Code 89113-1357
-------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) HOMEMAKER	Occupation (for Individual) HOMEMAKER
--	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
480.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		27		2016

Transaction ID : SA11A.452407

Amount of Each Receipt this Period
100.00

Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	300.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1534 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. HAYCOCK, COLLEEN, J., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 7657 SPANISH LAKE DRIVE
 City LAS VEGAS State NV Zip Code 89113-1357
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) **HOMEMAKER** Occupation (for Individual) **HOMEMAKER**
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ **480.00**

Date of Receipt **11 / 04 / 2016**
Transaction ID : SA11A.467601
 Amount of Each Receipt this Period **100.00**
 Memo Item
CONTRIBUTION

B. HAYCOCK, COLLEEN, J., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 7657 SPANISH LAKE DRIVE
 City LAS VEGAS State NV Zip Code 89113-1357
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) **HOMEMAKER** Occupation (for Individual) **HOMEMAKER**
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ **480.00**

Date of Receipt **11 / 17 / 2016**
Transaction ID : SA11A.468414
 Amount of Each Receipt this Period **25.00**
 Memo Item
CONTRIBUTION

C. HAYDEN, DAN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 540 SANDY WAY
 City BENICIA State CA Zip Code 94510-2623
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) **NONE** Occupation (for Individual) **RETIRED**
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ **875.00**

Date of Receipt **10 / 26 / 2016**
Transaction ID : SA11A.454584
 Amount of Each Receipt this Period **100.00**
 Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	225.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1535 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. HAYDEN, DAN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 540 SANDY WAY
 City BENICIA State CA Zip Code 94510-2623
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 875.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 02 / 2016
Transaction ID : SA11A.469369
 Amount of Each Receipt this Period
 50.00
 Memo Item
 CONTRIBUTION

B. HAYDEN, RUFUS, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 508 N HIDALGO AVENUE
 City ALHAMBRA State CA Zip Code 91801-2642
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) PERSONAL INVESTMENTS
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 10000.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 01 / 2016
Transaction ID : SA11A.461559
 Amount of Each Receipt this Period
 10000.00
 Memo Item
 CONTRIBUTION

C. HAYDEN, THOMAS, I., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 7394 SEA PINES PLACE
 City WEST CHESTER State OH Zip Code 45069-6587
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 225.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 28 / 2016
Transaction ID : SA11A.454771
 Amount of Each Receipt this Period
 50.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	10100.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1536 OF 4311
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. HAYES, FORREST, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 56 WEXFORD ON THE GREEN

City HILTON HEAD	State SC	Zip Code 29928-6125
---------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) SELF EMPLOYED	Occupation (for Individual) TRUSTEE/DIRECTOR
--	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
795.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		28		2016

Transaction ID : SA11A.455616

Amount of Each Receipt this Period
100.00

Memo Item CONTRIBUTION

B. HAYES, FORREST, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 56 WEXFORD ON THE GREEN

City HILTON HEAD	State SC	Zip Code 29928-6125
---------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) SELF EMPLOYED	Occupation (for Individual) TRUSTEE/DIRECTOR
--	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
795.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11		04		2016

Transaction ID : SA11A.473347

Amount of Each Receipt this Period
50.00

Memo Item CONTRIBUTION

C. HAYES, FORREST, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 56 WEXFORD ON THE GREEN

City HILTON HEAD	State SC	Zip Code 29928-6125
---------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) SELF EMPLOYED	Occupation (for Individual) TRUSTEE/DIRECTOR
--	---

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
795.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11		07		2016

Transaction ID : SA11A.476231

Amount of Each Receipt this Period
100.00

Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	250.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1537 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. HAYES, ROBERT, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 358 ULTIMO AVENUE
 City LONG BEACH State CA Zip Code 90814-3210
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) WILLIS TOWERS WATSON Occupation (for Individual) INSURANCE EXECUTIVE
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 295.00

Date of Receipt 11 / 03 / 2016
Transaction ID : SA11A.469046
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

B. HAYES, ROBERT, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 358 ULTIMO AVENUE
 City LONG BEACH State CA Zip Code 90814-3210
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) WILLIS TOWERS WATSON Occupation (for Individual) INSURANCE EXECUTIVE
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 295.00

Date of Receipt 11 / 07 / 2016
Transaction ID : SA11A.475530
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

C. HAYES, ROBERT, T., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 252 SMYTHE DR
 City WILLIAMS BAY State WI Zip Code 53191-9506
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 350.00

Date of Receipt 11 / 04 / 2016
Transaction ID : SA11A.473101
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶ 100.00
TOTAL This Period (last page this line number only).....▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1538 OF 4311
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. HAYES, SHAWN, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 137N MARTIN AVE

City WAUKEGAN	State IL	Zip Code 60085-4656
------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) UNITED STATES NAVY	Occupation (for Individual) HOSPITAL CORPSMAN
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
300.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	27	/	2016

Transaction ID : SA11A.453898

Amount of Each Receipt this Period
25.00

Memo Item CONTRIBUTION

B. HAYNES, BARBARA, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 125 COMMODORE DUPONT STREET

City BLUFFTON	State SC	Zip Code 29909-4427
------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
275.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	25	/	2016

Transaction ID : SA11A.448471

Amount of Each Receipt this Period
25.00

Memo Item CONTRIBUTION

C. HAYNES, BARBARA, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 125 COMMODORE DUPONT STREET

City BLUFFTON	State SC	Zip Code 29909-4427
------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
275.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	05	/	2016

Transaction ID : SA11A.478495

Amount of Each Receipt this Period
25.00

Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	75.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1539 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. HAYNES, BARBARA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 125 COMMODORE DUPONT STREET
 City BLUFFTON State SC Zip Code 29909-4427
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 275.00

Date of Receipt **11 / 07 / 2016**
Transaction ID : SA11A.480704
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

B. HAYNES, DANNY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 11015 MAIN ST
 City ROSCOE State IL Zip Code 61073-8857
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) REAL ESTATE
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 600.00

Date of Receipt **10 / 26 / 2016**
Transaction ID : SA11A.451166
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

C. HAYNES, GERARD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO BOX 40336
 City HOUSTON State TX Zip Code 77240-0336
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt **10 / 25 / 2016**
Transaction ID : SA11A.448923
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	225.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1540 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. HAYNES, GERARD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO BOX 40336
 City HOUSTON State TX Zip Code 77240-0336
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt 11 / 04 / 2016
Transaction ID : SA11A.473019
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

B. HAYWARD, THOMAS, B., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 900 UNIVERSITY STREET 4E
 City SEATTLE State WA Zip Code 98101-2797
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 750.00

Date of Receipt 10 / 31 / 2016
Transaction ID : SA11A.464052
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

C. HAYWARD, THOMAS, Z., , JR
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1285 GULF SHORE BOULEVARD N #6C
 City NAPLES State FL Zip Code 34102-4963
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) TC INDUSTRIES, INC Occupation (for Individual) EXECUTIVE
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 10 / 31 / 2016
Transaction ID : SA11A.457238
 Amount of Each Receipt this Period 500.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	850.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1541 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. HAZELL, CURTIS, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 548 N MISSION DRIVE
 City SAN GABRIEL State CA Zip Code 91775-2147
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 750.00

Date of Receipt 10 / 27 / 2016
Transaction ID : SA11A.452288
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

B. HAZZARD, MICHAEL, D., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 717 ADAMS ST
 City RAPID CITY State SD Zip Code 57701-1105
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 10 / 25 / 2016
Transaction ID : SA11A.451702
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

C. HAZZARD, MICHAEL, D., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 717 ADAMS ST
 City RAPID CITY State SD Zip Code 57701-1105
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 10 / 25 / 2016
Transaction ID : SA11A.451713
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	450.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1542 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. HEAD, THOMAS, A., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1280 THATCH PALM DR
 City BOCA RATON State FL Zip Code 33432-7529
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 25 / 2016
Transaction ID : SA11A.448692
 Amount of Each Receipt this Period
 250.00
 Memo Item
 CONTRIBUTION

B. HEADRICK, ROGER, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 585 LOCUST HILLS DRIVE
 City WAYZATA State MN Zip Code 55391-1966
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 3000.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 28 / 2016
Transaction ID : SA11A.456055
 Amount of Each Receipt this Period
 1000.00
 Memo Item
 CONTRIBUTION

C. HEADRICK, ROGER, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 585 LOCUST HILLS DRIVE
 City WAYZATA State MN Zip Code 55391-1966
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 3000.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 04 / 2016
Transaction ID : SA11A.472969
 Amount of Each Receipt this Period
 1000.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	2250.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1543 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. HEAFNER, DAVID, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 24895 BAXTER RANCH RD
 City LAKE ELSINORE State CA Zip Code 92532-7314
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) RETIRED USMC & FARMER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1371.00

Date of Receipt 10 / 21 / 2016
Transaction ID : SA11A.444291
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

B. HEAFNER, DAVID, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 24895 BAXTER RANCH RD
 City LAKE ELSINORE State CA Zip Code 92532-7314
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) RETIRED USMC & FARMER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1371.00

Date of Receipt 10 / 21 / 2016
Transaction ID : SA11A.444303
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

C. HEAFNER, DAVID, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 24895 BAXTER RANCH RD
 City LAKE ELSINORE State CA Zip Code 92532-7314
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) RETIRED USMC & FARMER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1371.00

Date of Receipt 10 / 24 / 2016
Transaction ID : SA11A.445866
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	600.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1544 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. HEAFNER, DAVID, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 24895 BAXTER RANCH RD
 City LAKE ELSINORE State CA Zip Code 92532-7314
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) RETIRED USMC & FARMER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1371.00

Date of Receipt 11 / 06 / 2016
Transaction ID : SA11A.476812
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

B. HEAFNER, DAVID, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 24895 BAXTER RANCH RD
 City LAKE ELSINORE State CA Zip Code 92532-7314
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) RETIRED USMC & FARMER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1371.00

Date of Receipt 11 / 06 / 2016
Transaction ID : SA11A.476816
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

C. HEAFNER, MICHAEL, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 6009 S. REGAL LANE
 City CHARLOTTE State NC Zip Code 28210-3033
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 750.00

Date of Receipt 10 / 30 / 2016
Transaction ID : SA11A.459601
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	750.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1545 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
Team Ryan

A. HEARST, STEPHEN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address #5 THIRD ST.
 SUITE 200
 City SF State CA Zip Code 94103-3203
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) THE HEARST CORPORATION Occupation (for Individual) PROPERTY MANAGEMENT
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt 10 / 21 / 2016
Transaction ID : SA11A.444395
 Amount of Each Receipt this Period 1000.00
 Memo Item CONTRIBUTION

B. HEARTH, SCOTT, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 8932 VISAGE CIRCLE
 City FAIR OAKS State CA Zip Code 95628-4190
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) PHYSICIAN
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 275.00

Date of Receipt 10 / 28 / 2016
Transaction ID : SA11A.456393
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

C. HEASLEY, TIM, J., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 18 SANDPIPER CT
 City ORCHARD PARK State NY Zip Code 14127-3076
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 425.00

Date of Receipt 10 / 25 / 2016
Transaction ID : SA11A.448311
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	1350.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1546 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. HEASLEY, TIM, J., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 18 SANDPIPER CT
 City ORCHARD PARK State NY Zip Code 14127-3076
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 425.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 29 / 2016
Transaction ID : SA11A.460776
 Amount of Each Receipt this Period
 50.00
 Memo Item
 CONTRIBUTION

B. HEASLEY, TIM, J., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 18 SANDPIPER CT
 City ORCHARD PARK State NY Zip Code 14127-3076
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 425.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 02 / 2016
Transaction ID : SA11A.466358
 Amount of Each Receipt this Period
 50.00
 Memo Item
 CONTRIBUTION

C. HEASLEY, TIM, J., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 18 SANDPIPER CT
 City ORCHARD PARK State NY Zip Code 14127-3076
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 425.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 03 / 2016
Transaction ID : SA11A.474560
 Amount of Each Receipt this Period
 50.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	150.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1547 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
Team Ryan

A. HEATH, MARGARET, , MS.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5015 GREYHAWK PLACE
 City APEX State NC Zip Code 27539-9323
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) PROPERTY MANAGEMENT
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt 11 / 21 / 2016
Transaction ID : SA11A.481006
 Amount of Each Receipt this Period 200.00
 Memo Item CONTRIBUTION

B. HEATON, RONALD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 920 W 600 SO
 City CEDAR CITY State UT Zip Code 84720-2964
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 11 / 05 / 2016
Transaction ID : SA11A.479175
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

C. HEATON, RONALD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 920 W 600 SO
 City CEDAR CITY State UT Zip Code 84720-2964
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 11 / 05 / 2016
Transaction ID : SA11A.479181
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	300.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1548 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. HEATON, RONALD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 920 W 600 SO
 City CEDAR CITY State UT Zip Code 84720-2964
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 11 / 05 / 2016
Transaction ID : SA11A.479185
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

B. HECK, MARYANNE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1514 MT ROYAL BLVD
 City GLENSHAW State PA Zip Code 15116-2246
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) THREE RIVERS ORTHOPEICS UPMC Occupation (for Individual) RN
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 231.00

Date of Receipt 10 / 22 / 2016
Transaction ID : SA11A.446707
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

C. HECKERT, JAKOB, K., DR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 419 PINE BRAE DR.
 City ANN ARBOR State MI Zip Code 48105-2743
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 445.00

Date of Receipt 10 / 24 / 2016
Transaction ID : SA11A.446024
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	100.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1549 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. HECKERT, JAKOB, K., DR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 419 PINE BRAE DR.
 City ANN ARBOR State MI Zip Code 48105-2743
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 445.00

Date of Receipt 10 / 28 / 2016
Transaction ID : SA11A.456026
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

B. HECKERT, JAKOB, K., DR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 419 PINE BRAE DR.
 City ANN ARBOR State MI Zip Code 48105-2743
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 445.00

Date of Receipt 10 / 29 / 2016
Transaction ID : SA11A.460903
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

C. HECKERT, JAKOB, K., DR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 419 PINE BRAE DR.
 City ANN ARBOR State MI Zip Code 48105-2743
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 445.00

Date of Receipt 11 / 02 / 2016
Transaction ID : SA11A.466371
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	75.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1550 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. HECKERT, JAKOB, K., DR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 419 PINE BRAE DR.
 City ANN ARBOR State MI Zip Code 48105-2743
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 445.00

Date of Receipt 11 / 04 / 2016
Transaction ID : SA11A.473275
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

B. HECKMAN, KARL, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 975 CHICAGO AVE.
 City NEW BRAUNFELS State TX Zip Code 78130-4915
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1700.00

Date of Receipt 10 / 24 / 2016
Transaction ID : SA11A.445850
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

C. HECKMAN, KARL, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 975 CHICAGO AVE.
 City NEW BRAUNFELS State TX Zip Code 78130-4915
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1700.00

Date of Receipt 10 / 24 / 2016
Transaction ID : SA11A.445869
 Amount of Each Receipt this Period 1000.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶ 1275.00
TOTAL This Period (last page this line number only).....▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1551 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. HEFLICH, HERB, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5 VAN PELT COURT
 City MARTINSVILLE State NJ Zip Code 08836-2360
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) HEFLICH HERB Occupation (for Individual) CHAIRMAN
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 750.00

Date of Receipt 10 / 25 / 2016
Transaction ID : SA11A.448770
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

B. HEFTON, R, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 6608 NO WESTERN VE 402
 City OKLAHOMA CITY State OK Zip Code 73116-
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 10 / 20 / 2016
Transaction ID : SA11A.442469
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

C. HEFTON, R, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 6608 NO WESTERN VE 402
 City OKLAHOMA CITY State OK Zip Code 73116-
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 11 / 04 / 2016
Transaction ID : SA11A.473398
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	350.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1552 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
Team Ryan

A. HEGARTY, DAVID, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 40 WEDGEMERE AVE
 City WINCHESTER State MA Zip Code 01890-2441
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) THE RMR GROUP Occupation (for Individual) EXECUTIVE
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 10 / 21 / 2016
Transaction ID : SA11A.444451
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

B. HEGGE, VIRGINIA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 22720 CAVALIER STREET
 City WOODLAND HILLS State CA Zip Code 91364-3909
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 700.00

Date of Receipt 10 / 26 / 2016
Transaction ID : SA11A.451092
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

C. HEGGE, VIRGINIA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 22720 CAVALIER STREET
 City WOODLAND HILLS State CA Zip Code 91364-3909
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 700.00

Date of Receipt 11 / 04 / 2016
Transaction ID : SA11A.472617
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	450.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1553 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. HEIKES, GRAHAM, , MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1001 CRESCENT BLVD
 City GLEN ELLYN State IL Zip Code 60137-4206
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 610.00

Date of Receipt 11 / 03 / 2016
Transaction ID : SA11A.468844
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

B. HEIKES, GRAHAM, , MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1001 CRESCENT BLVD
 City GLEN ELLYN State IL Zip Code 60137-4206
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 610.00

Date of Receipt 11 / 03 / 2016
Transaction ID : SA11A.468853
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

C. HEIMAN, PETER, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4465 DOUGLAS AVE. 1K
 City BRONX State NY Zip Code 10471-3519
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) PSYCHIATRIST
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 220.00

Date of Receipt 10 / 30 / 2016
Transaction ID : SA11A.464910
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 600.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1554 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
Team Ryan

A. HEIN, HAROLD, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 7087 PARFET STREET

City ARVADA	State CO	Zip Code 80004-1347
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
359.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		21		2016

Transaction ID : SA11A.444245

Amount of Each Receipt this Period
50.00

Memo Item CONTRIBUTION

B. HEIN, HAROLD, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 7087 PARFET STREET

City ARVADA	State CO	Zip Code 80004-1347
----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
359.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		21		2016

Transaction ID : SA11A.444259

Amount of Each Receipt this Period
50.00

Memo Item CONTRIBUTION

C. HEINZ, JAMES, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 12327 COURTYARD LAKE DR

City ST LOUIS	State MO	Zip Code 63127-1456
------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
400.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11		04		2016

Transaction ID : SA11A.471835

Amount of Each Receipt this Period
100.00

Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	200.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1555 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
Team Ryan

A. HEIST, SUSAN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1910 WELSH VALLEY ROAD
 City MALVERN State PA Zip Code 19355-9759
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 31 / 2016
Transaction ID : SA11A.463278
 Amount of Each Receipt this Period
 25.00
 Memo Item
 CONTRIBUTION

B. HEITKOETTER, DONNA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 433 HILLCREST DR. NONE
 City UNION State MO Zip Code 63084-2855
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 28 / 2016
Transaction ID : SA11A.456089
 Amount of Each Receipt this Period
 25.00
 Memo Item
 CONTRIBUTION

C. HELBING, SCOTT, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 6237 PEMBERTON DRIVE
 City DALLAS State TX Zip Code 75230-4035
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 06 / 2016
Transaction ID : SA11A.477397
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	150.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1556 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. HELBOCK, HAROLD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3588 SUNNY HILLS L.
 City VACAVILLE State CA Zip Code 95688-9740
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) PHYSICIAN
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 10 / 21 / 2016
Transaction ID : SA11A.447133
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

B. HELDER, THEODORE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 8-39 CEDAR STREET
 City FAIR LAWN State NJ Zip Code 07410-1503
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 10 / 31 / 2016
Transaction ID : SA11A.459122
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

C. HELDER, THEODORE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 8-39 CEDAR STREET
 City FAIR LAWN State NJ Zip Code 07410-1503
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 11 / 04 / 2016
Transaction ID : SA11A.473685
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	300.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1557 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
Team Ryan

A. HELFEN, WILLIAM, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5437 HARGROVE BLVD
 City VIRGINIA BEACH State VA Zip Code 23464-2333
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 355.00

Date of Receipt 10 / 21 / 2016
Transaction ID : SA11A.444326
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

B. HELFEN, WILLIAM, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5437 HARGROVE BLVD
 City VIRGINIA BEACH State VA Zip Code 23464-2333
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 355.00

Date of Receipt 10 / 28 / 2016
Transaction ID : SA11A.455446
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

C. HELGESON, PAT, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3 RESTON WAY
 City LADERA RANCH State CA Zip Code 92694-0504
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NEWPORT EQUITIES LLC Occupation (for Individual) RE DEVELOPER
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 245.00

Date of Receipt 11 / 07 / 2016
Transaction ID : SA11A.474838
 Amount of Each Receipt this Period 150.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 250.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1558 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. HELLAND, HANS, R., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address P.O. BOX 6949

City SAN ANTONIO	State TX	Zip Code 78209-0949
---------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) SELF EMPLOYED	Occupation (for Individual) OIL & GAS
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
485.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 20 / 2016
Transaction ID : SA11A.444874

Amount of Each Receipt this Period
100.00

Memo Item
CONTRIBUTION

B. HELLAND, HANS, R., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address P.O. BOX 6949

City SAN ANTONIO	State TX	Zip Code 78209-0949
---------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) SELF EMPLOYED	Occupation (for Individual) OIL & GAS
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
485.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 30 / 2016
Transaction ID : SA11A.460222

Amount of Each Receipt this Period
50.00

Memo Item
CONTRIBUTION

C. HELLAND, HANS, R., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address P.O. BOX 6949

City SAN ANTONIO	State TX	Zip Code 78209-0949
---------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) SELF EMPLOYED	Occupation (for Individual) OIL & GAS
--	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
485.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 04 / 2016
Transaction ID : SA11A.470696

Amount of Each Receipt this Period
50.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	200.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1559 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
Team Ryan

A. HELLAND, HANS, R., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address P.O. BOX 6949
 City SAN ANTONIO State TX Zip Code 78209-0949
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) OIL & GAS
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date **485.00**

Date of Receipt **11 / 04 / 2016**
Transaction ID : SA11A.472639
 Amount of Each Receipt this Period **100.00**
 Memo Item CONTRIBUTION

B. HELMAN, WILLIAM, W., , III
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3366 MEADOW RIDGE
 City REDDING State CT Zip Code 06896-3229
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date **750.00**

Date of Receipt **10 / 25 / 2016**
Transaction ID : SA11A.447322
 Amount of Each Receipt this Period **250.00**
 Memo Item CONTRIBUTION

C. HELSETH, BETTY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4825 Highbury Lane
 City MINNETONKA State MN Zip Code 55345-3927
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date **305.00**

Date of Receipt **10 / 26 / 2016**
Transaction ID : SA11A.451241
 Amount of Each Receipt this Period **30.00**
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... **380.00**
TOTAL This Period (last page this line number only).....

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1560 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. HELSETH, BETTY, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 4825 Highbury Lane

City MINNETONKA	State MN	Zip Code 55345-3927
--------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
305.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	02	/	2016

Transaction ID : SA11A.467154

Amount of Each Receipt this Period
25.00

Memo Item CONTRIBUTION

B. HELSETH, BETTY, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 4825 Highbury Lane

City MINNETONKA	State MN	Zip Code 55345-3927
--------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
305.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	04	/	2016

Transaction ID : SA11A.471730

Amount of Each Receipt this Period
100.00

Memo Item CONTRIBUTION

C. HELTON, MICHAEL, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 651 Old Pleasant Hill Ed.

City WACO	State GA	Zip Code 30182-2326
--------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) INTERIOR CONTRACTORS OF GA. INC	Occupation (for Individual) CARPENTER
--	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
300.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	25	/	2016

Transaction ID : SA11A.448888

Amount of Each Receipt this Period
100.00

Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	225.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1561 OF 4311
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. HELTON, MICHAEL, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 651 OLD PLEASANT HILL ED.

City WACO	State GA	Zip Code 30182-2326
--------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) INTERIOR CONTRACTORS OF GA. INC	Occupation (for Individual) CARPENTER
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
300.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	04	/	2016

Transaction ID : SA11A.471447

Amount of Each Receipt this Period
100.00

Memo Item CONTRIBUTION

B. HENDERSON, COLIN, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 9405 MERCER DRIVE

City DALLAS	State TX	Zip Code 75228-4143
----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) STRATEGIC INVESTMENT COUNSEL CORP	Occupation (for Individual) OWNER
--	--------------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	03	/	2016

Transaction ID : SA11A.469032

Amount of Each Receipt this Period
250.00

Memo Item CONTRIBUTION

C. HENDERSON, GARY, V., ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 3742 BACCURATE WAY

City MARIETTA	State GA	Zip Code 30062-8706
------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
270.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	26	/	2016

Transaction ID : SA11A.450582

Amount of Each Receipt this Period
25.00

Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	375.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1562 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. HENDERSON, GARY, V., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3742 BACCURATE WAY
 City MARIETTA State GA Zip Code 30062-8706
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 270.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 05 / 2016
Transaction ID : SA11A.478610
 Amount of Each Receipt this Period
 25.00
 Memo Item CONTRIBUTION

B. HENDERSON, JAMES, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 560 BAYBERRY LAKES BLVD.
 City DAYTONA BEACH State FL Zip Code 32124-3687
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 25 / 2016
Transaction ID : SA11A.448350
 Amount of Each Receipt this Period
 100.00
 Memo Item CONTRIBUTION

C. HENDERSON, JAMES, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 560 BAYBERRY LAKES BLVD.
 City DAYTONA BEACH State FL Zip Code 32124-3687
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 25 / 2016
Transaction ID : SA11A.448360
 Amount of Each Receipt this Period
 100.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	225.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1563 OF 4311
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. HENDERSON, PHILLIP, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 10899 OLDE WOODS WAY

City COLUMBIA	State MD	Zip Code 21044-1022
------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) CATHOLIC UNIVERSITY OF AMERICA	Occupation (for Individual) PROFESSOR OF POLITICS
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
375.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		31		2016

Transaction ID : SA11A.464355

Amount of Each Receipt this Period
50.00

Memo Item
CONTRIBUTION

B. HENDERSON, PHILLIP, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 10899 OLDE WOODS WAY

City COLUMBIA	State MD	Zip Code 21044-1022
------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) CATHOLIC UNIVERSITY OF AMERICA	Occupation (for Individual) PROFESSOR OF POLITICS
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
375.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		31		2016

Transaction ID : SA11A.464357

Amount of Each Receipt this Period
50.00

Memo Item
CONTRIBUTION

C. HENDRICKS, DAVID, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 7557 RAMBLER ROAD
820

City DALLAS	State TX	Zip Code 75231-4142
----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) SELF EMPLOYED	Occupation (for Individual) ATTORNEY
--	---

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
650.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		27		2016

Transaction ID : SA11A.453868

Amount of Each Receipt this Period
75.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	175.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1564 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. HENDRICKS, DAVID, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 7557 RAMBLER ROAD
820

City DALLAS State TX Zip Code 75231-4142

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) ATTORNEY

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
650.00

Date of Receipt
11 / 04 / 2016
Transaction ID : SA11A.470937

Amount of Each Receipt this Period
75.00

Memo Item CONTRIBUTION

B. HENDRICKS, DAVID, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 7557 RAMBLER ROAD
820

City DALLAS State TX Zip Code 75231-4142

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) ATTORNEY

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
650.00

Date of Receipt
11 / 04 / 2016
Transaction ID : SA11A.474211

Amount of Each Receipt this Period
100.00

Memo Item CONTRIBUTION

C. HENDRICKSON, JAMES, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address PO BOX 5207

City INCLINE VILLAGE State NV Zip Code 89450-5207

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
750.00

Date of Receipt
10 / 27 / 2016
Transaction ID : SA11A.452974

Amount of Each Receipt this Period
250.00

Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 425.00

TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1565 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
Team Ryan

A. HENDRICKS, JIM, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address P. O. BOX 30
 City ETNA State CA Zip Code 96027-0030
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 832.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 22 / 2016
Transaction ID : SA11A.446643
 Amount of Each Receipt this Period
 50.00
 Memo Item
 CONTRIBUTION

B. HENDRICKS, JIM, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address P. O. BOX 30
 City ETNA State CA Zip Code 96027-0030
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 832.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 28 / 2016
Transaction ID : SA11A.455075
 Amount of Each Receipt this Period
 25.00
 Memo Item
 CONTRIBUTION

C. HENDRICKS, JIM, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address P. O. BOX 30
 City ETNA State CA Zip Code 96027-0030
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 832.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 28 / 2016
Transaction ID : SA11A.455079
 Amount of Each Receipt this Period
 25.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	100.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1566 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. HENIGMAN, MARJAN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 50 DEHAN ST
 City SMITHTOWN State NY Zip Code 11787-1037
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 370.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 27 / 2016
Transaction ID : SA11A.453572
 Amount of Each Receipt this Period
 25.00
 Memo Item CONTRIBUTION

B. HENIGMAN, MARJAN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 50 DEHAN ST
 City SMITHTOWN State NY Zip Code 11787-1037
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 370.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 27 / 2016
Transaction ID : SA11A.453582
 Amount of Each Receipt this Period
 25.00
 Memo Item CONTRIBUTION

C. HENIGMAN, MARJAN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 50 DEHAN ST
 City SMITHTOWN State NY Zip Code 11787-1037
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 370.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 02 / 2016
Transaction ID : SA11A.466505
 Amount of Each Receipt this Period
 30.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶ 80.00
TOTAL This Period (last page this line number only).....▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1567 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. HENIGMAN, MARJAN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 50 DEHAN ST
 City SMITHTOWN State NY Zip Code 11787-1037
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 370.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 02 / 2016
Transaction ID : SA11A.466529
 Amount of Each Receipt this Period
 50.00
 Memo Item
 CONTRIBUTION

B. HENIGMAN, MARJAN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 50 DEHAN ST
 City SMITHTOWN State NY Zip Code 11787-1037
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 370.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 02 / 2016
Transaction ID : SA11A.466532
 Amount of Each Receipt this Period
 50.00
 Memo Item
 CONTRIBUTION

C. HENIGMAN, MARJAN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 50 DEHAN ST
 City SMITHTOWN State NY Zip Code 11787-1037
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 370.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 07 / 2016
Transaction ID : SA11A.474993
 Amount of Each Receipt this Period
 30.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	130.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1568 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. HENIGMAN, MARJAN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 50 DEHAN ST
 City SMITHTOWN State NY Zip Code 11787-1037
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 370.00

Date of Receipt
 11 / 07 / 2016
Transaction ID : SA11A.475233
 Amount of Each Receipt this Period 30.00
 Memo Item CONTRIBUTION

B. HENIGMAN, MARJAN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 50 DEHAN ST
 City SMITHTOWN State NY Zip Code 11787-1037
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 370.00

Date of Receipt
 11 / 08 / 2016
Transaction ID : SA11A.479709
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

C. HENIGMAN, MARJAN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 50 DEHAN ST
 City SMITHTOWN State NY Zip Code 11787-1037
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 370.00

Date of Receipt
 11 / 07 / 2016
Transaction ID : SA11A.480250
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶ 80.00
TOTAL This Period (last page this line number only).....▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1569 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. HENISEE, CHRISTINE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 131 CHESWOLD LANE
 City HAVERFORD State PA Zip Code 19041-1801
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 11 / 03 / 2016
Transaction ID : SA11A.465391
 Amount of Each Receipt this Period
 200.00
 Memo Item
 CONTRIBUTION

B. HENLEY, JEFFREY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1605 ALISA LANE
 City SANTA BARBARA State CA Zip Code 93110-2448
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) ORACLE Occupation (for Individual) VICE CHAIRMAN
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 25000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 10 / 28 / 2016
Transaction ID : SA11A.449691
 Amount of Each Receipt this Period
 25000.00
 Memo Item
 CONTRIBUTION

C. HENLEY, JUDY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1605 ALISA LANE
 City SANTA BARBARA State CA Zip Code 93110-2448
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 25000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 10 / 28 / 2016
Transaction ID : SA11A.449692
 Amount of Each Receipt this Period
 25000.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	50200.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1570 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. HENNESSEY, ALICE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 614 E HIGHLAND VIEW DRIVE
 City BOISE State ID Zip Code 83702-1917
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 11 / 21 / 2016
Transaction ID : SA11A.481020
 Amount of Each Receipt this Period 200.00
 Memo Item CONTRIBUTION

B. HENNINGER, AMBER, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1453 TIROL DRIVE
 City INCLINE VILLAGE State NV Zip Code 89451-7903
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 225.00

Date of Receipt 10 / 23 / 2016
Transaction ID : SA11A.446341
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

C. HENNINGER, AMBER, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1453 TIROL DRIVE
 City INCLINE VILLAGE State NV Zip Code 89451-7903
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 225.00

Date of Receipt 10 / 23 / 2016
Transaction ID : SA11A.446343
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	400.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1571 OF 4311
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. HENRY, COCO, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 25235 DENTON TRACE

City PORTER	State TX	Zip Code 77365-3278
----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
589.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	27	/	2016

Transaction ID : SA11A.452757

Amount of Each Receipt this Period
100.00

Memo Item CONTRIBUTION

B. HENRY, COCO, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 25235 DENTON TRACE

City PORTER	State TX	Zip Code 77365-3278
----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
589.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	04	/	2016

Transaction ID : SA11A.472400

Amount of Each Receipt this Period
50.00

Memo Item CONTRIBUTION

C. HENRY, COCO, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 25235 DENTON TRACE

City PORTER	State TX	Zip Code 77365-3278
----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
589.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	04	/	2016

Transaction ID : SA11A.473939

Amount of Each Receipt this Period
75.00

Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	225.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1572 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. HENRY, COCO, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 25235 DENTON TRACE
 City PORTER State TX Zip Code 77365-3278
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 589.00

Date of Receipt 11 / 04 / 2016
Transaction ID : SA11A.479383
 Amount of Each Receipt this Period 39.00
 Memo Item CONTRIBUTION

B. HENRY, GRACE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 6555 GREEN SPARROW LN
 City N. LAS VEGAS State NV Zip Code 89084-2235
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 575.00

Date of Receipt 10 / 20 / 2016
Transaction ID : SA11A.444774
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

C. HENRY, GRACE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 6555 GREEN SPARROW LN
 City N. LAS VEGAS State NV Zip Code 89084-2235
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 575.00

Date of Receipt 10 / 29 / 2016
Transaction ID : SA11A.460558
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶ 139.00
TOTAL This Period (last page this line number only).....▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1573 OF 4311
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. HENRY, JOHN, A., , III
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 750 N SAINT PAUL ST STE 900

City DALLAS	State TX	Zip Code 75201-3247
----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		24		2016

Transaction ID : SA11A.445697

Amount of Each Receipt this Period
250.00

Memo Item CONTRIBUTION

B. HENRY, LEON, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 168 BLACKBURN DR

City NOTTINGHAM	State PA	Zip Code 19362-9632
--------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
550.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		26		2016

Transaction ID : SA11A.450253

Amount of Each Receipt this Period
250.00

Memo Item CONTRIBUTION

C. HENRY, LEON, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 168 BLACKBURN DR

City NOTTINGHAM	State PA	Zip Code 19362-9632
--------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
550.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11		02		2016

Transaction ID : SA11A.466772

Amount of Each Receipt this Period
100.00

Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	600.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1574 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
Team Ryan

A. HENRY, LEON, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 168 BLACKBURN DR
 City NOTTINGHAM State PA Zip Code 19362-9632
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 550.00

Date of Receipt
 11 / 02 / 2016
Transaction ID : SA11A.466784
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION

B. HENRY, LEON, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 168 BLACKBURN DR
 City NOTTINGHAM State PA Zip Code 19362-9632
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 550.00

Date of Receipt
 11 / 07 / 2016
Transaction ID : SA11A.480589
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION

C. HENSCH, ANNA, B., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1009 PEERMAN PLACE
 City CORPUS CHRISTI State TX Zip Code 78411-2243
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 338.00

Date of Receipt
 10 / 24 / 2016
Transaction ID : SA11A.443754
 Amount of Each Receipt this Period
 53.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	253.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1575 OF 4311
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. HENSEN, RICHARD, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 148 W. MAIN ST

City CAMPBELLSPORT	State WI	Zip Code 53010-2704
-----------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
430.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	03	/	2016

Transaction ID : SA11A.469034

Amount of Each Receipt this Period
50.00

Memo Item CONTRIBUTION

B. HERBERT, MARK, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 801 EAGLE CREST CT

City RIVERSIDE	State CA	Zip Code 92506-7528
-------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) WEST COAST C&C MANAGEMENT	Occupation (for Individual) CEO
--	------------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
2000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	21	/	2016

Transaction ID : SA11A.444537

Amount of Each Receipt this Period
500.00

Memo Item CONTRIBUTION

C. HERETH, JACK, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 2269 E CHEROKEE DR

City WOODSTOCK	State GA	Zip Code 30188-1941
-------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) GIBSONBURG HEALTH	Occupation (for Individual) EXECUTIVE
--	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
750.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	26	/	2016

Transaction ID : SA11A.451067

Amount of Each Receipt this Period
250.00

Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	800.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1576 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. HERLIHY, JOSEPH, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5 GENEST LN
 PO BOX 381
 City SANFORD State ME Zip Code 04073-6200
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Occupation (for Individual)
 INFORMATION REQUESTED PER BEST EFFORTS INFORMATION REQUESTED PER BE
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 450.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 26 / 2016
Transaction ID : SA11A.451158
 Amount of Each Receipt this Period
 250.00
 Memo Item
 CONTRIBUTION

B. HERLIHY, JOSEPH, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5 GENEST LN
 PO BOX 381
 City SANFORD State ME Zip Code 04073-6200
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Occupation (for Individual)
 INFORMATION REQUESTED PER BEST EFFORTS INFORMATION REQUESTED PER BE
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 450.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 04 / 2016
Transaction ID : SA11A.479643
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION

C. HERLIHY, JOSEPH, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5 GENEST LN
 PO BOX 381
 City SANFORD State ME Zip Code 04073-6200
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Occupation (for Individual)
 INFORMATION REQUESTED PER BEST EFFORTS INFORMATION REQUESTED PER BE
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 450.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 04 / 2016
Transaction ID : SA11A.479644
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	450.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1577 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
Team Ryan

A. HERMANN, SIGWULF, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3000 W. HAYES ST.
 City SEATTLE State WA Zip Code 98199-4250
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 2386.00

Date of Receipt 10 / 24 / 2016
Transaction ID : SA11A.445974
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

B. HERMANN, SIGWULF, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3000 W. HAYES ST.
 City SEATTLE State WA Zip Code 98199-4250
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 2386.00

Date of Receipt 10 / 24 / 2016
Transaction ID : SA11A.445976
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

C. HERMANN, SIGWULF, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3000 W. HAYES ST.
 City SEATTLE State WA Zip Code 98199-4250
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 2386.00

Date of Receipt 10 / 23 / 2016
Transaction ID : SA11A.446411
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶ 150.00
TOTAL This Period (last page this line number only).....▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1578 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. HERMANN, SIGWULF, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3000 W. HAYES ST.
 City SEATTLE State WA Zip Code 98199-4250
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 2386.00

Date of Receipt 10 / 23 / 2016
Transaction ID : SA11A.446412
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

B. HERMANN, SIGWULF, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3000 W. HAYES ST.
 City SEATTLE State WA Zip Code 98199-4250
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 2386.00

Date of Receipt 10 / 26 / 2016
Transaction ID : SA11A.450010
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

C. HERMANN, SIGWULF, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3000 W. HAYES ST.
 City SEATTLE State WA Zip Code 98199-4250
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 2386.00

Date of Receipt 10 / 26 / 2016
Transaction ID : SA11A.450319
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	150.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1579 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. HERMANN, SIGWULF, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3000 W. HAYES ST.
 City SEATTLE State WA Zip Code 98199-4250
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 2386.00

Date of Receipt 10 / 27 / 2016
Transaction ID : SA11A.452280
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

B. HERMANN, SIGWULF, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3000 W. HAYES ST.
 City SEATTLE State WA Zip Code 98199-4250
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 2386.00

Date of Receipt 10 / 29 / 2016
Transaction ID : SA11A.460501
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

C. HERMANN, SIGWULF, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3000 W. HAYES ST.
 City SEATTLE State WA Zip Code 98199-4250
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 2386.00

Date of Receipt 11 / 02 / 2016
Transaction ID : SA11A.466100
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 150.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1580 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. HERMANN, SIGWULF, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3000 W. HAYES ST.
 City SEATTLE State WA Zip Code 98199-4250
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 2386.00

Date of Receipt
 11 / 03 / 2016
Transaction ID : SA11A.468610
 Amount of Each Receipt this Period
 50.00
 Memo Item CONTRIBUTION

B. HERMANN, SIGWULF, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3000 W. HAYES ST.
 City SEATTLE State WA Zip Code 98199-4250
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 2386.00

Date of Receipt
 11 / 04 / 2016
Transaction ID : SA11A.470295
 Amount of Each Receipt this Period
 50.00
 Memo Item CONTRIBUTION

C. HERMANN, SIGWULF, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3000 W. HAYES ST.
 City SEATTLE State WA Zip Code 98199-4250
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 2386.00

Date of Receipt
 11 / 04 / 2016
Transaction ID : SA11A.472790
 Amount of Each Receipt this Period
 50.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	150.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1581 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. HERMANN, SIGWULF, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3000 W. HAYES ST.
 City SEATTLE State WA Zip Code 98199-4250
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 2386.00

Date of Receipt
 11 / 04 / 2016
Transaction ID : SA11A.472941
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

B. HERMANN, SIGWULF, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3000 W. HAYES ST.
 City SEATTLE State WA Zip Code 98199-4250
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 2386.00

Date of Receipt
 11 / 04 / 2016
Transaction ID : SA11A.473473
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

C. HERMANN, SIGWULF, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3000 W. HAYES ST.
 City SEATTLE State WA Zip Code 98199-4250
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 2386.00

Date of Receipt
 11 / 07 / 2016
Transaction ID : SA11A.474740
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	150.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1582 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. HERMANN, SIGWULF, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3000 W. HAYES ST.
 City SEATTLE State WA Zip Code 98199-4250
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 2386.00

Date of Receipt 11 / 05 / 2016
Transaction ID : SA11A.478833
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

B. HERMIDA, CARLOS, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 6445 NW 113 COURT
 City DORAL State FL Zip Code 33178-3620
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) HERES INVETMENT, INC. Occupation (for Individual) ENGINEER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 295.00

Date of Receipt 10 / 27 / 2016
Transaction ID : SA11A.452803
 Amount of Each Receipt this Period 30.00
 Memo Item CONTRIBUTION

C. HERMIDA, CARLOS, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 6445 NW 113 COURT
 City DORAL State FL Zip Code 33178-3620
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) HERES INVETMENT, INC. Occupation (for Individual) ENGINEER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 295.00

Date of Receipt 10 / 27 / 2016
Transaction ID : SA11A.452805
 Amount of Each Receipt this Period 30.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶ 110.00
TOTAL This Period (last page this line number only).....▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1583 OF 4311
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. HERMIDA, CARLOS, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 6445 NW 113 COURT

City DORAL	State FL	Zip Code 33178-3620
---------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) HERES INVETMENT, INC.	Occupation (for Individual) ENGINEER
--	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
295.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		27		2016

Transaction ID : SA11A.452806

Amount of Each Receipt this Period
30.00

Memo Item CONTRIBUTION

B. HERMIDA, CARLOS, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 6445 NW 113 COURT

City DORAL	State FL	Zip Code 33178-3620
---------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) HERES INVETMENT, INC.	Occupation (for Individual) ENGINEER
--	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
295.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		28		2016

Transaction ID : SA11A.455763

Amount of Each Receipt this Period
50.00

Memo Item CONTRIBUTION

C. HERMIDA, CARLOS, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 6445 NW 113 COURT

City DORAL	State FL	Zip Code 33178-3620
---------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) HERES INVETMENT, INC.	Occupation (for Individual) ENGINEER
--	---

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
295.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11		04		2016

Transaction ID : SA11A.470838

Amount of Each Receipt this Period
30.00

Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	110.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1584 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. HERMONE, LARRY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3291 TEXAS HILL RD
 City PLACERVILLE State CA Zip Code 95667-8473
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt **10 / 20 / 2016**
Transaction ID : SA11A.442030
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

B. HERMONE, LARRY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3291 TEXAS HILL RD
 City PLACERVILLE State CA Zip Code 95667-8473
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt **11 / 04 / 2016**
Transaction ID : SA11A.472750
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

C. HERMSMEYER, KENT, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2420 NE 61ST AVE
 City PORTLAND State OR Zip Code 97213-4026
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RK HERMSMEYER Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt **11 / 02 / 2016**
Transaction ID : SA11A.466280
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	75.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1585 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
Team Ryan

A. HERNDON, DEALEY, D., MRS.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2903 TARRY TRAIL
 City AUSTIN State TX Zip Code 78703-1106
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 700.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 28 / 2016
Transaction ID : SA11A.454716
 Amount of Each Receipt this Period
 200.00
 Memo Item CONTRIBUTION

B. HERR, PAUL, N., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 48 ROBIN ROAD
 City HERSHEY State PA Zip Code 17033-1849
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 03 / 2016
Transaction ID : SA11A.465315
 Amount of Each Receipt this Period
 100.00
 Memo Item CONTRIBUTION

C. HERRAIZ, DOMINGO, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 112 S . HIGHLAND STREET
 City ARLINGTON State VA Zip Code 22204-1846
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) IACP Occupation (for Individual) DIRECTOR
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 600.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 31 / 2016
Transaction ID : SA11A.463303
 Amount of Each Receipt this Period
 250.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	550.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1586 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
Team Ryan

A. HERRAIZ, DOMINGO, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 112 S . HIGHLAND STREET
 City ARLINGTON State VA Zip Code 22204-1846
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) IACP Occupation (for Individual) DIRECTOR
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 600.00

Date of Receipt **10 / 31 / 2016**
Transaction ID : SA11A.463342
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

B. HERRAIZ, DOMINGO, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 112 S . HIGHLAND STREET
 City ARLINGTON State VA Zip Code 22204-1846
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) IACP Occupation (for Individual) DIRECTOR
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 600.00

Date of Receipt **11 / 07 / 2016**
Transaction ID : SA11A.480185
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

C. HERRERA, VAL, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 201 OAKVIEW DR
 City DOUBLE OAK State TX Zip Code 75077-8418
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 434.00

Date of Receipt **10 / 26 / 2016**
Transaction ID : SA11A.454524
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	400.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1587 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
Team Ryan

A. HERRERA, VAL, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 201 OAKVIEW DR
 City DOUBLE OAK State TX Zip Code 75077-8418
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 434.00

Date of Receipt
 11 / 03 / 2016
Transaction ID : SA11A.468547
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

B. HERRERA, VAL, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 201 OAKVIEW DR
 City DOUBLE OAK State TX Zip Code 75077-8418
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 434.00

Date of Receipt
 11 / 06 / 2016
Transaction ID : SA11A.477540
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

C. HERRERA, VAL, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 201 OAKVIEW DR
 City DOUBLE OAK State TX Zip Code 75077-8418
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 434.00

Date of Receipt
 11 / 06 / 2016
Transaction ID : SA11A.477542
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	75.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1588 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. HERRIOTT, MARK, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 13912 GOODMAN STREET

City OVERLAND PARK	State KS	Zip Code 66223-1352
-----------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) SELF EMPLOYED	Occupation (for Individual) CONSULTANT
--	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	06	/	2016

Transaction ID : SA11A.477304

Amount of Each Receipt this Period
250.00

Memo Item
CONTRIBUTION

B. HERRIOTT, SUSAN, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 3719 MERCEDES PLACE
601

City CANFIELD	State OH	Zip Code 44406-8125
------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
300.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	21	/	2016

Transaction ID : SA11A.447246

Amount of Each Receipt this Period
50.00

Memo Item
CONTRIBUTION

C. HERRIOTT, SUSAN, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 3719 MERCEDES PLACE
601

City CANFIELD	State OH	Zip Code 44406-8125
------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
300.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	21	/	2016

Transaction ID : SA11A.447247

Amount of Each Receipt this Period
50.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	350.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1589 OF 4311
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. HERRING, THOMAS, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address **PO BOX 1180**
City **HIGHLANDS** State **NC** Zip Code **28741-1180**
FEC ID number of contributing federal political committee. **C**
Name of Employer (for Individual) **NONE** Occupation (for Individual) **RETIRED**
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ **368.00**

Date of Receipt **10 / 24 / 2016**
Transaction ID : SA11A.445578
Amount of Each Receipt this Period **100.00**
 Memo Item CONTRIBUTION

B. HERRMANN, ALLAN, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address **700 PRINCEVILLE AVE**
City **PRINCEVILLE** State **IL** Zip Code **61559-9754**
FEC ID number of contributing federal political committee. **C**
Name of Employer (for Individual) **NONE** Occupation (for Individual) **RETIRED**
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ **425.00**

Date of Receipt **11 / 07 / 2016**
Transaction ID : SA11A.475186
Amount of Each Receipt this Period **75.00**
 Memo Item CONTRIBUTION

C. HERSCEND, PETER, F., ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address **538 OAK BLUFF RD**
City **BRANSON** State **MO** Zip Code **65616-9110**
FEC ID number of contributing federal political committee. **C**
Name of Employer (for Individual) **HFE INC** Occupation (for Individual) **EXECUTIVE**
Receipt For: Primary General Other (specify)
Aggregate Year-to-Date ▼ **10000.00**

Date of Receipt **11 / 01 / 2016**
Transaction ID : SA11A.461917
Amount of Each Receipt this Period **10000.00**
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... **10175.00**
TOTAL This Period (last page this line number only).....

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1590 OF 4311
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. HERSCHBACH, ROBERT, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 325 SYLVAN CIRCLE

City VERDI State NV Zip Code 89439-

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt 10 / 26 / 2016
Transaction ID : SA11A.450280

Amount of Each Receipt this Period 100.00

Memo Item CONTRIBUTION

B. HERSHBERGER, JAMES, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 600 NO. MARIENFELD ST. 850

City MIDLAND State TX Zip Code 79701-4395

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) ATTORNEY/FOOTBALL REFEREE

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 475.00

Date of Receipt 10 / 23 / 2016
Transaction ID : SA11A.446273

Amount of Each Receipt this Period 25.00

Memo Item CONTRIBUTION

C. HERSHBERGER, JAMES, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 600 NO. MARIENFELD ST. 850

City MIDLAND State TX Zip Code 79701-4395

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) ATTORNEY/FOOTBALL REFEREE

Receipt For: Primary General Other (specify)

Aggregate Year-to-Date ▼ 475.00

Date of Receipt 10 / 23 / 2016
Transaction ID : SA11A.446275

Amount of Each Receipt this Period 25.00

Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶ 150.00

TOTAL This Period (last page this line number only).....▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1591 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. HERSHBERGER, JAMES, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 600 NO. MARIENFELD ST.
 850
 City MIDLAND State TX Zip Code 79701-4395
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) ATTORNEY/FOOTBALL REFEREE
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 475.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 27 / 2016
Transaction ID : SA11A.453937
 Amount of Each Receipt this Period
 25.00
 Memo Item CONTRIBUTION

B. HERSHBERGER, JAMES, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 600 NO. MARIENFELD ST.
 850
 City MIDLAND State TX Zip Code 79701-4395
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) ATTORNEY/FOOTBALL REFEREE
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 475.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 04 / 2016
Transaction ID : SA11A.471391
 Amount of Each Receipt this Period
 25.00
 Memo Item CONTRIBUTION

C. HERTZ, STEVEN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address P.O.B.563
 City SOYTH ORLEANS State MA Zip Code 02662-0563
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 220.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 20 / 2016
Transaction ID : SA11A.442419
 Amount of Each Receipt this Period
 25.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	75.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1592 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. HERTZ, STEVEN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address P.O.B.563
 City SOYTH ORLEANS State MA Zip Code 02662-0563
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 220.00

Date of Receipt 10 / 30 / 2016
Transaction ID : SA11A.459835
 Amount of Each Receipt this Period 30.00
 Memo Item CONTRIBUTION

B. HERTZ, STEVEN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address P.O.B.563
 City SOYTH ORLEANS State MA Zip Code 02662-0563
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 220.00

Date of Receipt 11 / 04 / 2016
Transaction ID : SA11A.473533
 Amount of Each Receipt this Period 30.00
 Memo Item CONTRIBUTION

C. HERTZ, STEVEN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address P.O.B.563
 City SOYTH ORLEANS State MA Zip Code 02662-0563
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 220.00

Date of Receipt 11 / 04 / 2016
Transaction ID : SA11A.473628
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 85.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1593 OF 4311
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. HERTZ, STEVEN, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address P.O.B.563

City SOYTH ORLEANS	State MA	Zip Code 02662-0563
-----------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
220.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	04	/	2016

Transaction ID : SA11A.474083

Amount of Each Receipt this Period
30.00

Memo Item CONTRIBUTION

B. HERZINGER, LARRY, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 4514 WINDSWEPT DR

City MILFORD	State MI	Zip Code 48380-2776
-----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
600.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	21	/	2016

Transaction ID : SA11A.444557

Amount of Each Receipt this Period
100.00

Memo Item CONTRIBUTION

C. HESLING, MONICA, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 38 NEW ORLEANS RD SUITE

City HILTON HEAD ISLAND	State SC	Zip Code 29928-4765
----------------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) MONICA BAUER HESLING	Occupation (for Individual) AMERICAN TELESIS
---	---

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	24	/	2016

Transaction ID : SA11A.446149

Amount of Each Receipt this Period
250.00

Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	380.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1594 OF 4311
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. HESS, CHARLES, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 14130 N CROOKED CREEK DRIVE

City MARANA	State AZ	Zip Code 85658-4962
----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	01	/	2016

Transaction ID : SA11A.461653

Amount of Each Receipt this Period
500.00

Memo Item
CONTRIBUTION

B. HESS, K. WILLIAM, , MR.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 4844 MARATHON WAY

City OCEANSIDE	State CA	Zip Code 92056-7407
-------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	04	/	2016

Transaction ID : SA11A.467529

Amount of Each Receipt this Period
1000.00

Memo Item
CONTRIBUTION

C. HETMAN, STEVE, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 15628 GALE AVE
B37

City HACIENDA HEIGHTS	State CA	Zip Code 91745-1516
--------------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
351.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	30	/	2016

Transaction ID : SA11A.460221

Amount of Each Receipt this Period
32.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	1532.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1595 OF 4311
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. HETMAN, STEVE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 15628 GALE AVE
 B37
 City HACIENDA HEIGHTS State CA Zip Code 91745-1516
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 351.00

Date of Receipt 11 / 04 / 2016
Transaction ID : SA11A.470989
 Amount of Each Receipt this Period 32.00
 Memo Item CONTRIBUTION

B. HETMAN, STEVE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 15628 GALE AVE
 B37
 City HACIENDA HEIGHTS State CA Zip Code 91745-1516
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 351.00

Date of Receipt 11 / 04 / 2016
Transaction ID : SA11A.473782
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

C. HEVEY, JEFFREY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1147 RENNIE DRIVE
 City KATY State TX Zip Code 77450-3029
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) HARRIS COUNTY ESD 48 Occupation (for Individual) FIRE CHIEF
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 10 / 29 / 2016
Transaction ID : SA11A.461079
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶ 107.00
TOTAL This Period (last page this line number only).....▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1596 OF 4311
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. HEWETT, JOHN, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 132 JORDAN'S JOURNEY

City WILLIAMSBURG	State VA	Zip Code 23185-1430
----------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
750.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	25	/	2016

Transaction ID : SA11A.448838

Amount of Each Receipt this Period
250.00

Memo Item CONTRIBUTION

B. HEWETT, JOHN, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 132 JORDAN'S JOURNEY

City WILLIAMSBURG	State VA	Zip Code 23185-1430
----------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
750.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	04	/	2016

Transaction ID : SA11A.472018

Amount of Each Receipt this Period
250.00

Memo Item CONTRIBUTION

C. HEWITT, PAUL, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 7608 WHEATCROFT COURT

City BETHESDA	State MD	Zip Code 20817-5640
------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) AKIN GUMP STRAUSS HAUER & FELD LLP	Occupation (for Individual) ATTORNEY
---	---

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	21	/	2016

Transaction ID : SA11A.447094

Amount of Each Receipt this Period
250.00

Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	750.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1597 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. HICKMON, ADRIAN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2933 HWY 157

City JUDSONIA	State AR	Zip Code 72081-9161
------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) SELF EMPLOYED	Occupation (for Individual) BUSINESS OWNER
--	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
225.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 28 / 2016
Transaction ID : SA11A.455546

Amount of Each Receipt this Period
50.00

Memo Item
CONTRIBUTION

B. HICKMON, ADRIAN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2933 HWY 157

City JUDSONIA	State AR	Zip Code 72081-9161
------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) SELF EMPLOYED	Occupation (for Individual) BUSINESS OWNER
--	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
225.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 31 / 2016
Transaction ID : SA11A.458700

Amount of Each Receipt this Period
25.00

Memo Item
CONTRIBUTION

C. HICKMON, ADRIAN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2933 HWY 157

City JUDSONIA	State AR	Zip Code 72081-9161
------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) SELF EMPLOYED	Occupation (for Individual) BUSINESS OWNER
--	---

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
225.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 03 / 2016
Transaction ID : SA11A.469003

Amount of Each Receipt this Period
25.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	100.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1598 OF 4311
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. HICKMON, ADRIAN, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 2933 HWY 157

City JUDSONIA	State AR	Zip Code 72081-9161
FEC ID number of contributing federal political committee. C		
Name of Employer (for Individual) SELF EMPLOYED		Occupation (for Individual) BUSINESS OWNER
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 225.00

Date of Receipt
11 / 07 / 2016
Transaction ID : **SA11A.480368**

Amount of Each Receipt this Period
25.00

Memo Item
CONTRIBUTION

B. HICKMAN, DIANA, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 6008 HERITAGE VIEW CR

City HILLIARD	State OH	Zip Code 43026-7614
FEC ID number of contributing federal political committee. C		
Name of Employer (for Individual) NONE		Occupation (for Individual) RETIRED
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 2700.00

Date of Receipt
10 / 25 / 2016
Transaction ID : **SA11A.448886**

Amount of Each Receipt this Period
250.00

Memo Item
CONTRIBUTION

C. HICKMAN, DIANA, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 6008 HERITAGE VIEW CR

City HILLIARD	State OH	Zip Code 43026-7614
FEC ID number of contributing federal political committee. C		
Name of Employer (for Individual) NONE		Occupation (for Individual) RETIRED
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		Aggregate Year-to-Date ▼ 2700.00

Date of Receipt
11 / 04 / 2016
Transaction ID : **SA11A.472733**

Amount of Each Receipt this Period
400.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	675.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1599 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. HICKMAN, DIANA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 6008 HERITAGE VIEW CR
 City HILLIARD State OH Zip Code 43026-7614
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 2700.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 04 / 2016
Transaction ID : SA11A.473733
 Amount of Each Receipt this Period
 250.00
 Memo Item
 CONTRIBUTION

B. HICKMAN, ROBERT, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 11 BUTLER DRIVE
 City LAFAYETTE State CA Zip Code 94549-3358
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1581.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 26 / 2016
Transaction ID : SA11A.449732
 Amount of Each Receipt this Period
 250.00
 Memo Item
 CONTRIBUTION

C. HICKOK, STEVE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 606 NORTHBAY DRIVE
 City MADISON State MS Zip Code 39110-8863
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 862.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 05 / 2016
Transaction ID : SA11A.478748
 Amount of Each Receipt this Period
 250.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	750.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1600 OF 4311
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. HICKS, CHARLES, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 8776 WILD DUNES DR

City SARASOTA	State FL	Zip Code 34241-9645
------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) TANKLESS INC	Occupation (for Individual) OWNER
---	--------------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		24		2016

Transaction ID : SA11A.446053

Amount of Each Receipt this Period
250.00

Memo Item
CONTRIBUTION

B. HICKS, CHARLES, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 8776 WILD DUNES DR

City SARASOTA	State FL	Zip Code 34241-9645
------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) TANKLESS INC	Occupation (for Individual) OWNER
---	--------------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		24		2016

Transaction ID : SA11A.446058

Amount of Each Receipt this Period
250.00

Memo Item
CONTRIBUTION

C. HICKS, CHARLES, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 8776 WILD DUNES DR

City SARASOTA	State FL	Zip Code 34241-9645
------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) TANKLESS INC	Occupation (for Individual) OWNER
---	--------------------------------------

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
1250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		28		2016

Transaction ID : SA11A.455894

Amount of Each Receipt this Period
250.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	750.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1601 OF 4311
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. HICKS, CHARLES, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 8776 WILD DUNES DR

City SARASOTA	State FL	Zip Code 34241-9645
------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) TANKLESS INC	Occupation (for Individual) OWNER
---	--------------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		28		2016

Transaction ID : SA11A.455896

Amount of Each Receipt this Period
250.00

Memo Item
CONTRIBUTION

B. HICKS, DEBORAH, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 116 MT. VISTA AVE.

City GREENVILLE	State SC	Zip Code 29605-1121
--------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
225.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		20		2016

Transaction ID : SA11A.442353

Amount of Each Receipt this Period
50.00

Memo Item
CONTRIBUTION

C. HICKS, DEBORAH, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 116 MT. VISTA AVE.

City GREENVILLE	State SC	Zip Code 29605-1121
--------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
225.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		20		2016

Transaction ID : SA11A.442354

Amount of Each Receipt this Period
50.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	350.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1602 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. HICKS, DEBORAH, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 116 MT. VISTA AVE.
 City GREENVILLE State SC Zip Code 29605-1121
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 225.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 30 / 2016
Transaction ID : SA11A.459334
 Amount of Each Receipt this Period
 50.00
 Memo Item
 CONTRIBUTION

B. HICKS, MARGARET, A., MRS.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 711 COPPERHEAD CIR
 City SAINT AUGUSTINE State FL Zip Code 32092-2751
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 530.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 06 / 2016
Transaction ID : SA11A.476750
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION

C. HICKS, PAUL, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2404 MARLANDWOOD RD.
 City TEMPLE State TX Zip Code 76502-2557
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) TAMU Occupation (for Individual) PHYSICIAN
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 27 / 2016
Transaction ID : SA11A.456790
 Amount of Each Receipt this Period
 50.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	200.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1603 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. HICKS, PAUL, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2404 MARLANDWOOD RD.
 City TEMPLE State TX Zip Code 76502-2557
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) TAMU Occupation (for Individual) PHYSICIAN
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt **10 / 31 / 2016**
Transaction ID : SA11A.458548
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

B. HICKS, PAUL, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2404 MARLANDWOOD RD.
 City TEMPLE State TX Zip Code 76502-2557
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) TAMU Occupation (for Individual) PHYSICIAN
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt **11 / 06 / 2016**
Transaction ID : SA11A.477106
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

C. HIGGINS, DENZLE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address P.O. BOX 72403
 City FAIRBANKS State AK Zip Code 99707-2403
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) BUSINESS OWNER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 900.00

Date of Receipt **10 / 23 / 2016**
Transaction ID : SA11A.449596
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	250.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1604 OF 4311
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. HIGGINS, JENNIFER, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 770 P ST NW APT 328
APT 328

City WASHINGTON State DC Zip Code 20001-3370

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) CHAMBER HILL STRATEGIES Occupation (for Individual) PARTNER

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 7500.00

Date of Receipt
10 / 26 / 2016
Transaction ID : SA11A.447733

Amount of Each Receipt this Period
5000.00

Memo Item CONTRIBUTION

B. HIGGINS, WILLIAM, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 2331 MERION DR.

City LEAGUE CITY State TX Zip Code 77573-4445

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 418.00

Date of Receipt
11 / 04 / 2016
Transaction ID : SA11A.474278

Amount of Each Receipt this Period
100.00

Memo Item CONTRIBUTION

C. HIGHFIELD, MARTHA, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 30600 MAINMAST DRIVE

City AGOURA HILLS State CA Zip Code 91301-1911

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) PROVIDENCE HOLY CROSS Occupation (for Individual) RN

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 255.00

Date of Receipt
10 / 22 / 2016
Transaction ID : SA11A.446939

Amount of Each Receipt this Period
30.00

Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 5130.00

TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1605 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. HIGHFIELD, MARTHA, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 30600 MAINMAST DRIVE

City AGOURA HILLS	State CA	Zip Code 91301-1911
----------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) PROVIDENCE HOLY CROSS	Occupation (for Individual) RN
--	-----------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
255.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	04	/	2016

Transaction ID : SA11A.471241

Amount of Each Receipt this Period
30.00

Memo Item
CONTRIBUTION

B. HIGHT, DEBORAH, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 4814 MIRROR LAKE DRIVE

City POWDER SPRINGS	State GA	Zip Code 30127-4910
------------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) R&DPRINTING,INC	Occupation (for Individual) SECRETARY-TREASURER
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1075.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	20	/	2016

Transaction ID : SA11A.442533

Amount of Each Receipt this Period
75.00

Memo Item
CONTRIBUTION

C. HIGHT, DEBORAH, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 4814 MIRROR LAKE DRIVE

City POWDER SPRINGS	State GA	Zip Code 30127-4910
------------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) R&DPRINTING,INC	Occupation (for Individual) SECRETARY-TREASURER
--	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
1075.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	31	/	2016

Transaction ID : SA11A.459286

Amount of Each Receipt this Period
100.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	205.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1606 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. HIGHT, DEBORAH, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 4814 MIRROR LAKE DRIVE

City POWDER SPRINGS	State GA	Zip Code 30127-4910
------------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) R&DPRINTING,INC	Occupation (for Individual) SECRETARY-TREASURER
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1075.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11		01		2016

Transaction ID : SA11A.463160

Amount of Each Receipt this Period
100.00

Memo Item
CONTRIBUTION

B. HIGHT, DEBORAH, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 4814 MIRROR LAKE DRIVE

City POWDER SPRINGS	State GA	Zip Code 30127-4910
------------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) R&DPRINTING,INC	Occupation (for Individual) SECRETARY-TREASURER
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1075.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11		01		2016

Transaction ID : SA11A.463165

Amount of Each Receipt this Period
100.00

Memo Item
CONTRIBUTION

C. HILDEBRAND, CLEVE, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 22435 SHADYCROFT AVE.

City TORRANCE	State CA	Zip Code 90505-2032
------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
300.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		30		2016

Transaction ID : SA11A.460299

Amount of Each Receipt this Period
100.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	300.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1607 OF 4311
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. HILDEBRAND, CLEVE, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 22435 SHADYCROFT AVE.

City TORRANCE	State CA	Zip Code 90505-2032
------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
300.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	04	/	2016

Transaction ID : SA11A.471051

Amount of Each Receipt this Period
100.00

Memo Item CONTRIBUTION

B. HILDEBRANDT, ERIC, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 27252 33RD PLACE SOUTH

City KENT	State WA	Zip Code 98032-7078
--------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) ST FABRICATION	Occupation (for Individual) ENGINEER
---	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
275.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	29	/	2016

Transaction ID : SA11A.460775

Amount of Each Receipt this Period
50.00

Memo Item CONTRIBUTION

C. HILDEBRAND, GLENDON, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 9106 170TH ST E

City PUYALLUP	State WA	Zip Code 98375-2291
------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
300.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	24	/	2016

Transaction ID : SA11A.445788

Amount of Each Receipt this Period
100.00

Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	250.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1608 OF 4311
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. HILDEBRAND, GLENDON, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 9106 170TH ST E

City PUYALLUP	State WA	Zip Code 98375-2291
------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
300.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		24		2016

Transaction ID : SA11A.445803

Amount of Each Receipt this Period
100.00

Memo Item
CONTRIBUTION

B. HILDEBRAND, GLENDON, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 9106 170TH ST E

City PUYALLUP	State WA	Zip Code 98375-2291
------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
300.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		24		2016

Transaction ID : SA11A.445804

Amount of Each Receipt this Period
100.00

Memo Item
CONTRIBUTION

C. HILDEBRAND, WILLAIM, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 7417 PINE BLUFF DRIVE.

City SPRING LAKE	State MI	Zip Code 49456-9653
---------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) CARLON METER, INC.	Occupation (for Individual) PRESIDENT
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
1050.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		26		2016

Transaction ID : SA11A.450970

Amount of Each Receipt this Period
100.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	300.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1609 OF 4311
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. HILE, JAMES, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 6200 OLD RIVER TRAIL

City LANSING	State MI	Zip Code 48917-8647
-----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
300.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		26		2016

Transaction ID : SA11A.450924

Amount of Each Receipt this Period
100.00

Memo Item
CONTRIBUTION

B. HILL, GREG, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address PO BOX 1449

City WILSON	State WY	Zip Code 83014-1449
----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) HESS CORP	Occupation (for Individual) PRESIDENT
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
5000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		20		2016

Transaction ID : SA11A.433374

Amount of Each Receipt this Period
5000.00

Memo Item
CONTRIBUTION

C. HILL, JAMES, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 9791 ADDIE MEADOW CT

City LAS VEGAS	State NV	Zip Code 89149-1964
-------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) HILL GROUP LLC	Occupation (for Individual) GENERAL CONTRACTOR
---	---

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		20		2016

Transaction ID : SA11A.444852

Amount of Each Receipt this Period
250.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	5350.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 1610 OF 4311
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. HILL, JUDITH, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 1557 MT VERNON ROAD

City CHARLESTON	State WV	Zip Code 25314-2533
--------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
400.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	26	/	2016

Transaction ID : SA11A.450560

Amount of Each Receipt this Period
100.00

Memo Item
CONTRIBUTION

B. HILL, JUDITH, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 1557 MT VERNON ROAD

City CHARLESTON	State WV	Zip Code 25314-2533
--------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
400.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	26	/	2016

Transaction ID : SA11A.450580

Amount of Each Receipt this Period
100.00

Memo Item
CONTRIBUTION

C. HILL, KATHERINE, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 101 PENNSYLVANIA AVE

City OSPREY	State FL	Zip Code 34229-9398
----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) STEPHANIE HAYNES	Occupation (for Individual) HAIRSTYLIST
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
225.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	07	/	2016

Transaction ID : SA11A.480195

Amount of Each Receipt this Period
25.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	225.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1611 OF 4311		
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14	<input type="checkbox"/> 11c <input type="checkbox"/> 15	<input type="checkbox"/> 12 <input type="checkbox"/> 16

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NAME OF COMMITTEE (In Full)
Team Ryan

A. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
HILL, LINDA, , ,

Mailing Address 59 ORIOLE DRIVE

City NEW MARTINSVILLE	State WV	Zip Code 26155-2859
--------------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
285.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 01 / 2016

Transaction ID : SA11A.462245

Amount of Each Receipt this Period
25.00

Memo Item CONTRIBUTION

B. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
HILL, LINDA, , ,

Mailing Address 59 ORIOLE DRIVE

City NEW MARTINSVILLE	State WV	Zip Code 26155-2859
--------------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
285.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 04 / 2016

Transaction ID : SA11A.471834

Amount of Each Receipt this Period
25.00

Memo Item CONTRIBUTION

C. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
HILL, LINDA, , ,

Mailing Address 59 ORIOLE DRIVE

City NEW MARTINSVILLE	State WV	Zip Code 26155-2859
--------------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
285.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 04 / 2016

Transaction ID : SA11A.473450

Amount of Each Receipt this Period
30.00

Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	80.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1612 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. HILL, LOREN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO BOX 1449
 City WILSON State WY Zip Code 83014-1449
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) STEAMBOAT STYLE LLC Occupation (for Individual) OWNER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 5000.00

Date of Receipt 10 / 20 / 2016
Transaction ID : SA11A.433373
 Amount of Each Receipt this Period 5000.00
 Memo Item
CONTRIBUTION

B. HILL, MARCUS, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5925 SUNDOWN DR
 City WATAUGA State TX Zip Code 76148-1349
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) AG WORKERS INS Occupation (for Individual) MANAGEMENT
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 750.00

Date of Receipt 10 / 22 / 2016
Transaction ID : SA11A.446693
 Amount of Each Receipt this Period 250.00
 Memo Item
CONTRIBUTION

C. HILL, MARCUS, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5925 SUNDOWN DR
 City WATAUGA State TX Zip Code 76148-1349
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) AG WORKERS INS Occupation (for Individual) MANAGEMENT
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 750.00

Date of Receipt 10 / 22 / 2016
Transaction ID : SA11A.446694
 Amount of Each Receipt this Period 250.00
 Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	5500.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1613 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. HILL, MARCUS, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 5925 SUNDOWN DR

City WATAUGA	State TX	Zip Code 76148-1349
-----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) AG WORKERS INS	Occupation (for Individual) MANAGEMENT
---	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
750.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	02	/	2016

Transaction ID : SA11A.469903

Amount of Each Receipt this Period
250.00

Memo Item
CONTRIBUTION

B. HILL, SARA, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 6620 PEACHBLOSSOM POINT ROAD

City EASTON	State MD	Zip Code 21601-
----------------	-------------	--------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) HOMEMAKER
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	20	/	2016

Transaction ID : SA11A.433387

Amount of Each Receipt this Period
1000.00

Memo Item
CONTRIBUTION

C. HILLAM, JOSEPH, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 266 W 2400 S

City BRIGHAM CITY	State UT	Zip Code 84302-4520
----------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) INFORMATION REQUESTED PER BEST EFFORTS	Occupation (for Individual) INFORMATION REQUESTED PER BES
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	02	/	2016

Transaction ID : SA11A.465145

Amount of Each Receipt this Period
250.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	1500.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1614 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
Team Ryan

A. HILLENBARND, JOHN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 324 MITCHELL AVENUE
 City BATESVILLE State IN Zip Code 47006-9015
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 02 / 2016
Transaction ID : SA11A.465140
 Amount of Each Receipt this Period
 1000.00
 Memo Item
 CONTRIBUTION

B. HILLIS, JENNIFER, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 951 E WYE LANE
 City FOX POINT State WI Zip Code 53217-3649
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) HOMEMAKER Occupation (for Individual) HOMEMAKER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 6072.32

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 27 / 2016
Transaction ID : SA11A.452487
 Amount of Each Receipt this Period
 6072.32
 Memo Item
 CONTRIBUTION
 IN-KIND: JFC EVENT CATERING

C. HILLIER, MICHAEL, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2241 WINDWARD SHOREDR.
 City VIRGINIA BEACH State VA Zip Code 23451-1727
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 31 / 2016
Transaction ID : SA11A.463751
 Amount of Each Receipt this Period
 50.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	7122.32
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1615 OF 4311		
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14	<input type="checkbox"/> 11c <input type="checkbox"/> 15	<input type="checkbox"/> 12 <input type="checkbox"/> 16

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NAME OF COMMITTEE (In Full)
Team Ryan

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name A. HILLIER, MICHAEL, , ,			Date of Receipt MM / DD / YYYY 11 / 04 / 2016 Transaction ID : SA11A.474187		
Mailing Address 2241 WINDWARD SHOREDR.			Amount of Each Receipt this Period 100.00		
City VIRGINIA BEACH	State VA	Zip Code 23451-1727	<input type="checkbox"/> Memo Item CONTRIBUTION		
FEC ID number of contributing federal political committee. C					
Name of Employer (for Individual) NONE		Occupation (for Individual) RETIRED			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 300.00			

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name B. HILLMAN, TATNALL, , MR.,			Date of Receipt MM / DD / YYYY 10 / 28 / 2016 Transaction ID : SA11A.456027		
Mailing Address 504 W BLEEKER ST			Amount of Each Receipt this Period 3000.00		
City ASPEN	State CO	Zip Code 81611-1228	<input type="checkbox"/> Memo Item CONTRIBUTION		
FEC ID number of contributing federal political committee. C					
Name of Employer (for Individual) NONE		Occupation (for Individual) RETIRED			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 31900.00			

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name C. HILLMAN, TATNALL, , MR.,			Date of Receipt MM / DD / YYYY 11 / 04 / 2016 Transaction ID : SA11A.473083		
Mailing Address 504 W BLEEKER ST			Amount of Each Receipt this Period 3000.00		
City ASPEN	State CO	Zip Code 81611-1228	<input type="checkbox"/> Memo Item CONTRIBUTION		
FEC ID number of contributing federal political committee. C					
Name of Employer (for Individual) NONE		Occupation (for Individual) RETIRED			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		Aggregate Year-to-Date ▼ 31900.00			

SUBTOTAL of Receipts This Page (optional).....▶	6100.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1616 OF 4311		
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14	<input type="checkbox"/> 11c <input type="checkbox"/> 15	<input type="checkbox"/> 12 <input type="checkbox"/> 16

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
Team Ryan

A. HILLS, RICHARD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1044 ASHLEY TAYLOR COURT
 City WADSWORTH State OH Zip Code 44281-8187
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 235.00

Date of Receipt **10 / 26 / 2016**
Transaction ID : SA11A.449952
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

B. HILLS, RICHARD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1044 ASHLEY TAYLOR COURT
 City WADSWORTH State OH Zip Code 44281-8187
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 235.00

Date of Receipt **11 / 04 / 2016**
Transaction ID : SA11A.473042
 Amount of Each Receipt this Period 30.00
 Memo Item CONTRIBUTION

C. HILLS, RICHARD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1044 ASHLEY TAYLOR COURT
 City WADSWORTH State OH Zip Code 44281-8187
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 235.00

Date of Receipt **11 / 07 / 2016**
Transaction ID : SA11A.475464
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	130.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1617 OF 4311
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. HILSINGER, ARTHUR, R., MR.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 8 JACKSON POND ROAD

City DEDHAM	State MA	Zip Code 02026-5524
----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
2000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	01	/	2016

Transaction ID : SA11A.461875

Amount of Each Receipt this Period
1000.00

Memo Item
CONTRIBUTION

B. HILSMAN, ROBERT, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address BOX 276277

City SAN ANTONIO	State TX	Zip Code 78227-6277
---------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
278.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	25	/	2016

Transaction ID : SA11A.448878

Amount of Each Receipt this Period
25.00

Memo Item
CONTRIBUTION

C. HILSMAN, ROBERT, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address BOX 276277

City SAN ANTONIO	State TX	Zip Code 78227-6277
---------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
278.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	29	/	2016

Transaction ID : SA11A.460945

Amount of Each Receipt this Period
30.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	1055.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1618 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. HILSMAN, ROBERT, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address **BOX 276277**
 City **SAN ANTONIO** State **TX** Zip Code **78227-6277**
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) **NONE** Occupation (for Individual) **RETIRED**
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ **278.00**

Date of Receipt **11 / 04 / 2016**
Transaction ID : SA11A.471152
 Amount of Each Receipt this Period **30.00**
 Memo Item CONTRIBUTION

B. HILSMAN, ROBERT, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address **BOX 276277**
 City **SAN ANTONIO** State **TX** Zip Code **78227-6277**
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) **NONE** Occupation (for Individual) **RETIRED**
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ **278.00**

Date of Receipt **11 / 04 / 2016**
Transaction ID : SA11A.473103
 Amount of Each Receipt this Period **25.00**
 Memo Item CONTRIBUTION

C. HILSMAN, ROBERT, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address **BOX 276277**
 City **SAN ANTONIO** State **TX** Zip Code **78227-6277**
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) **NONE** Occupation (for Individual) **RETIRED**
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ **278.00**

Date of Receipt **11 / 06 / 2016**
Transaction ID : SA11A.477661
 Amount of Each Receipt this Period **18.00**
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	73.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1619 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. HILT, ROBERT, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 544 SARATOGA DR
 City AURORA State IL Zip Code 60502-9037
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) LSC COMMUNICATIONS Occupation (for Individual) HUMAN RESOURCES
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 220.00

Date of Receipt 10 / 25 / 2016
Transaction ID : SA11A.448604
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

B. HINCHCLIFF, MICHELE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 564 GREENWAY DR.
 City LAKE FOREST State IL Zip Code 60045-4801
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 10 / 31 / 2016
Transaction ID : SA11A.458465
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

C. HINCHCLIFF, MICHELE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 564 GREENWAY DR.
 City LAKE FOREST State IL Zip Code 60045-4801
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 10 / 31 / 2016
Transaction ID : SA11A.458471
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶ 150.00
TOTAL This Period (last page this line number only).....▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1620 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. HINES, JAMES, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO BOX 23778
 City NEW ORLEANS State LA Zip Code 70183-0778
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) AFT HOLDINGS, INC Occupation (for Individual) EXECUTIVE
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 500.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 07 / 2016
Transaction ID : SA11A.480149
 Amount of Each Receipt this Period
 250.00
 Memo Item
 CONTRIBUTION

B. HINES, JAMES, J., DR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 6143 N. 61ST PLACE
 City PARADISE VALLEY State AZ Zip Code 85253-4209
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) ARIZONA CARDIOLOGY GROUP Occupation (for Individual) PHYSICIAN
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 550.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 28 / 2016
Transaction ID : SA11A.456421
 Amount of Each Receipt this Period
 250.00
 Memo Item
 CONTRIBUTION

C. HINES, JAMES, J., DR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 6143 N. 61ST PLACE
 City PARADISE VALLEY State AZ Zip Code 85253-4209
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) ARIZONA CARDIOLOGY GROUP Occupation (for Individual) PHYSICIAN
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 550.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 01 / 2016
Transaction ID : SA11A.467245
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	600.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1621 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. HINMAN, SARA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 19 FIORE
 City NEWPORT COAST State CA Zip Code 92657-1204
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SOTHEBY'S Occupation (for Individual) REALTOR
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 26 / 2016
Transaction ID : SA11A.450976
 Amount of Each Receipt this Period 25.00
 Memo Item
 CONTRIBUTION

B. HINMAN, SARA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 19 FIORE
 City NEWPORT COAST State CA Zip Code 92657-1204
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SOTHEBY'S Occupation (for Individual) REALTOR
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 31 / 2016
Transaction ID : SA11A.457537
 Amount of Each Receipt this Period 25.00
 Memo Item
 CONTRIBUTION

C. HINMAN, SARA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 19 FIORE
 City NEWPORT COAST State CA Zip Code 92657-1204
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SOTHEBY'S Occupation (for Individual) REALTOR
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 04 / 2016
Transaction ID : SA11A.470352
 Amount of Each Receipt this Period 25.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	75.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1622 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. HINMAN, SARA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 19 FIORE
 City NEWPORT COAST State CA Zip Code 92657-1204
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SOTHEBY'S Occupation (for Individual) REALTOR
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 04 / 2016
Transaction ID : SA11A.473458
 Amount of Each Receipt this Period
 25.00
 Memo Item
 CONTRIBUTION

B. HINSON, WILLIAM, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1907 E DE SOTO ST
 City PENSACOLA State FL Zip Code 32501-3514
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1236.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 30 / 2016
Transaction ID : SA11A.460069
 Amount of Each Receipt this Period
 131.00
 Memo Item
 CONTRIBUTION

C. HINSON, WILLIAM, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1907 E DE SOTO ST
 City PENSACOLA State FL Zip Code 32501-3514
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1236.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 04 / 2016
Transaction ID : SA11A.471389
 Amount of Each Receipt this Period
 131.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	287.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1623 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
Team Ryan

A. HINTZE, FLORIE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 94-423HOKUILI ST. MILILANI
 HOUSE
 City HONOLULU State HI Zip Code 96789-
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) HOMEMAKER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 465.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 28 / 2016
Transaction ID : SA11A.456159
 Amount of Each Receipt this Period
 25.00
 Memo Item
 CONTRIBUTION

B. HINTZE, FLORIE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 94-423HOKUILI ST. MILILANI
 HOUSE
 City HONOLULU State HI Zip Code 96789-
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) HOMEMAKER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 465.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 28 / 2016
Transaction ID : SA11A.456406
 Amount of Each Receipt this Period
 30.00
 Memo Item
 CONTRIBUTION

C. HINTZE, FLORIE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 94-423HOKUILI ST. MILILANI
 HOUSE
 City HONOLULU State HI Zip Code 96789-
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) HOMEMAKER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 465.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 28 / 2016
Transaction ID : SA11A.456407
 Amount of Each Receipt this Period
 30.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	85.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1624 OF 4311
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. HINTZE, FLORIE, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 94-423HOKUILI ST. MILILANI
HOUSE

City HONOLULU State HI Zip Code 96789-

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE Occupation (for Individual) HOMEMAKER

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 465.00

Date of Receipt 10 / 28 / 2016
Transaction ID : SA11A.456409

Amount of Each Receipt this Period 30.00

Memo Item CONTRIBUTION

B. HINTZE, FLORIE, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 94-423HOKUILI ST. MILILANI
HOUSE

City HONOLULU State HI Zip Code 96789-

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE Occupation (for Individual) HOMEMAKER

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 465.00

Date of Receipt 10 / 31 / 2016
Transaction ID : SA11A.463862

Amount of Each Receipt this Period 30.00

Memo Item CONTRIBUTION

C. HINTZE, FLORIE, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 94-423HOKUILI ST. MILILANI
HOUSE

City HONOLULU State HI Zip Code 96789-

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE Occupation (for Individual) HOMEMAKER

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 465.00

Date of Receipt 10 / 31 / 2016
Transaction ID : SA11A.463866

Amount of Each Receipt this Period 30.00

Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶ 90.00

TOTAL This Period (last page this line number only).....▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1625 OF 4311
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. HINTZE, FLORIE, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 94-423HOKUILI ST. MILILANI
HOUSE

City HONOLULU State HI Zip Code 96789-

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE Occupation (for Individual) HOMEMAKER

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 465.00

Date of Receipt 11 / 02 / 2016
Transaction ID : SA11A.469828

Amount of Each Receipt this Period 30.00

Memo Item CONTRIBUTION

B. HINTZE, FLORIE, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 94-423HOKUILI ST. MILILANI
HOUSE

City HONOLULU State HI Zip Code 96789-

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE Occupation (for Individual) HOMEMAKER

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 465.00

Date of Receipt 11 / 02 / 2016
Transaction ID : SA11A.469830

Amount of Each Receipt this Period 30.00

Memo Item CONTRIBUTION

C. HINTZE, FLORIE, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 94-423HOKUILI ST. MILILANI
HOUSE

City HONOLULU State HI Zip Code 96789-

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE Occupation (for Individual) HOMEMAKER

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 465.00

Date of Receipt 11 / 02 / 2016
Transaction ID : SA11A.469852

Amount of Each Receipt this Period 25.00

Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 85.00

TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1626 OF 4311
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. HINTZE, FLORIE, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 94-423HOKUILI ST. MILILANI
HOUSE

City HONOLULU State HI Zip Code 96789-

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE Occupation (for Individual) HOMEMAKER

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 465.00

Date of Receipt 11 / 04 / 2016
Transaction ID : SA11A.471473

Amount of Each Receipt this Period 30.00

Memo Item CONTRIBUTION

B. HINTZE, FLORIE, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 94-423HOKUILI ST. MILILANI
HOUSE

City HONOLULU State HI Zip Code 96789-

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE Occupation (for Individual) HOMEMAKER

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 465.00

Date of Receipt 11 / 04 / 2016
Transaction ID : SA11A.474129

Amount of Each Receipt this Period 25.00

Memo Item CONTRIBUTION

C. HINTZE, FLORIE, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 94-423HOKUILI ST. MILILANI
HOUSE

City HONOLULU State HI Zip Code 96789-

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE Occupation (for Individual) HOMEMAKER

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 465.00

Date of Receipt 11 / 07 / 2016
Transaction ID : SA11A.480381

Amount of Each Receipt this Period 25.00

Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶ 80.00

TOTAL This Period (last page this line number only).....▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1627 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. HINTZE, FLORIE, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 94-423HOKUILI ST. MILILANI
HOUSE

City HONOLULU State HI Zip Code 96789-

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE Occupation (for Individual) HOMEMAKER

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 465.00

Date of Receipt 11 / 07 / 2016
Transaction ID : SA11A.480397

Amount of Each Receipt this Period 25.00

Memo Item CONTRIBUTION

B. HINTZE, FLORIE, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 94-423HOKUILI ST. MILILANI
HOUSE

City HONOLULU State HI Zip Code 96789-

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE Occupation (for Individual) HOMEMAKER

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 465.00

Date of Receipt 11 / 07 / 2016
Transaction ID : SA11A.480398

Amount of Each Receipt this Period 25.00

Memo Item CONTRIBUTION

C. HINTZE, FLORIE, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 94-423HOKUILI ST. MILILANI
HOUSE

City HONOLULU State HI Zip Code 96789-

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE Occupation (for Individual) HOMEMAKER

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 465.00

Date of Receipt 11 / 06 / 2016
Transaction ID : SA11A.480878

Amount of Each Receipt this Period 25.00

Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 75.00

TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1628 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
-----------------------------	-----------------------------	-----------------------------

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NAME OF COMMITTEE (In Full)
Team Ryan

A. HINYUB, ELISABETH, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 616H OLMAN PLACE
 City OKLAHOMA CITY State OK Zip Code 73110-7217
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) TINKER AFB, OKC, OK Occupation (for Individual) DATA MANAGER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 275.00

Date of Receipt 10 / 24 / 2016
Transaction ID : SA11A.446189
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

B. HINYUB, ELISABETH, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 616H OLMAN PLACE
 City OKLAHOMA CITY State OK Zip Code 73110-7217
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) TINKER AFB, OKC, OK Occupation (for Individual) DATA MANAGER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 275.00

Date of Receipt 10 / 27 / 2016
Transaction ID : SA11A.452497
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

C. HINYUB, ELISABETH, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 616H OLMAN PLACE
 City OKLAHOMA CITY State OK Zip Code 73110-7217
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) TINKER AFB, OKC, OK Occupation (for Individual) DATA MANAGER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 275.00

Date of Receipt 10 / 27 / 2016
Transaction ID : SA11A.452498
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶ 125.00
TOTAL This Period (last page this line number only).....▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1629 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. HIRA, MAHESH, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 716 PRAIRIE AVENUE

City GLEN ELLYN	State IL	Zip Code 60137-3847
--------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) CME GROUP	Occupation (for Individual) MANAGEMENT
--	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
350.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	07	/	2016

Transaction ID : SA11A.476363

Amount of Each Receipt this Period
100.00

Memo Item CONTRIBUTION

B. HIRSCH, JAMES, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 12 GEARY ST.
STE 403

City SAN FRANCISCO	State CA	Zip Code 94108-5712
-----------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1075.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	24	/	2016

Transaction ID : SA11A.446244

Amount of Each Receipt this Period
50.00

Memo Item CONTRIBUTION

C. HIRSCH, JAMES, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 12 GEARY ST.
STE 403

City SAN FRANCISCO	State CA	Zip Code 94108-5712
-----------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
1075.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	24	/	2016

Transaction ID : SA11A.446245

Amount of Each Receipt this Period
50.00

Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	200.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1630 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. HIRSCH, JAMES, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 12 GEARY ST.
 STE 403
 City SAN FRANCISCO State CA Zip Code 94108-5712
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1075.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 29 / 2016
Transaction ID : SA11A.461016
 Amount of Each Receipt this Period
 100.00
 Memo Item CONTRIBUTION

B. HIRSCH, JAMES, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 12 GEARY ST.
 STE 403
 City SAN FRANCISCO State CA Zip Code 94108-5712
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1075.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 05 / 2016
Transaction ID : SA11A.478684
 Amount of Each Receipt this Period
 50.00
 Memo Item CONTRIBUTION

C. HIRSCH, JAMES, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 12 GEARY ST.
 STE 403
 City SAN FRANCISCO State CA Zip Code 94108-5712
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1075.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 05 / 2016
Transaction ID : SA11A.478685
 Amount of Each Receipt this Period
 50.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	200.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1631 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. HIRSCH, JAMES, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 12 GEARY ST.
 STE 403
 City SAN FRANCISCO State CA Zip Code 94108-5712
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1075.00

Date of Receipt
 11 / 07 / 2016
Transaction ID : SA11A.480268
 Amount of Each Receipt this Period
 50.00
 Memo Item CONTRIBUTION

B. HIRSCH, JAMES, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 12 GEARY ST.
 STE 403
 City SAN FRANCISCO State CA Zip Code 94108-5712
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1075.00

Date of Receipt
 11 / 07 / 2016
Transaction ID : SA11A.480270
 Amount of Each Receipt this Period
 50.00
 Memo Item CONTRIBUTION

C. HIRSCH, ROLAND, F., DR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 20458 WATERS POINT LANE
 City GERMANTOWN State MD Zip Code 20874-1091
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) US DEPT OF ENERGY Occupation (for Individual) SCIENCE MANAGER
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 903.00

Date of Receipt
 10 / 25 / 2016
Transaction ID : SA11A.451789
 Amount of Each Receipt this Period
 25.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	125.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1632 OF 4311
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
HIRSCH, ROLAND, F., DR.,

Mailing Address **20458 WATERS POINT LANE**

City GERMANTOWN	State MD	Zip Code 20874-1091
---------------------------	--------------------	-------------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) US DEPT OF ENERGY	Occupation (for Individual) SCIENCE MANAGER
---	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
903.00

Date of Receipt
10 / 27 / 2016

Transaction ID : SA11A.456838

Amount of Each Receipt this Period
50.00

Memo Item CONTRIBUTION

B. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
HIRSCH, ROLAND, F., DR.,

Mailing Address **20458 WATERS POINT LANE**

City GERMANTOWN	State MD	Zip Code 20874-1091
---------------------------	--------------------	-------------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) US DEPT OF ENERGY	Occupation (for Individual) SCIENCE MANAGER
---	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
903.00

Date of Receipt
10 / 29 / 2016

Transaction ID : SA11A.460955

Amount of Each Receipt this Period
50.00

Memo Item CONTRIBUTION

C. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
HIRSCH, ROLAND, F., DR.,

Mailing Address **20458 WATERS POINT LANE**

City GERMANTOWN	State MD	Zip Code 20874-1091
---------------------------	--------------------	-------------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) US DEPT OF ENERGY	Occupation (for Individual) SCIENCE MANAGER
---	---

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
903.00

Date of Receipt
11 / 02 / 2016

Transaction ID : SA11A.469472

Amount of Each Receipt this Period
25.00

Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	125.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1633 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
HIRSCH, ROLAND, F., DR.,

Mailing Address **20458 WATERS POINT LANE**

City GERMANTOWN	State MD	Zip Code 20874-1091
---------------------------	--------------------	-------------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) US DEPT OF ENERGY	Occupation (for Individual) SCIENCE MANAGER
---	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
903.00

Date of Receipt
11 / 02 / 2016

Transaction ID : SA11A.469532

Amount of Each Receipt this Period
25.00

Memo Item CONTRIBUTION

B. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
HIRSCH, ROLAND, F., DR.,

Mailing Address **20458 WATERS POINT LANE**

City GERMANTOWN	State MD	Zip Code 20874-1091
---------------------------	--------------------	-------------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) US DEPT OF ENERGY	Occupation (for Individual) SCIENCE MANAGER
---	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
903.00

Date of Receipt
11 / 07 / 2016

Transaction ID : SA11A.475005

Amount of Each Receipt this Period
38.00

Memo Item CONTRIBUTION

C. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
HIRSCH, ROLAND, F., DR.,

Mailing Address **20458 WATERS POINT LANE**

City GERMANTOWN	State MD	Zip Code 20874-1091
---------------------------	--------------------	-------------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) US DEPT OF ENERGY	Occupation (for Individual) SCIENCE MANAGER
---	---

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
903.00

Date of Receipt
11 / 05 / 2016

Transaction ID : SA11A.479120

Amount of Each Receipt this Period
30.00

Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	93.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1634 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
-----------------------------	-----------------------------	-----------------------------

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NAME OF COMMITTEE (In Full)
Team Ryan

A. HIRSCH, ROLAND, F., DR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 20458 WATERS POINT LANE
 City GERMANTOWN State MD Zip Code 20874-1091
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) US DEPT OF ENERGY Occupation (for Individual) SCIENCE MANAGER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 903.00

Date of Receipt 11 / 07 / 2016
Transaction ID : SA11A.480411
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

B. HIXSON, CONNIE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1813 FLEETWOOD DRIVE
 City KINGSPORT State TN Zip Code 37660-5728
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) ETSU DEPARTMENT OF. FAMILY MEDICINE Occupation (for Individual) PHYSICIAN
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 425.00

Date of Receipt 11 / 07 / 2016
Transaction ID : SA11A.479886
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

C. HO, MICHAEL, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3025 LITTLE HAVEN RD
 City VIRGINIA BEACH State VA Zip Code 23452-6103
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) MEDICAL CENTER RADIOLOGIST Occupation (for Individual) PHYSICIAN
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 700.00

Date of Receipt 10 / 25 / 2016
Transaction ID : SA11A.448876
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	225.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1635 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. HO, MICHAEL, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3025 LITTLE HAVEN RD
 City VIRGINIA BEACH State VA Zip Code 23452-6103
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) MEDICAL CENTER RADIOLOGIST Occupation (for Individual) PHYSICIAN
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 700.00

Date of Receipt 11 / 04 / 2016
Transaction ID : SA11A.473334
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

B. HOAGEY, ELIZABETH, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 219 PHILLIPS MILL LANE
 City NEWARK State DE Zip Code 19711-7493
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1750.00

Date of Receipt 11 / 04 / 2016
Transaction ID : SA11A.472677
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

C. HOAGLAND, MARJORIE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2716 RYAN BLVD.
 City PUNTA GORDA State FL Zip Code 33950-8110
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 10 / 29 / 2016
Transaction ID : SA11A.460404
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	300.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1636 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. HOAGLAND, MARJORIE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2716 RYAN BLVD.
 City PUNTA GORDA State FL Zip Code 33950-8110
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 10 / 29 / 2016
Transaction ID : SA11A.460405
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

B. HOAGLAND, MARJORIE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2716 RYAN BLVD.
 City PUNTA GORDA State FL Zip Code 33950-8110
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 10 / 29 / 2016
Transaction ID : SA11A.460406
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

C. HOAGLAND, MARJORIE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2716 RYAN BLVD.
 City PUNTA GORDA State FL Zip Code 33950-8110
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 11 / 02 / 2016
Transaction ID : SA11A.469573
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	300.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1637 OF 4311		
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14	<input type="checkbox"/> 11c <input type="checkbox"/> 15	<input type="checkbox"/> 12 <input type="checkbox"/> 16

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NAME OF COMMITTEE (In Full)
Team Ryan

A. HOCUTT, HUBERT, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2421 PRESTON RIDGE DR SE
 City BROWNSBORO State AL Zip Code 35741-9104
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 31 / 2016
Transaction ID : SA11A.458884
 Amount of Each Receipt this Period
 250.00
 Memo Item
 CONTRIBUTION

B. HODGES, NANCY, P., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO BOX 643253
 City VERO BEACH State FL Zip Code 32964-3253
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 325.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 25 / 2016
Transaction ID : SA11A.448566
 Amount of Each Receipt this Period
 50.00
 Memo Item
 CONTRIBUTION

C. HODGES, NANCY, P., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO BOX 643253
 City VERO BEACH State FL Zip Code 32964-3253
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 325.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 25 / 2016
Transaction ID : SA11A.448570
 Amount of Each Receipt this Period
 50.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	350.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1638 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. HODGES, NANCY, P., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO BOX 643253
 City VERO BEACH State FL Zip Code 32964-3253
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 325.00

Date of Receipt 10 / 26 / 2016
Transaction ID : SA11A.451096
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

B. HODGES, NANCY, P., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO BOX 643253
 City VERO BEACH State FL Zip Code 32964-3253
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 325.00

Date of Receipt 11 / 04 / 2016
Transaction ID : SA11A.473371
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

C. HODNEFIELD, SHERRI, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1020 SERPENTINE LN #111 SUITE 111
 City PLEASANTON State CA Zip Code 94566-4758
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 350.00

Date of Receipt 10 / 24 / 2016
Transaction ID : SA11A.449268
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶ 150.00
TOTAL This Period (last page this line number only).....▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1639 OF 4311
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
Team Ryan

A. HOEING, CLAIRE, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 944 BRYANS PLACE RD

City WINSTON SALEM	State NC	Zip Code 27104-5006
-----------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
325.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	02	/	2016

Transaction ID : SA11A.466383

Amount of Each Receipt this Period
25.00

Memo Item
CONTRIBUTION

B. HOEKSEMA, DOUG, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 761 PINE TREE ROAD

City WINTER PARK	State FL	Zip Code 32789-1508
---------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) DOUGLAS PARTNERS LLC	Occupation (for Individual) REAL ESTATE DEVELOPER
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
330.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	27	/	2016

Transaction ID : SA11A.456780

Amount of Each Receipt this Period
50.00

Memo Item
CONTRIBUTION

C. HOEL, MARGARET, P., ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 11203 OAKMONT COURT

City FORT MYERS	State FL	Zip Code 33908-2820
--------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
275.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	25	/	2016

Transaction ID : SA11A.447361

Amount of Each Receipt this Period
75.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	150.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1640 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
Team Ryan

A. HOER, CAROLYN, L., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 21988 ANGELI PLACE
 City GRASS VALLEY State CA Zip Code 95949-8331
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 11 / 03 / 2016
Transaction ID : SA11A.474562
 Amount of Each Receipt this Period
 50.00
 Memo Item
 CONTRIBUTION

B. HOFFELT, DONN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO BOX 789
 City WILLISTON State ND Zip Code 58802-0789
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 600.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 10 / 25 / 2016
Transaction ID : SA11A.451991
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION

C. HOFFELT, DONN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO BOX 789
 City WILLISTON State ND Zip Code 58802-0789
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 600.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 11 / 06 / 2016
Transaction ID : SA11A.478109
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	250.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1641 OF 4311
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. HOFFMAN, BEVERLY, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 291 SPURWINK AVE.

City CAPE ELIZABETH	State ME	Zip Code 04107-9692
------------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
249.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		30		2016

Transaction ID : SA11A.459630

Amount of Each Receipt this Period
50.00

Memo Item
CONTRIBUTION

B. HOFFMANN, CHRISTOPH, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 66 BEARD WAY

City NEEDHAM	State MA	Zip Code 02492-1036
-----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		24		2016

Transaction ID : SA11A.445626

Amount of Each Receipt this Period
1000.00

Memo Item
CONTRIBUTION

C. HOFFMAN, CURTIS, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 120 SAWYER HILL ROAD

City BERLIN	State MA	Zip Code 01503-1703
----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
2625.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11		04		2016

Transaction ID : SA11A.474221

Amount of Each Receipt this Period
250.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	1300.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1642 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. HOFFMAN, CURTIS, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 120 SAWYER HILL ROAD
 City BERLIN State MA Zip Code 01503-1703
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 2625.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 07 / 2016
Transaction ID : SA11A.474696
 Amount of Each Receipt this Period
 250.00
 Memo Item
 CONTRIBUTION

B. HOFFMAN, CURTIS, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 120 SAWYER HILL ROAD
 City BERLIN State MA Zip Code 01503-1703
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 2625.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 07 / 2016
Transaction ID : SA11A.474697
 Amount of Each Receipt this Period
 250.00
 Memo Item
 CONTRIBUTION

C. HOFFMAN, CURTIS, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 120 SAWYER HILL ROAD
 City BERLIN State MA Zip Code 01503-1703
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 2625.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 05 / 2016
Transaction ID : SA11A.479322
 Amount of Each Receipt this Period
 250.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	750.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1643 OF 4311
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. HOFFMAN, D, B., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1206 CASTILE AVENUE
 2200 PENNSYLVANIA AVE. NW
 City CORAL GABLES State FL Zip Code 33134-4744
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) HUNTON & WILLIAMS LLP Occupation (for Individual) ATTORNEY
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 750.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 25 / 2016
Transaction ID : SA11A.448986
 Amount of Each Receipt this Period
 500.00
 Memo Item
 CONTRIBUTION

B. HOFFMAN, ERIC, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 12440 BROOKGLEN DRIVE
 City SARATOGA State CA Zip Code 95070-3413
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) INTUITIVE SURGICAL, INC. Occupation (for Individual) ENGINEER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 31 / 2016
Transaction ID : SA11A.457657
 Amount of Each Receipt this Period
 250.00
 Memo Item
 CONTRIBUTION

C. HOFFMAN, ERIC, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 12440 BROOKGLEN DRIVE
 City SARATOGA State CA Zip Code 95070-3413
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) INTUITIVE SURGICAL, INC. Occupation (for Individual) ENGINEER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 31 / 2016
Transaction ID : SA11A.457658
 Amount of Each Receipt this Period
 250.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 1000.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1644 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. HOFFMAN, GERALD, M., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 212 E. ONTARIO ST.
 City CHICAGO State IL Zip Code 60611-3258
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 700.00

Date of Receipt **11 / 02 / 2016**
Transaction ID : SA11A.465994
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

B. HOFFMAN, ILENE, S., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2099 PACIFIC BLVD #211
 City SAN MATEO State CA Zip Code 94403-5705
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) APPLE INC. Occupation (for Individual) MARKETING
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt **10 / 25 / 2016**
Transaction ID : SA11A.451723
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

C. HOFFMAN, KAREN, , MRS.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2032 PENMAN LANE
 City BOUNTIFUL State UT Zip Code 84010-5520
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt **11 / 04 / 2016**
Transaction ID : SA11A.473354
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	200.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1645 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13 <input type="checkbox"/> 11b <input type="checkbox"/> 14 <input type="checkbox"/> 11c <input type="checkbox"/> 15 <input type="checkbox"/> 12 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. HOFMAN, DAVID, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2651 N SPAULDING AVE
 3W
 City CHICAGO State IL Zip Code 60647-1419
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) UNIVERSITY OF ILLINOIS Occupation (for Individual) PROFESSOR
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 275.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 27 / 2016
Transaction ID : SA11A.456569
 Amount of Each Receipt this Period 25.00
 Memo Item
 CONTRIBUTION

B. HOFMAN, DAVID, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2651 N SPAULDING AVE
 3W
 City CHICAGO State IL Zip Code 60647-1419
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) UNIVERSITY OF ILLINOIS Occupation (for Individual) PROFESSOR
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 275.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 27 / 2016
Transaction ID : SA11A.456571
 Amount of Each Receipt this Period 25.00
 Memo Item
 CONTRIBUTION

C. HOFMAN, DAVID, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2651 N SPAULDING AVE
 3W
 City CHICAGO State IL Zip Code 60647-1419
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) UNIVERSITY OF ILLINOIS Occupation (for Individual) PROFESSOR
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 275.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 27 / 2016
Transaction ID : SA11A.456574
 Amount of Each Receipt this Period 25.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 75.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1646 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. HOFMANN, RICHARD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2800 S OCEAN BLVD 10A
 City BOCA RATON State FL Zip Code 33432-8373
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 950.00

Date of Receipt 11 / 04 / 2016
Transaction ID : SA11A.472219
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

B. HOFTEIG, JOHN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1942 LEHIGH CENTER C
 City GLENVIEW State IL Zip Code 60026-1660
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) STRETCH LIMOUSINE CHICAGO Occupation (for Individual) LIMOUSINE CHAUFFER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 825.00

Date of Receipt 10 / 27 / 2016
Transaction ID : SA11A.453604
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

C. HOFTEIG, JOHN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1942 LEHIGH CENTER C
 City GLENVIEW State IL Zip Code 60026-1660
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) STRETCH LIMOUSINE CHICAGO Occupation (for Individual) LIMOUSINE CHAUFFER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 825.00

Date of Receipt 10 / 27 / 2016
Transaction ID : SA11A.453635
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	600.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1647 OF 4311		
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14	<input type="checkbox"/> 11c <input type="checkbox"/> 15	<input type="checkbox"/> 12 <input type="checkbox"/> 16

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NAME OF COMMITTEE (In Full)
Team Ryan

A. HOFTEIG, JOHN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1942 LEHIGH CENTER
 C
 City GLENVIEW State IL Zip Code 60026-1660
 FEC ID number of contributing federal political committee. C
 Name of Employer (for Individual) STRETCH LIMOUSINE CHICAGO Occupation (for Individual) LIMOUSINE CHAUFFER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 825.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 04 / 2016
Transaction ID : SA11A.479334
 Amount of Each Receipt this Period
 50.00
 Memo Item
 CONTRIBUTION

B. HOFTEIG, JOHN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1942 LEHIGH CENTER
 C
 City GLENVIEW State IL Zip Code 60026-1660
 FEC ID number of contributing federal political committee. C
 Name of Employer (for Individual) STRETCH LIMOUSINE CHICAGO Occupation (for Individual) LIMOUSINE CHAUFFER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 825.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 07 / 2016
Transaction ID : SA11A.480473
 Amount of Each Receipt this Period
 25.00
 Memo Item
 CONTRIBUTION

C. HOGAN, C, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 204 YORK ST
 City CLINTON State SC Zip Code 29325-2653
 FEC ID number of contributing federal political committee. C
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 350.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 26 / 2016
Transaction ID : SA11A.450668
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	175.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1648 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. HOGAN, C, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 204 YORK ST

City CLINTON	State SC	Zip Code 29325-2653
-----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
350.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	05	/	2016

Transaction ID : SA11A.478487

Amount of Each Receipt this Period
250.00

Memo Item CONTRIBUTION

B. HOGAN, CECIL, E., ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 2128 SWINNEA RD.

City NESBIT	State MS	Zip Code 38651-9355
----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) CECIL E HOGAN	Occupation (for Individual) SECURITY CONSULTANTS INC.
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
450.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	01	/	2016

Transaction ID : SA11A.462709

Amount of Each Receipt this Period
50.00

Memo Item CONTRIBUTION

C. HOGAN, CECIL, E., ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 2128 SWINNEA RD.

City NESBIT	State MS	Zip Code 38651-9355
----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) CECIL E HOGAN	Occupation (for Individual) SECURITY CONSULTANTS INC.
--	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
450.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	01	/	2016

Transaction ID : SA11A.462710

Amount of Each Receipt this Period
50.00

Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	350.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1649 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. HOGAN, CECIL, E., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2128 SWINNEA RD.
 City NESBIT State MS Zip Code 38651-9355
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) CECIL E HOGAN Occupation (for Individual) SECURITY CONSULTANTS INC.
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 450.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 04 / 2016
Transaction ID : SA11A.472835
 Amount of Each Receipt this Period
 50.00
 Memo Item
 CONTRIBUTION

B. HOGAN, RANDY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 15491 ESTANCIA LANE
 City WELLINGTON State FL Zip Code 33414-7408
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) PENTAIR Occupation (for Individual) EXEC
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 800.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 26 / 2016
Transaction ID : SA11A.451084
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION

C. HOGAN, RANDY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 15491 ESTANCIA LANE
 City WELLINGTON State FL Zip Code 33414-7408
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) PENTAIR Occupation (for Individual) EXEC
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 800.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 04 / 2016
Transaction ID : SA11A.472141
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	250.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1650 OF 4311
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
Team Ryan

A. HOGGE, WINTERS, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1651 TORY ROAD

City PAGELAND	State SC	Zip Code 29728-5580
------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) SCREWMATICS OF S.C.	Occupation (for Individual) SHOP OWNER
--	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
325.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	04	/	2016

Transaction ID : SA11A.473122

Amount of Each Receipt this Period
50.00

Memo Item
CONTRIBUTION

B. HOGUE, DAVID, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 18716 WAINSBOROUGH LANE

City DALLAS	State TX	Zip Code 75287-5525
----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1005.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	23	/	2016

Transaction ID : SA11A.449595

Amount of Each Receipt this Period
100.00

Memo Item
CONTRIBUTION

C. HOGUE, DAVID, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 18716 WAINSBOROUGH LANE

City DALLAS	State TX	Zip Code 75287-5525
----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
1005.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	01	/	2016

Transaction ID : SA11A.462783

Amount of Each Receipt this Period
131.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	281.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1651 OF 4311
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. HOKE, NANCY, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1590 ROCK RIDGE RD

City ALLEN	State TX	Zip Code 75002-8350
---------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
300.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	04	/	2016

Transaction ID : SA11A.473765

Amount of Each Receipt this Period
100.00

Memo Item CONTRIBUTION

B. HOLCOMB, RICHARD, J., MR.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 6315 SUNHOLLOW LANE

City HASLETT	State MI	Zip Code 48840-8279
-----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) STATE OF MICHIGAN	Occupation (for Individual) INVESTMENT MANAGER
--	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
400.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	21	/	2016

Transaction ID : SA11A.443526

Amount of Each Receipt this Period
200.00

Memo Item CONTRIBUTION

C. HOLDEN, PETER, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 4804 LEE HOLLOW PLACE .

City ELLCOTT CITY	State MD	Zip Code 21043-7991
----------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
300.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	25	/	2016

Transaction ID : SA11A.448867

Amount of Each Receipt this Period
100.00

Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	400.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1652 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. HOLDEN, PETER, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4804 LEE HOLLOW PLACE .
 City ELLICOTT CITY State MD Zip Code 21043-7991
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 11 / 04 / 2016
Transaction ID : SA11A.473129
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

B. HOLDEN, RONALD, R., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1910 GULF SHORE BLVD N 207
 City NAPLES State FL Zip Code 34102-4696
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt 11 / 07 / 2016
Transaction ID : SA11A.475630
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

C. HOLDEN, RONALD, R., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1910 GULF SHORE BLVD N 207
 City NAPLES State FL Zip Code 34102-4696
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt 11 / 07 / 2016
Transaction ID : SA11A.475631
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶ 150.00
TOTAL This Period (last page this line number only).....▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1653 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. HOLDING, HARVEY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 122 BRESLAU CIRCLE
 City WINSTON SALEM State NC Zip Code 27106-2962
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt 10 / 21 / 2016
Transaction ID : SA11A.444450
 Amount of Each Receipt this Period 1000.00
 Memo Item CONTRIBUTION

B. HOLICKI, JOSEPH, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 531 CRYSTAL BEACH DR
 City COLDWATER State MI Zip Code 49036-7820
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) HOLICKI EYE CENTER Occupation (for Individual) OPHTHALMOLOGIST
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 10 / 28 / 2016
Transaction ID : SA11A.456314
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

C. HOLLAND, LESLEY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 7605 MEADOW AVE
 City STOCKTON State CA Zip Code 95207-1841
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) STATE OF CALIFORNIA Occupation (for Individual) JUDGE
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 10 / 24 / 2016
Transaction ID : SA11A.449454
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	1350.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1654 OF 4311		
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14	<input type="checkbox"/> 11c <input type="checkbox"/> 15	<input type="checkbox"/> 12 <input type="checkbox"/> 16

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NAME OF COMMITTEE (In Full)
Team Ryan

A. HOLLAND, ZOE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 8650 FLINTWOOD RD
 City PARKER State CO Zip Code 80138-6719
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) HOLLAND SIGNS INC Occupation (for Individual) SELF EMPLOYED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 275.00

Date of Receipt 11 / 04 / 2016
Transaction ID : SA11A.474293
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

B. HOLLEY, CECIL, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1212 HIGHLAND TERRACE DR.
 City CANYON LAKE State TX Zip Code 78133-5273
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 600.00

Date of Receipt 10 / 28 / 2016
Transaction ID : SA11A.455910
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

C. HOLLEY, CECIL, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1212 HIGHLAND TERRACE DR.
 City CANYON LAKE State TX Zip Code 78133-5273
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 600.00

Date of Receipt 11 / 01 / 2016
Transaction ID : SA11A.462482
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	225.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1655 OF 4311
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. HOLLEY, CECIL, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1212 HIGHLAND TERRACE DR.
 City CANYON LAKE State TX Zip Code 78133-5273
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 600.00

Date of Receipt **11 / 03 / 2016**
Transaction ID : SA11A.469074
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

B. HOLLINGTON, RICHARD, R., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2724 SHELLEY ROAD
 City SHAKER HEIGHTS State OH Zip Code 44122-2732
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) CAPITOL WORKS LLC Occupation (for Individual) INVESTOR
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 3700.00

Date of Receipt **10 / 31 / 2016**
Transaction ID : SA11A.457237
 Amount of Each Receipt this Period 2700.00
 Memo Item CONTRIBUTION

C. HOLLOWAY, ANNA, R., MS.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2770 STATE UNIVERSITY DRIVE
 City FORT VALLEY State GA Zip Code 31030-6910
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 425.00

Date of Receipt **10 / 22 / 2016**
Transaction ID : SA11A.446696
 Amount of Each Receipt this Period 30.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	2830.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1656 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
Team Ryan

A. HOLLOWAY, DAN, , MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1715 RED OAK LANE
 City ALBANY State GA Zip Code 31701-1350
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 675.00

Date of Receipt 10 / 28 / 2016
Transaction ID : SA11A.455790
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

B. HOLLOWAY, RONDA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2031 WINDFIELD DRIVE
 City MONROE State GA Zip Code 30655-8502
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RONDA HOLLOWAY CPA Occupation (for Individual) CPA
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 350.00

Date of Receipt 10 / 27 / 2016
Transaction ID : SA11A.452257
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

C. HOLLOWAY, WALTER, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 354 TUFTON CIRCLE
 City FALLSTON State MD Zip Code 21047-2647
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 225.00

Date of Receipt 10 / 26 / 2016
Transaction ID : SA11A.450454
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	250.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1657 OF 4311
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. HOLLOWAY, WALTER, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 354 TUFTON CIRCLE

City FALLSTON	State MD	Zip Code 21047-2647
------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
225.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		26		2016

Transaction ID : SA11A.450458

Amount of Each Receipt this Period
100.00

Memo Item CONTRIBUTION

B. HOLLOWAY, WALTER, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 354 TUFTON CIRCLE

City FALLSTON	State MD	Zip Code 21047-2647
------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
225.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		31		2016

Transaction ID : SA11A.463580

Amount of Each Receipt this Period
25.00

Memo Item CONTRIBUTION

C. HOLMAN, ALISON, B., ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 132 LANCASTER DRIVE #616

City IRVINGTON	State VA	Zip Code 22480-9745
-------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
1000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		31		2016

Transaction ID : SA11A.457247

Amount of Each Receipt this Period
500.00

Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	625.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1658 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. HOLMES, DOUGLAS, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 775 LAVINA DRIVE
 City OGDEN State UT Zip Code 84403-3061
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 07 / 2016
Transaction ID : SA11A.467829
 Amount of Each Receipt this Period
 100.00
 Memo Item CONTRIBUTION

B. HOLMES, JR., HOUSTON, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4424 N. VERSAILLES
 City DALLAS State TX Zip Code 75205-3013
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 26 / 2016
Transaction ID : SA11A.450720
 Amount of Each Receipt this Period
 100.00
 Memo Item CONTRIBUTION

C. HOLMES, JEFF, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5139 E. 117TH STREET
 City TULSA State OK Zip Code 74137-8407
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) HUB INTERNATIONAL Occupation (for Individual) INSURANCE BROKER
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 28 / 2016
Transaction ID : SA11A.455584
 Amount of Each Receipt this Period
 100.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	300.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1659 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. HOLMES, JEFF, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5139 E. 117TH STREET
 City TULSA State OK Zip Code 74137-8407
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) HUB INTERNATIONAL Occupation (for Individual) INSURANCE BROKER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 10 / 28 / 2016
Transaction ID : SA11A.455588
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

B. HOLMES, JEFF, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5139 E. 117TH STREET
 City TULSA State OK Zip Code 74137-8407
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) HUB INTERNATIONAL Occupation (for Individual) INSURANCE BROKER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 10 / 31 / 2016
Transaction ID : SA11A.457560
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

C. HOLMES, JEFF, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5139 E. 117TH STREET
 City TULSA State OK Zip Code 74137-8407
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) HUB INTERNATIONAL Occupation (for Individual) INSURANCE BROKER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 11 / 04 / 2016
Transaction ID : SA11A.470698
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	300.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1660 OF 4311
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. HOLMES, JERALD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 226 MONUMENT HILL TRL
 City GEORGETOWN State TX Zip Code 78633-5389
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 450.00

Date of Receipt **10 / 24 / 2016**
Transaction ID : SA11A.449409
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

B. HOLMES, NED, S., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 55 WAUGH DR STE 1111
 City HOUSTON State TX Zip Code 77007-5837
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NED S HOLMES INVESTMENTS INC Occupation (for Individual) CHAIRMAN
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 2000.00

Date of Receipt **11 / 21 / 2016**
Transaction ID : SA11A.481017
 Amount of Each Receipt this Period 1000.00
 Memo Item CONTRIBUTION

C. HOLMES, ROBERT, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5627 FOARD DRIVE
 City FRISCO State TX Zip Code 75034-1836
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt **10 / 30 / 2016**
Transaction ID : SA11A.459579
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	1150.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1661 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. HOLMES, ROBERT, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5627 FOARD DRIVE
 City FRISCO State TX Zip Code 75034-1836
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 30 / 2016
Transaction ID : SA11A.459582
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION

B. HOLMES, ROBERT, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5627 FOARD DRIVE
 City FRISCO State TX Zip Code 75034-1836
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 30 / 2016
Transaction ID : SA11A.459583
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION

C. HOLSWADE, SANDY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 45456 ESPINAZO STREET
 City INDIAN WELLS State CA Zip Code 92210-6162
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 450.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 27 / 2016
Transaction ID : SA11A.456505
 Amount of Each Receipt this Period
 50.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	250.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1662 OF 4311
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. HOLT, NORMAN, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 2104 KARNES DR
City KELLER State TX Zip Code 76248-8388
FEC ID number of contributing federal political committee. **C**
Name of Employer (for Individual) NORMAN HOLT Occupation (for Individual) CONSULTANT
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 275.00

Date of Receipt 10 / 28 / 2016
Transaction ID : SA11A.461372
Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

B. HOLT, NORMAN, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 2104 KARNES DR
City KELLER State TX Zip Code 76248-8388
FEC ID number of contributing federal political committee. **C**
Name of Employer (for Individual) NORMAN HOLT Occupation (for Individual) CONSULTANT
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 275.00

Date of Receipt 11 / 04 / 2016
Transaction ID : SA11A.474270
Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

C. HOLT, RALPH, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address P O BOX 819.
City BURLINGTON State NC Zip Code 27216-0819
FEC ID number of contributing federal political committee. **C**
Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
Receipt For: Primary General Other (specify)
Aggregate Year-to-Date ▼ 400.00

Date of Receipt 11 / 01 / 2016
Transaction ID : SA11A.462985
Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 225.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 1663 OF 4311
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. HOLT, ROBERT, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 6340 BROMPTON RD

City HOUSTON	State TX	Zip Code 77005-3404
-----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) TUDOR, PICKERING HOLT & CO	Occupation (for Individual) INVESTMENT BANKER
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
10000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	21	/	2016

Transaction ID : SA11A.481015

Amount of Each Receipt this Period
10000.00

Memo Item
CONTRIBUTION

B. HOLT, STEPHEN, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 3508 PENNSYLVANIA LN

City PLANO	State TX	Zip Code 75075-7809
---------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
600.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	29	/	2016

Transaction ID : SA11A.460366

Amount of Each Receipt this Period
250.00

Memo Item
CONTRIBUTION

C. HOLT, STEPHEN, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 3508 PENNSYLVANIA LN

City PLANO	State TX	Zip Code 75075-7809
---------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
600.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	07	/	2016

Transaction ID : SA11A.480720

Amount of Each Receipt this Period
150.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	10400.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1664 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. HOLTON, VIRGINIA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2312 RIVERHILL DR
 City VALDOSTA State GA Zip Code 31602-2108
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 475.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 03 / 2016
Transaction ID : SA11A.469169
 Amount of Each Receipt this Period
 50.00
 Memo Item
 CONTRIBUTION

B. HOLTON, VIRGINIA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2312 RIVERHILL DR
 City VALDOSTA State GA Zip Code 31602-2108
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 475.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 03 / 2016
Transaction ID : SA11A.469171
 Amount of Each Receipt this Period
 25.00
 Memo Item
 CONTRIBUTION

C. HOMET, DOUG, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4180 CHESTNUT AVE
 City LONG BEACH State CA Zip Code 90807-1902
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 886.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 30 / 2016
Transaction ID : SA11A.464929
 Amount of Each Receipt this Period
 131.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	206.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1665 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
Team Ryan

A. HOMET, DOUG, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4180 CHESTNUT AVE
 City LONG BEACH State CA Zip Code 90807-1902
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 886.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 04 / 2016
Transaction ID : SA11A.470729
 Amount of Each Receipt this Period
 131.00
 Memo Item
 CONTRIBUTION

B. HOMMES, GERALD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 6180 LANEWOOD LANE
 City PLYMOUTH State MN Zip Code 55446-4543
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 750.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 03 / 2016
Transaction ID : SA11A.469175
 Amount of Each Receipt this Period
 500.00
 Memo Item
 CONTRIBUTION

C. HOOD, WILLIAM, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1919 MARSHALLFIELD LN.
 A
 City REDONDO BEACH State CA Zip Code 90278-4272
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 23 / 2016
Transaction ID : SA11A.446253
 Amount of Each Receipt this Period
 50.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	681.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1666 OF 4311
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. HOOD, WILLIAM, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 1919 MARSHALLFIELD LN.
A
City REDONDO BEACH State CA Zip Code 90278-4272
FEC ID number of contributing federal political committee. **C**
Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 500.00

Date of Receipt **10 / 23 / 2016**
Transaction ID : SA11A.446254
Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

B. HOOGLAND, LESTER, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 353 N COLONIAL STREET
City ZEELAND State MI Zip Code 49464-1123
FEC ID number of contributing federal political committee. **C**
Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 500.00

Date of Receipt **10 / 26 / 2016**
Transaction ID : SA11A.447729
Amount of Each Receipt this Period 500.00
 Memo Item CONTRIBUTION

C. HOOK, OLIVER, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 2308 LOMA PRIETA LANE
City MENLO PARK State CA Zip Code 94025-6717
FEC ID number of contributing federal political committee. **C**
Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
Receipt For: Primary General Other (specify)
Aggregate Year-to-Date ▼ 500.00

Date of Receipt **11 / 07 / 2016**
Transaction ID : SA11A.467740
Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 800.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1667 OF 4311
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. HOOKER, ALICE, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address PO BOX 2049
City ALBANY State TX Zip Code 76430-8001
FEC ID number of contributing federal political committee. **C**
Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 1000.00

Date of Receipt 11 / 02 / 2016
Transaction ID : SA11A.470029
Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

B. HOOKER, ALICE, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address PO BOX 2049
City ALBANY State TX Zip Code 76430-8001
FEC ID number of contributing federal political committee. **C**
Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 1000.00

Date of Receipt 11 / 02 / 2016
Transaction ID : SA11A.470032
Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

C. HOOKER, CLAUDE, L., COL,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 2301 CAMP DAVID STREET
City MESQUITE State TX Zip Code 75149-1921
FEC ID number of contributing federal political committee. **C**
Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
Receipt For: Primary General Other (specify)
Aggregate Year-to-Date ▼ 300.00

Date of Receipt 10 / 27 / 2016
Transaction ID : SA11A.452434
Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... 300.00
TOTAL This Period (last page this line number only).....

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1668 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. HOOKER, CLAUDE, L., COL,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 2301 CAMP DAVID STREET

City MESQUITE	State TX	Zip Code 75149-1921
------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
300.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	08	/	2016

Transaction ID : SA11A.468058

Amount of Each Receipt this Period
100.00

Memo Item CONTRIBUTION

B. HOOKER, ELLEN, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 4623 NASHWOOD

City DALLAS	State TX	Zip Code 75244-7732
----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
355.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	26	/	2016

Transaction ID : SA11A.454663

Amount of Each Receipt this Period
25.00

Memo Item CONTRIBUTION

C. HOOKER, ELLEN, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 4623 NASHWOOD

City DALLAS	State TX	Zip Code 75244-7732
----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
355.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	31	/	2016

Transaction ID : SA11A.458991

Amount of Each Receipt this Period
25.00

Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	150.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1669 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. HOOKER, ELLEN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4623 NASHWOOD
 City DALLAS State TX Zip Code 75244-7732
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 355.00

Date of Receipt **10 / 31 / 2016**
Transaction ID : SA11A.459214
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

B. HOOKER, ELLEN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4623 NASHWOOD
 City DALLAS State TX Zip Code 75244-7732
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 355.00

Date of Receipt **11 / 04 / 2016**
Transaction ID : SA11A.471756
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

C. HOOKER, ELLEN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4623 NASHWOOD
 City DALLAS State TX Zip Code 75244-7732
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 355.00

Date of Receipt **11 / 06 / 2016**
Transaction ID : SA11A.476747
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	75.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1670 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. HOOPER, JIM, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address P O BOX 548
 City FONTANA State CA Zip Code 92334-0548
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) AMER BOLT Occupation (for Individual) SALES
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 577.00

Date of Receipt
 11 / 06 / 2016
Transaction ID : SA11A.477517
 Amount of Each Receipt this Period 50.00
 Memo Item
 CONTRIBUTION

B. HOOPER, JIM, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address P O BOX 548
 City FONTANA State CA Zip Code 92334-0548
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) AMER BOLT Occupation (for Individual) SALES
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 577.00

Date of Receipt
 11 / 06 / 2016
Transaction ID : SA11A.477518
 Amount of Each Receipt this Period 50.00
 Memo Item
 CONTRIBUTION

C. HOOPES, JOHN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1430 SUGARTOWN ROAD
 City BERWYN State PA Zip Code 19312-1821
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) INFORMATION REQUESTED PER BEST EFFORTS Occupation (for Individual) INFORMATION REQUESTED PER BE
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt
 10 / 28 / 2016
Transaction ID : SA11A.454691
 Amount of Each Receipt this Period 1000.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 1100.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1671 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. HOOPER, JUDITH, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 132 THOMAS ROAD
 City MCMURRAY State PA Zip Code 15317-3629
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 325.00

Date of Receipt 10 / 21 / 2016
Transaction ID : SA11A.447110
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

B. HOOPER, JUDITH, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 132 THOMAS ROAD
 City MCMURRAY State PA Zip Code 15317-3629
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 325.00

Date of Receipt 10 / 27 / 2016
Transaction ID : SA11A.453351
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

C. HOOPER, JUDITH, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 132 THOMAS ROAD
 City MCMURRAY State PA Zip Code 15317-3629
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 325.00

Date of Receipt 10 / 28 / 2016
Transaction ID : SA11A.461367
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 75.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1672 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. HOOPER, JUDITH, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 132 THOMAS ROAD
 City MCMURRAY State PA Zip Code 15317-3629
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 325.00

Date of Receipt **11 / 02 / 2016**
Transaction ID : SA11A.469676
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

B. HOOPER, JUDITH, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 132 THOMAS ROAD
 City MCMURRAY State PA Zip Code 15317-3629
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 325.00

Date of Receipt **11 / 06 / 2016**
Transaction ID : SA11A.477378
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

C. HOOVEL, MARGARET, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2809 CALDWELL LANE
 City GENEVA State IL Zip Code 60134-4484
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 450.00

Date of Receipt **10 / 20 / 2016**
Transaction ID : SA11A.442392
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	75.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1673 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. HOOVEL, MARGARET, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2809 CALDWELL LANE
 City GENEVA State IL Zip Code 60134-4484
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 450.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 25 / 2016
Transaction ID : SA11A.448096
 Amount of Each Receipt this Period
 50.00
 Memo Item
 CONTRIBUTION

B. HOOVEL, MARGARET, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2809 CALDWELL LANE
 City GENEVA State IL Zip Code 60134-4484
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 450.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 28 / 2016
Transaction ID : SA11A.455385
 Amount of Each Receipt this Period
 25.00
 Memo Item
 CONTRIBUTION

C. HOPE, PHIL, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 55 COLONY PARK DR
 City SAVANNAH State GA Zip Code 31406-3714
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 360.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 03 / 2016
Transaction ID : SA11A.468884
 Amount of Each Receipt this Period
 25.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	100.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1674 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. HOPE, PHIL, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 55 COLONY PARK DR
 City SAVANNAH State GA Zip Code 31406-3714
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 360.00

Date of Receipt 11 / 06 / 2016
Transaction ID : SA11A.477324
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

B. HOPE, PHIL, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 55 COLONY PARK DR
 City SAVANNAH State GA Zip Code 31406-3714
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 360.00

Date of Receipt 11 / 07 / 2016
Transaction ID : SA11A.480289
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

C. HOPKINS, BRYANT, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3608 36TH ROAD N.
 City ARLINGTON State VA Zip Code 22207-4819
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) ENGINEER
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 685.00

Date of Receipt 10 / 25 / 2016
Transaction ID : SA11A.448665
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	150.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1675 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. HOPKINS, BRYANT, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3608 36TH ROAD N.
 City ARLINGTON State VA Zip Code 22207-4819
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) ENGINEER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 685.00

Date of Receipt 10 / 25 / 2016
Transaction ID : SA11A.448673
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

B. HOPKINS, BRYANT, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3608 36TH ROAD N.
 City ARLINGTON State VA Zip Code 22207-4819
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) ENGINEER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 685.00

Date of Receipt 10 / 25 / 2016
Transaction ID : SA11A.448675
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

C. HOPKINS, DALE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 703 CIRCLE DRIVE
 City TRENT WOODS State NC Zip Code 28562-7117
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 10 / 26 / 2016
Transaction ID : SA11A.449848
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	300.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1676 OF 4311
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. HOPPER, BILLY, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address P.O. BOX 353

City MENTONE	State TX	Zip Code 79754-0353
FEC ID number of contributing federal political committee. C		
Name of Employer (for Individual) NONE		Occupation (for Individual) RETIRED
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 300.00

Date of Receipt
10 / 28 / 2016
Transaction ID : SA11A.456116

Amount of Each Receipt this Period
100.00

Memo Item CONTRIBUTION

B. HOPPER, BILLY, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address P.O. BOX 353

City MENTONE	State TX	Zip Code 79754-0353
FEC ID number of contributing federal political committee. C		
Name of Employer (for Individual) NONE		Occupation (for Individual) RETIRED
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 300.00

Date of Receipt
11 / 04 / 2016
Transaction ID : SA11A.471274

Amount of Each Receipt this Period
100.00

Memo Item CONTRIBUTION

C. HOPPE, HERBERT, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 22701 LAKE ROAD
515A

City ROCKY RIVER	State OH	Zip Code 44116-1058
FEC ID number of contributing federal political committee. C		
Name of Employer (for Individual) NONE		Occupation (for Individual) RETIRED
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		Aggregate Year-to-Date ▼ 404.00

Date of Receipt
10 / 30 / 2016
Transaction ID : SA11A.460121

Amount of Each Receipt this Period
59.00

Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	259.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1677 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
Team Ryan

A. HORD, MARK, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 201 HIGH CANYON COURT
 City RICHARDSON State TX Zip Code 75080-2671
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) COMMERCIAL REAL ESTATE INVEST
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 10 / 21 / 2016
Transaction ID : SA11A.447079
 Amount of Each Receipt this Period 500.00
 Memo Item CONTRIBUTION

B. HORN, ALBERT, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 50 MOUNDS ROAD,APT 604 APT 604
 City SAN MATEO State CA Zip Code 94402-1292
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt 10 / 26 / 2016
Transaction ID : SA11A.447718
 Amount of Each Receipt this Period 150.00
 Memo Item CONTRIBUTION

C. HORN, BILL, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1502 S ENGLISH STATION RD
 City LOUISVILLE State KY Zip Code 40299-4814
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) PAUL D Occupation (for Individual) PAUL DAVIS RESTORATION
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 925.00

Date of Receipt 10 / 27 / 2016
Transaction ID : SA11A.453637
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	750.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1678 OF 4311
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. HORN, BILL, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1502 S ENGLISH STATION RD

City LOUISVILLE	State KY	Zip Code 40299-4814
--------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) PAUL D	Occupation (for Individual) PAUL DAVIS RESTORATION
---	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
925.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		27		2016

Transaction ID : SA11A.453646

Amount of Each Receipt this Period
100.00

Memo Item CONTRIBUTION

B. HORN, BILL, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1502 S ENGLISH STATION RD

City LOUISVILLE	State KY	Zip Code 40299-4814
--------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) PAUL D	Occupation (for Individual) PAUL DAVIS RESTORATION
---	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
925.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		31		2016

Transaction ID : SA11A.457850

Amount of Each Receipt this Period
25.00

Memo Item CONTRIBUTION

C. HORN, BILL, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1502 S ENGLISH STATION RD

City LOUISVILLE	State KY	Zip Code 40299-4814
--------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) PAUL D	Occupation (for Individual) PAUL DAVIS RESTORATION
---	---

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
925.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		31		2016

Transaction ID : SA11A.459182

Amount of Each Receipt this Period
100.00

Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	225.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1679 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. HORN, BILL, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1502 S ENGLISH STATION RD
 City LOUISVILLE State KY Zip Code 40299-4814
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) PAUL D Occupation (for Individual) PAUL DAVIS RESTORATION
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 925.00

Date of Receipt **11 / 04 / 2016**
Transaction ID : SA11A.473713
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

B. HORN, BILL, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1502 S ENGLISH STATION RD
 City LOUISVILLE State KY Zip Code 40299-4814
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) PAUL D Occupation (for Individual) PAUL DAVIS RESTORATION
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 925.00

Date of Receipt **11 / 06 / 2016**
Transaction ID : SA11A.477385
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

C. HORNBACK, CLYDE, V., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO BOX 908
 City KEMAH State TX Zip Code 77565-0908
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 900.00

Date of Receipt **11 / 10 / 2016**
Transaction ID : SA11A.468237
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	300.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1680 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. HORNBACK, CLYDE, V., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO BOX 908
 City KEMAH State TX Zip Code 77565-0908
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 900.00

Date of Receipt 11 / 28 / 2016
Transaction ID : SA11A.481107
 Amount of Each Receipt this Period 500.00
 Memo Item CONTRIBUTION

B. HORNBERGER, KATHLEEN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 14 AMUNDSEN LANE
 City NEW CITY State NY Zip Code 10956-1706
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 10 / 27 / 2016
Transaction ID : SA11A.452990
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

C. HORNBERGER, KATHLEEN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 14 AMUNDSEN LANE
 City NEW CITY State NY Zip Code 10956-1706
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 10 / 27 / 2016
Transaction ID : SA11A.452997
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 700.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1681 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. HORNER, DAVE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 925 ORCHID POINT WAY
 City VERO BEACH State FL Zip Code 32963-9518
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 850.00

Date of Receipt 10 / 30 / 2016
Transaction ID : SA11A.460040
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

B. HORNER, MICHAEL, H., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4818 FAIRLAWN DR
 City LA CANADA State CA Zip Code 91011-1702
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) TSC INC Occupation (for Individual) EXEC
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 450.00

Date of Receipt 10 / 31 / 2016
Transaction ID : SA11A.458429
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

C. HORNER, MICHAEL, H., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4818 FAIRLAWN DR
 City LA CANADA State CA Zip Code 91011-1702
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) TSC INC Occupation (for Individual) EXEC
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 450.00

Date of Receipt 10 / 31 / 2016
Transaction ID : SA11A.458435
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	350.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1682 OF 4311
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. HORNER, MICHAEL, H., MR.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 4818 FAIRLAWN DR

City LA CANADA	State CA	Zip Code 91011-1702
-------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) TSC INC	Occupation (for Individual) EXEC
--	-------------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
450.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		31		2016

Transaction ID : SA11A.458440

Amount of Each Receipt this Period
50.00

Memo Item
CONTRIBUTION

B. HORNER, MICHAEL, H., MR.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 4818 FAIRLAWN DR

City LA CANADA	State CA	Zip Code 91011-1702
-------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) TSC INC	Occupation (for Individual) EXEC
--	-------------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
450.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		30		2016

Transaction ID : SA11A.459524

Amount of Each Receipt this Period
50.00

Memo Item
CONTRIBUTION

C. HORSLEY, BRENT, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 9904 GLENROCK DRIVE

City LAS VEGAS	State NV	Zip Code 89134-6717
-------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) INFORMATION REQUESTED PER BEST EFFORTS	Occupation (for Individual) INFORMATION REQUESTED PER BEST EFFORTS
---	---

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		27		2016

Transaction ID : SA11A.452404

Amount of Each Receipt this Period
500.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	600.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1683 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. HORTON, WILLIAM, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 110 ROUND COVE RD
 City CHATHAM State MA Zip Code 02633-1245
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) DISABLED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 825.00

Date of Receipt 10 / 27 / 2016
Transaction ID : SA11A.453215
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

B. HORVATH, JUDITH, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1409 BURR OAK RD. 115A
 City HINSDALE State IL Zip Code 60521-2911
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 412.00

Date of Receipt 10 / 28 / 2016
Transaction ID : SA11A.456009
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

C. HORVATH, JUDITH, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1409 BURR OAK RD. 115A
 City HINSDALE State IL Zip Code 60521-2911
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 412.00

Date of Receipt 10 / 31 / 2016
Transaction ID : SA11A.457799
 Amount of Each Receipt this Period 30.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 155.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1684 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. HORVATH, JUDITH, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1409 BURR OAK RD.
 115A
 City HINSDALE State IL Zip Code 60521-2911
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 412.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 31 / 2016
Transaction ID : SA11A.457801
 Amount of Each Receipt this Period
 30.00
 Memo Item CONTRIBUTION

B. HORVATH, JUDITH, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1409 BURR OAK RD.
 115A
 City HINSDALE State IL Zip Code 60521-2911
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 412.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 04 / 2016
Transaction ID : SA11A.470726
 Amount of Each Receipt this Period
 25.00
 Memo Item CONTRIBUTION

C. HORVATH, JUDITH, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1409 BURR OAK RD.
 115A
 City HINSDALE State IL Zip Code 60521-2911
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 412.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 06 / 2016
Transaction ID : SA11A.477770
 Amount of Each Receipt this Period
 25.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	80.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1685 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
Team Ryan

A. HORVATH, JUDITH, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1409 BURR OAK RD.
 115A
 City HINSDALE State IL Zip Code 60521-2911
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 412.00

Date of Receipt 11 / 06 / 2016
Transaction ID : SA11A.477772
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

B. HORVATH, LINDA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2144 BOSTONCOURT
 UNIT C
 City INDIANAPOLIS State IN Zip Code 46228-3254
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 850.00

Date of Receipt 10 / 25 / 2016
Transaction ID : SA11A.451896
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

C. HORVATH, LINDA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2144 BOSTONCOURT
 UNIT C
 City INDIANAPOLIS State IN Zip Code 46228-3254
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 850.00

Date of Receipt 10 / 25 / 2016
Transaction ID : SA11A.451911
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	225.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1686 OF 4311
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. HORVATH, LINDA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2144 BOSTONCOURT
 UNIT C
 City INDIANAPOLIS State IN Zip Code 46228-3254
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 850.00

Date of Receipt 10 / 25 / 2016
Transaction ID : SA11A.451913
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

B. HORWATT, DAVID, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 10668 EASTBORNE AVE. NO. 207
 207
 City LOS ANGELES State CA Zip Code 90024-5979
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) GENERAL NETWORKS CORPORATION Occupation (for Individual) SALES
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 750.00

Date of Receipt 10 / 22 / 2016
Transaction ID : SA11A.449642
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

C. HORWATT, DAVID, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 10668 EASTBORNE AVE. NO. 207
 207
 City LOS ANGELES State CA Zip Code 90024-5979
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) GENERAL NETWORKS CORPORATION Occupation (for Individual) SALES
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 750.00

Date of Receipt 10 / 26 / 2016
Transaction ID : SA11A.451342
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 600.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 1687 OF 4311
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. HOSKINS, BERTHA, T., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2202 SPINNAKER COURT
 City RESTON State VA Zip Code 20191-4704
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1200.00

Date of Receipt **10 / 26 / 2016**
Transaction ID : SA11A.451267
 Amount of Each Receipt this Period 500.00
 Memo Item CONTRIBUTION

B. HOSSA, STEVE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2311 JANSSEN AVE
 City CHUCAGO State IL Zip Code 60614-3019
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) ICL Occupation (for Individual) OWNER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1500.00

Date of Receipt **10 / 21 / 2016**
Transaction ID : SA11A.444604
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

C. HOSSA, STEVE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2311 JANSSEN AVE
 City CHUCAGO State IL Zip Code 60614-3019
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) ICL Occupation (for Individual) OWNER
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 1500.00

Date of Receipt **11 / 04 / 2016**
Transaction ID : SA11A.472021
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶ 1000.00
TOTAL This Period (last page this line number only).....▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1688 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. HOSTETLER, CAROLYN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO BOX 1967

City NOKOMIS	State FL	Zip Code 34274-1967
-----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1000.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 24 / 2016

Transaction ID : SA11A.443827

Amount of Each Receipt this Period
1000.00

Memo Item
CONTRIBUTION

B. HOTCHKISS, JOHN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO BOX 479

City HOTCHKISS	State CO	Zip Code 81419-0479
-------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) SELF EMPLOYED	Occupation (for Individual) RANCHES
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 03 / 2016

Transaction ID : SA11A.465280

Amount of Each Receipt this Period
150.00

Memo Item
CONTRIBUTION

C. HOTCHKIS, PRESTON, B., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 125 E VICTORIA STREET
 STE L

City SANTA BARBARA	State CA	Zip Code 93101-6008
-----------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
1000.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 31 / 2016

Transaction ID : SA11A.457277

Amount of Each Receipt this Period
1000.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	2150.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1689 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. HOUGHAND, WILLIAM, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 122 POOLE RD
 City GAINESVILLE State TX Zip Code 76240-7807
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt **10 / 20 / 2016**
Transaction ID : SA11A.442449
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

B. HOUGHAND, WILLIAM, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 122 POOLE RD
 City GAINESVILLE State TX Zip Code 76240-7807
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt **11 / 04 / 2016**
Transaction ID : SA11A.472973
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

C. HOULIHAN, JOYCE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 10 CYPRESS POINT COURT
 City FRISCO State TX Zip Code 75034-6826
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 275.00

Date of Receipt **10 / 27 / 2016**
Transaction ID : SA11A.453128
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 200.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1690 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. HOUNTZ, MATTHEW, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 11403 N MOON RANCH PL
 City MARANA State AZ Zip Code 85658-4536
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) RESTAURANT OWNER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 275.00

Date of Receipt **11 / 04 / 2016**
Transaction ID : SA11A.473725
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

B. HOUSE, CHARLES, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1970 VISTA LAKES DRIVE
 City FLEMING ISLAND State FL Zip Code 32003-7312
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt **10 / 25 / 2016**
Transaction ID : SA11A.448920
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

C. HOUSER, CHARLES, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 223 HIDDEN HILLS DRIVE
 City GREENVILLE State SC Zip Code 29605-3267
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) GREEN CLOUD TECH. Occupation (for Individual) EXECUTIVE
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt **10 / 27 / 2016**
Transaction ID : SA11A.452979
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 175.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1691 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
Team Ryan

A. HOUSE, CHARLES, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1970 VISTA LAKES DRIVE
 City FLEMING ISLAND State FL Zip Code 32003-7312
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt
 11 / 04 / 2016
Transaction ID : SA11A.471178
 Amount of Each Receipt this Period
 50.00
 Memo Item
 CONTRIBUTION

B. HOUSTON, CAROLYN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 8955 CHIPITA PARK ROAD
 City CASCADE State CO Zip Code 80809-1402
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt
 11 / 04 / 2016
Transaction ID : SA11A.467507
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION

C. HOUSTON, RICHARD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 9843 WADING CRANE AVE.
 City MCCORDSVILLE State IN Zip Code 46055-9373
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) VA HOSPITAL Occupation (for Individual) PHYSICIAN
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 502.00

Date of Receipt
 10 / 21 / 2016
Transaction ID : SA11A.444569
 Amount of Each Receipt this Period
 50.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	200.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1692 OF 4311
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. HOUSTON, RICHARD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 9843 WADING CRANE AVE.
 City MCCORDSVILLE State IN Zip Code 46055-9373
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) VA HOSPITAL Occupation (for Individual) PHYSICIAN
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 502.00

Date of Receipt **10 / 25 / 2016**
Transaction ID : SA11A.451498
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

B. HOUSTON, RICHARD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 9843 WADING CRANE AVE.
 City MCCORDSVILLE State IN Zip Code 46055-9373
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) VA HOSPITAL Occupation (for Individual) PHYSICIAN
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 502.00

Date of Receipt **11 / 03 / 2016**
Transaction ID : SA11A.469351
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

C. HOUSTON, RICHARD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 9843 WADING CRANE AVE.
 City MCCORDSVILLE State IN Zip Code 46055-9373
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) VA HOSPITAL Occupation (for Individual) PHYSICIAN
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 502.00

Date of Receipt **11 / 04 / 2016**
Transaction ID : SA11A.472330
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	150.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1693 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. HOUSTON, SHIRLEY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1145 GRIMES RD
 City RICHMOND State IN Zip Code 47374-7374
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) HMD Occupation (for Individual) EXECUTIVE
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 11 / 04 / 2016
Transaction ID : SA11A.471875
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

B. HOVEY, JAMES, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4180 CUTLASS LN
 City NAPLES State FL Zip Code 34102-7941
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 17700.00

Date of Receipt 10 / 20 / 2016
Transaction ID : SA11A.433372
 Amount of Each Receipt this Period 10000.00
 Memo Item CONTRIBUTION

C. HOWARD, CHARLES, G., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO BOX 471
 City MORGANTOWN State KY Zip Code 42261-0471
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 755.00

Date of Receipt 10 / 24 / 2016
Transaction ID : SA11A.443743
 Amount of Each Receipt this Period 70.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶ 10120.00
TOTAL This Period (last page this line number only).....▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1694 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. HOWARD, CHARLES, G., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO BOX 471
 City MORGANTOWN State KY Zip Code 42261-0471
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 755.00

Date of Receipt 11 / 08 / 2016
Transaction ID : SA11A.467974
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

B. HOWARD, JOAN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1594 HERITAGE COURT
 City MELBOURNE State FL Zip Code 32940-6817
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 455.00

Date of Receipt 10 / 27 / 2016
Transaction ID : SA11A.453189
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

C. HOWARD-NORDAN, KAREN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 226 EAGLE POINT
 City HOUSTON State AL Zip Code 35572-2160
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 334.00

Date of Receipt 11 / 03 / 2016
Transaction ID : SA11A.468454
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	150.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1695 OF 4311
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. HOWARD, PAMELA, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address P.O. BOX 1505

City HENDERSON	State TX	Zip Code 75653-1505
-------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) SELF EMPLOYED	Occupation (for Individual) SELF EMPLOYED
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
230.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	26	/	2016

Transaction ID : SA11A.451223

Amount of Each Receipt this Period
30.00

Memo Item
CONTRIBUTION

B. HOWARD, PAMELA, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address P.O. BOX 1505

City HENDERSON	State TX	Zip Code 75653-1505
-------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) SELF EMPLOYED	Occupation (for Individual) SELF EMPLOYED
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
230.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	06	/	2016

Transaction ID : SA11A.480833

Amount of Each Receipt this Period
25.00

Memo Item
CONTRIBUTION

C. HOWARD, PATRICK, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1048 ENCINO ROW

City CORONADO	State CA	Zip Code 92118-2814
------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
659.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	20	/	2016

Transaction ID : SA11A.442297

Amount of Each Receipt this Period
50.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	105.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1696 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. HOWARD, PATRICK, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1048 ENCINO ROW
 City CORONADO State CA Zip Code 92118-2814
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 659.00

Date of Receipt 10 / 23 / 2016
Transaction ID : SA11A.446499
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

B. HOWARD, PATRICK, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1048 ENCINO ROW
 City CORONADO State CA Zip Code 92118-2814
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 659.00

Date of Receipt 10 / 30 / 2016
Transaction ID : SA11A.459663
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

C. HOWARD, PATRICK, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1048 ENCINO ROW
 City CORONADO State CA Zip Code 92118-2814
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 659.00

Date of Receipt 11 / 01 / 2016
Transaction ID : SA11A.462236
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 200.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1697 OF 4311
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. HOWARD, RANDAL, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address N5W31657 HUCKLEBERRY WAY S
 City DELAFIELD State WI Zip Code 53018-2833
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) FORRER BUSINESS INTERIORS Occupation (for Individual) PRESIDENT
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 31 / 2016
Transaction ID : SA11A.464214
 Amount of Each Receipt this Period
 250.00
 Memo Item
 CONTRIBUTION

B. HOWARD, ROBERT, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address A4106 CHESAPEAKE AVE
 City HAMPTON State VA Zip Code 23669-
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 29 / 2016
Transaction ID : SA11A.460518
 Amount of Each Receipt this Period
 250.00
 Memo Item
 CONTRIBUTION

C. HOWARD, SUSAN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 39 HIGHLAND AVE
 City MONMOUTH BEACH State NJ Zip Code 07750-1010
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 205.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 27 / 2016
Transaction ID : SA11A.456530
 Amount of Each Receipt this Period
 50.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	550.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1698 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. HOWARD, SUSAN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 39 HIGHLAND AVE
 City MONMOUTH BEACH State NJ Zip Code 07750-1010
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 205.00

Date of Receipt 10 / 31 / 2016
Transaction ID : SA11A.458612
 Amount of Each Receipt this Period 30.00
 Memo Item CONTRIBUTION

B. HOWARD, SUSAN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 39 HIGHLAND AVE
 City MONMOUTH BEACH State NJ Zip Code 07750-1010
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 205.00

Date of Receipt 10 / 31 / 2016
Transaction ID : SA11A.458629
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

C. HOWARD, SUSAN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 39 HIGHLAND AVE
 City MONMOUTH BEACH State NJ Zip Code 07750-1010
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 205.00

Date of Receipt 10 / 31 / 2016
Transaction ID : SA11A.458631
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶ 80.00
TOTAL This Period (last page this line number only).....▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1699 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. HOWARD, SUSAN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 39 HIGHLAND AVE
 City MONMOUTH BEACH State NJ Zip Code 07750-1010
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 205.00

Date of Receipt
 11 / 02 / 2016
Transaction ID : SA11A.466298
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

B. HOWARD, SUSAN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 39 HIGHLAND AVE
 City MONMOUTH BEACH State NJ Zip Code 07750-1010
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 205.00

Date of Receipt
 11 / 05 / 2016
Transaction ID : SA11A.478574
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

C. HOWARD, SUSAN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 39 HIGHLAND AVE
 City MONMOUTH BEACH State NJ Zip Code 07750-1010
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 205.00

Date of Receipt
 11 / 05 / 2016
Transaction ID : SA11A.478575
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 75.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1700 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. HOWE, CHARLES, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1101 FIRST ST #102
 City CORONADO State CA Zip Code 92118-1454
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 07 / 2016
Transaction ID : SA11A.480557
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION

B. HOWE, CHARLES, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1101 FIRST ST #102
 City CORONADO State CA Zip Code 92118-1454
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 07 / 2016
Transaction ID : SA11A.480591
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION

C. HOWE, CHARLES, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1101 FIRST ST #102
 City CORONADO State CA Zip Code 92118-1454
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 07 / 2016
Transaction ID : SA11A.480592
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	300.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1701 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. HOWELL, ALBERT, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1907 MILL POINTE DR. S. E.
 City MILL CREEK State WA Zip Code 98012-4819
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 350.00

Date of Receipt 10 / 31 / 2016
Transaction ID : SA11A.459169
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

B. HOWELL, ALBERT, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1907 MILL POINTE DR. S. E.
 City MILL CREEK State WA Zip Code 98012-4819
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 350.00

Date of Receipt 11 / 04 / 2016
Transaction ID : SA11A.471494
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

C. HOWELL, JAMES, A., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 830 MT. ROYAL AVE.
 City CUMBERLAND State MD Zip Code 21502-2621
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 430.00

Date of Receipt 10 / 25 / 2016
Transaction ID : SA11A.448629
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	150.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1702 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. HOWELL, JAMES, A., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 830 MT. ROYAL AVE.
 City CUMBERLAND State MD Zip Code 21502-2621
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 430.00

Date of Receipt 11 / 05 / 2016
Transaction ID : SA11A.478346
 Amount of Each Receipt this Period 30.00
 Memo Item CONTRIBUTION

B. HOYER, RICHARD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 15 PINE NEEDLE RD.
 City WAYLAND State MA Zip Code 01778-4415
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 600.00

Date of Receipt 10 / 31 / 2016
Transaction ID : SA11A.464100
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

C. HOYER, RICHARD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 15 PINE NEEDLE RD.
 City WAYLAND State MA Zip Code 01778-4415
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 600.00

Date of Receipt 11 / 02 / 2016
Transaction ID : SA11A.470192
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	230.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1703 OF 4311
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. HOYT, PETER, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 4 SILVER BLUFF WAY

City SAVANNAH	State GA	Zip Code 31411-2510
------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		20		2016

Transaction ID : SA11A.444842

Amount of Each Receipt this Period
500.00

Memo Item
CONTRIBUTION

B. HPBBS, MICHAEL, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 419 CAMERON STREET

City ALEXANDRIA	State VA	Zip Code 22314-3221
--------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
300.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		31		2016

Transaction ID : SA11A.463369

Amount of Each Receipt this Period
100.00

Memo Item
CONTRIBUTION

C. HREN, SUZANNE, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 10301 GROSVENOR PL
804

City ROCKVILLE	State MD	Zip Code 20852-4685
-------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) US NAVY	Occupation (for Individual) ARCHITECT
--	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		21		2016

Transaction ID : SA11A.444183

Amount of Each Receipt this Period
25.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	625.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1704 OF 4311
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. HREN, SUZANNE, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 10301 GROSVENOR PL
804

City ROCKVILLE State MD Zip Code 20852-4685

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) US NAVY Occupation (for Individual) ARCHITECT

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt 10 / 22 / 2016
Transaction ID : SA11A.446905

Amount of Each Receipt this Period 25.00

Memo Item CONTRIBUTION

B. HREN, SUZANNE, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 10301 GROSVENOR PL
804

City ROCKVILLE State MD Zip Code 20852-4685

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) US NAVY Occupation (for Individual) ARCHITECT

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt 10 / 27 / 2016
Transaction ID : SA11A.454005

Amount of Each Receipt this Period 25.00

Memo Item CONTRIBUTION

C. HREN, SUZANNE, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 10301 GROSVENOR PL
804

City ROCKVILLE State MD Zip Code 20852-4685

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) US NAVY Occupation (for Individual) ARCHITECT

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt 11 / 05 / 2016
Transaction ID : SA11A.478414

Amount of Each Receipt this Period 25.00

Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 75.00

TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1705 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
HRONEK, LOUIS, A., ,

Mailing Address **526 CLUB SIDE DRIVE**

City NAPLES	State FL	Zip Code 34110-6019
-----------------------	--------------------	-------------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
--	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
220.00

Date of Receipt
10 / 24 / 2016

Transaction ID : SA11A.446021

Amount of Each Receipt this Period
10.00

Memo Item CONTRIBUTION

B. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
HRONEK, LOUIS, A., ,

Mailing Address **526 CLUB SIDE DRIVE**

City NAPLES	State FL	Zip Code 34110-6019
-----------------------	--------------------	-------------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
--	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
220.00

Date of Receipt
11 / 01 / 2016

Transaction ID : SA11A.462970

Amount of Each Receipt this Period
10.00

Memo Item CONTRIBUTION

C. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
HRONEK, LOUIS, A., ,

Mailing Address **526 CLUB SIDE DRIVE**

City NAPLES	State FL	Zip Code 34110-6019
-----------------------	--------------------	-------------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
--	---

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
220.00

Date of Receipt
11 / 02 / 2016

Transaction ID : SA11A.465952

Amount of Each Receipt this Period
10.00

Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	30.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1706 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. HRONEK, LOUIS, A.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 526 CLUB SIDE DRIVE
 City NAPLES State FL Zip Code 34110-6019
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 220.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 07 / 2016
Transaction ID : SA11A.476581
 Amount of Each Receipt this Period
 10.00
 Memo Item
 CONTRIBUTION

B. HSU, SHERYL, J., MRS.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 107MUSTARD 297
 City IRVINE State CA Zip Code 92618-1044
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 26 / 2016
Transaction ID : SA11A.451350
 Amount of Each Receipt this Period
 30.00
 Memo Item
 CONTRIBUTION

C. HSU, SHERYL, J., MRS.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 107MUSTARD 297
 City IRVINE State CA Zip Code 92618-1044
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 04 / 2016
Transaction ID : SA11A.472526
 Amount of Each Receipt this Period
 15.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	55.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1707 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. HUANG, GLORIA, W., MS.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 77 ELLSWORTH TERRACE
 City GLEN ROCK State NJ Zip Code 07452-3705
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) CLARK HUANG, MD, PC Occupation (for Individual) ADMIN ASST
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 350.00

Date of Receipt 10 / 26 / 2016
Transaction ID : SA11A.450239
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

B. HUANG, SUE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 8533 AVON ST
 City UJAMAICA State NY Zip Code 11432-2303
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 1634.00

Date of Receipt 10 / 20 / 2016
Transaction ID : SA11A.442026
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

C. HUANG, SUE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 8533 AVON ST
 City UJAMAICA State NY Zip Code 11432-2303
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 1634.00

Date of Receipt 10 / 20 / 2016
Transaction ID : SA11A.442028
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶ 150.00
TOTAL This Period (last page this line number only).....▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1708 OF 4311
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name A. HUANG, SUE, , ,		Date of Receipt M M M / D D D / Y Y Y Y Y Y 10 / 25 / 2016
Mailing Address 8533 AVON ST		Transaction ID : SA11A.452182
City UJAMAICA	State NY	Zip Code 11432-2303
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 30.00
Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED	<input type="checkbox"/> Memo Item CONTRIBUTION
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1634.00	

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name B. HUANG, SUE, , ,		Date of Receipt M M M / D D D / Y Y Y Y Y Y 10 / 25 / 2016
Mailing Address 8533 AVON ST		Transaction ID : SA11A.452184
City UJAMAICA	State NY	Zip Code 11432-2303
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 30.00
Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED	<input type="checkbox"/> Memo Item CONTRIBUTION
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1634.00	

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name C. HUANG, SUE, , ,		Date of Receipt M M M / D D D / Y Y Y Y Y Y 10 / 25 / 2016
Mailing Address 8533 AVON ST		Transaction ID : SA11A.452188
City UJAMAICA	State NY	Zip Code 11432-2303
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 25.00
Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED	<input type="checkbox"/> Memo Item CONTRIBUTION
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Aggregate Year-to-Date ▼ 1634.00	

SUBTOTAL of Receipts This Page (optional).....▶	85.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1709 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
Team Ryan

A. HUANG, SUE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 8533 AVON ST
 City UJAMAICA State NY Zip Code 11432-2303
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1634.00

Date of Receipt 10 / 25 / 2016
Transaction ID : SA11A.452190
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

B. HUANG, SUE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 8533 AVON ST
 City UJAMAICA State NY Zip Code 11432-2303
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1634.00

Date of Receipt 10 / 30 / 2016
Transaction ID : SA11A.459575
 Amount of Each Receipt this Period 30.00
 Memo Item CONTRIBUTION

C. HUANG, SUE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 8533 AVON ST
 City UJAMAICA State NY Zip Code 11432-2303
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1634.00

Date of Receipt 10 / 30 / 2016
Transaction ID : SA11A.460008
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 105.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1710 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. HUANG, SUE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 8533 AVON ST
 City UJAMAICA State NY Zip Code 11432-2303
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1634.00

Date of Receipt 10 / 30 / 2016
Transaction ID : SA11A.460009
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

B. HUANG, SUE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 8533 AVON ST
 City UJAMAICA State NY Zip Code 11432-2303
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1634.00

Date of Receipt 10 / 30 / 2016
Transaction ID : SA11A.460027
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

C. HUANG, SUE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 8533 AVON ST
 City UJAMAICA State NY Zip Code 11432-2303
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1634.00

Date of Receipt 10 / 30 / 2016
Transaction ID : SA11A.460028
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶ 150.00
TOTAL This Period (last page this line number only).....▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1711 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. HUANG, SUE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 8533 AVON ST
 City UJAMAICA State NY Zip Code 11432-2303
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1634.00

Date of Receipt 11 / 02 / 2016
Transaction ID : SA11A.469577
 Amount of Each Receipt this Period 30.00
 Memo Item CONTRIBUTION

B. HUANG, SUE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 8533 AVON ST
 City UJAMAICA State NY Zip Code 11432-2303
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1634.00

Date of Receipt 11 / 02 / 2016
Transaction ID : SA11A.469582
 Amount of Each Receipt this Period 30.00
 Memo Item CONTRIBUTION

C. HUANG, SUE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 8533 AVON ST
 City UJAMAICA State NY Zip Code 11432-2303
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1634.00

Date of Receipt 11 / 02 / 2016
Transaction ID : SA11A.469639
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 85.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1712 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. HUANG, SUE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 8533 AVON ST
 City UJAMAICA State NY Zip Code 11432-2303
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1634.00

Date of Receipt 11 / 02 / 2016
Transaction ID : SA11A.469645
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

B. HUANG, SUE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 8533 AVON ST
 City UJAMAICA State NY Zip Code 11432-2303
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1634.00

Date of Receipt 11 / 04 / 2016
Transaction ID : SA11A.474092
 Amount of Each Receipt this Period 30.00
 Memo Item CONTRIBUTION

C. HUANG, SUE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 8533 AVON ST
 City UJAMAICA State NY Zip Code 11432-2303
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1634.00

Date of Receipt 11 / 06 / 2016
Transaction ID : SA11A.477639
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	80.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1713 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
Team Ryan

A. HUANG, SUE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 8533 AVON ST
 City UJAMAICA State NY Zip Code 11432-2303
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1634.00

Date of Receipt
 11 / 06 / 2016
Transaction ID : SA11A.477640
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

B. HUANG, SUE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 8533 AVON ST
 City UJAMAICA State NY Zip Code 11432-2303
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1634.00

Date of Receipt
 11 / 07 / 2016
Transaction ID : SA11A.479945
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

C. HUANG, SUE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 8533 AVON ST
 City UJAMAICA State NY Zip Code 11432-2303
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1634.00

Date of Receipt
 11 / 07 / 2016
Transaction ID : SA11A.479947
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	75.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1714 OF 4311
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. HUANG, SUE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 8533 AVON ST
 City UJAMAICA State NY Zip Code 11432-2303
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1634.00

Date of Receipt
 11 / 07 / 2016
Transaction ID : SA11A.480121
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

B. HUANG, SUE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 8533 AVON ST
 City UJAMAICA State NY Zip Code 11432-2303
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1634.00

Date of Receipt
 11 / 07 / 2016
Transaction ID : SA11A.480123
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

C. HUBACH, JOSEPH, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4311 W LAWTHER DRIVE
 City DALLAS State TX Zip Code 75214-2921
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 5400.00

Date of Receipt
 10 / 28 / 2016
Transaction ID : SA11A.454723
 Amount of Each Receipt this Period 5400.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 5450.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1715 OF 4311
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. HUBBARD, DORIS, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address **681 DEPTFORD AVE**

City DAYTON	State OH	Zip Code 45429-5940
-----------------------	--------------------	-------------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
--	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1080.00

Date of Receipt
10 / 31 / 2016

Transaction ID : SA11A.464021

Amount of Each Receipt this Period
50.00

Memo Item CONTRIBUTION

B. HUBBARD, DORIS, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address **681 DEPTFORD AVE**

City DAYTON	State OH	Zip Code 45429-5940
-----------------------	--------------------	-------------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
--	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1080.00

Date of Receipt
10 / 31 / 2016

Transaction ID : SA11A.464054

Amount of Each Receipt this Period
50.00

Memo Item CONTRIBUTION

C. HUBBARD, DORIS, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address **681 DEPTFORD AVE**

City DAYTON	State OH	Zip Code 45429-5940
-----------------------	--------------------	-------------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
--	---

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
1080.00

Date of Receipt
11 / 03 / 2016

Transaction ID : SA11A.468639

Amount of Each Receipt this Period
50.00

Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	150.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1716 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. HUBBARD, DORIS, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 681 DEPTFORD AVE
 City DAYTON State OH Zip Code 45429-5940
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1080.00

Date of Receipt 11 / 03 / 2016
Transaction ID : SA11A.468641
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

B. HUBBARD, DORIS, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 681 DEPTFORD AVE
 City DAYTON State OH Zip Code 45429-5940
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1080.00

Date of Receipt 11 / 03 / 2016
Transaction ID : SA11A.468646
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

C. HUBBARD, JOANNE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4401 DUNMORE ROAD
 City MARIETTA State GA Zip Code 30068-4224
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 350.00

Date of Receipt 10 / 28 / 2016
Transaction ID : SA11A.456297
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 200.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1717 OF 4311
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. HUBBARD, JOANNE, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 4401 DUNMORE ROAD

City MARIETTA	State GA	Zip Code 30068-4224
------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
350.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		28		2016

Transaction ID : SA11A.456298

Amount of Each Receipt this Period
50.00

Memo Item CONTRIBUTION

B. HUBBARD, JOANNE, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 4401 DUNMORE ROAD

City MARIETTA	State GA	Zip Code 30068-4224
------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
350.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11		04		2016

Transaction ID : SA11A.472813

Amount of Each Receipt this Period
50.00

Memo Item CONTRIBUTION

C. HUBELI, JAMES, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1355 ELKHART DRIVE

City ST. LOUIS	State MO	Zip Code 63135-1418
-------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
205.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		25		2016

Transaction ID : SA11A.451508

Amount of Each Receipt this Period
30.00

Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	130.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1718 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
Team Ryan

A. HUBELI, JAMES, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1355 ELKHART DRIVE
 City ST. LOUIS State MO Zip Code 63135-1418
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 205.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 31 / 2016
Transaction ID : SA11A.457654
 Amount of Each Receipt this Period
 25.00
 Memo Item
 CONTRIBUTION

B. HUBELI, JAMES, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1355 ELKHART DRIVE
 City ST. LOUIS State MO Zip Code 63135-1418
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 205.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 03 / 2016
Transaction ID : SA11A.468998
 Amount of Each Receipt this Period
 25.00
 Memo Item
 CONTRIBUTION

C. HUBELI, JAMES, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1355 ELKHART DRIVE
 City ST. LOUIS State MO Zip Code 63135-1418
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 205.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 05 / 2016
Transaction ID : SA11A.478485
 Amount of Each Receipt this Period
 25.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	75.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1719 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
Team Ryan

A. HUBER, CAROL, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 18108 BASKIN FARM DR.
 City WILDWOOD State MO Zip Code 63038-2609
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) GOTCHURBACK, LLC Occupation (for Individual) CONSULTANT
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 550.00

Date of Receipt 11 / 05 / 2016
Transaction ID : SA11A.478962
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

B. HUBER, CAROL, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 18108 BASKIN FARM DR.
 City WILDWOOD State MO Zip Code 63038-2609
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) GOTCHURBACK, LLC Occupation (for Individual) CONSULTANT
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 550.00

Date of Receipt 11 / 05 / 2016
Transaction ID : SA11A.478963
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

C. HUDSON, PEGGY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 820 BELLE MEADE ISLAND DRIVE
 City MIAMI State FL Zip Code 33138-5248
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NORWAND INTERNATIONAL Occupation (for Individual) CHARITY VOLUNTEER
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt 10 / 31 / 2016
Transaction ID : SA11A.463248
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	300.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1720 OF 4311
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
Team Ryan

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name A. HUDSON, PEGGY, , ,		Date of Receipt
Mailing Address 820 BELLE MEADE ISLAND DRIVE		<input type="text" value="10"/> / <input type="text" value="31"/> / <input type="text" value="2016"/>
City MIAMI	State FL	Zip Code 33138-5248
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		Transaction ID : SA11A.463249
Name of Employer (for Individual) NORWAND INTERNATIONAL		Occupation (for Individual) CHARITY VOLUNTEER
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼	Amount of Each Receipt this Period <input type="text" value="250.00"/>
<input type="checkbox"/> Memo Item CONTRIBUTION		

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name B. HUDSPETH, JEFFREY, , ,		Date of Receipt
Mailing Address 219 N LAFAYETTE STREET		<input type="text" value="10"/> / <input type="text" value="28"/> / <input type="text" value="2016"/>
City LAFAYETTE	State AL	Zip Code 36862-1723
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		Transaction ID : SA11A.456095
Name of Employer (for Individual) SELF		Occupation (for Individual) EMPLOYED
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼	Amount of Each Receipt this Period <input type="text" value="25.00"/>
<input type="checkbox"/> Memo Item CONTRIBUTION		

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name C. HUDSPETH, JEFFREY, , ,		Date of Receipt
Mailing Address 219 N LAFAYETTE STREET		<input type="text" value="11"/> / <input type="text" value="02"/> / <input type="text" value="2016"/>
City LAFAYETTE	State AL	Zip Code 36862-1723
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		Transaction ID : SA11A.469840
Name of Employer (for Individual) SELF		Occupation (for Individual) EMPLOYED
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Aggregate Year-to-Date ▼	Amount of Each Receipt this Period <input type="text" value="25.00"/>
<input type="checkbox"/> Memo Item CONTRIBUTION		

SUBTOTAL of Receipts This Page (optional).....	<input type="text" value="300.00"/>
TOTAL This Period (last page this line number only).....	<input type="text"/>

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1721 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
Team Ryan

A. HUDSPETH, JEFFREY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 219 N LAFAYETTE STREET
 City LAFAYETTE State AL Zip Code 36862-1723
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF Occupation (for Individual) EMPLOYED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 350.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 11 / 02 / 2016
Transaction ID : SA11A.469842
 Amount of Each Receipt this Period
 25.00
 Memo Item
 CONTRIBUTION

B. HUDSPETH, JEFFREY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 219 N LAFAYETTE STREET
 City LAFAYETTE State AL Zip Code 36862-1723
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF Occupation (for Individual) EMPLOYED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 350.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 11 / 04 / 2016
Transaction ID : SA11A.471352
 Amount of Each Receipt this Period
 25.00
 Memo Item
 CONTRIBUTION

C. HUDSPETH, JEFFREY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 219 N LAFAYETTE STREET
 City LAFAYETTE State AL Zip Code 36862-1723
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF Occupation (for Individual) EMPLOYED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 350.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 11 / 07 / 2016
Transaction ID : SA11A.474980
 Amount of Each Receipt this Period
 50.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	100.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1722 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
Team Ryan

A. HUDSPETH, JEFFREY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 219 N LAFAYETTE STREET
 City LAFAYETTE State AL Zip Code 36862-1723
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF Occupation (for Individual) EMPLOYED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 350.00

Date of Receipt 11 / 05 / 2016
Transaction ID : SA11A.479288
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

B. HUESING, JACQUELINE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4660 LADERA WAY
 City CARMICHAEL State CA Zip Code 95608-1574
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 380.00

Date of Receipt 10 / 25 / 2016
Transaction ID : SA11A.451436
 Amount of Each Receipt this Period 30.00
 Memo Item CONTRIBUTION

C. HUESING, JACQUELINE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4660 LADERA WAY
 City CARMICHAEL State CA Zip Code 95608-1574
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 380.00

Date of Receipt 10 / 31 / 2016
Transaction ID : SA11A.457456
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶ 105.00
TOTAL This Period (last page this line number only).....▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1723 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. HUESING, JACQUELINE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4660 LADERA WAY
 City CARMICHAEL State CA Zip Code 95608-1574
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 380.00

Date of Receipt 11 / 06 / 2016
Transaction ID : SA11A.477172
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

B. HUESTED, SHIRLEY, BURTON, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 789 HOLLY GROVE LANE
 City BRACEY State VA Zip Code 23919-1856
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 11 / 02 / 2016
Transaction ID : SA11A.464999
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

C. HUFFMAN, ROBERT, H., , III
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1033 SKOKIE BOULEVARD SUITE 470
 City NORTHBROOK State IL Zip Code 60062-4139
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RELATIVE VALVE PARTNERS Occupation (for Individual) MONEY MANAGER
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 50000.00

Date of Receipt 11 / 01 / 2016
Transaction ID : SA11A.461902
 Amount of Each Receipt this Period 50000.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	50125.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1724 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. HUGGINS, JAMES, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address RR 1. BOX 690
 City WATTS State OK Zip Code 74964-9715
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 24 / 2016
Transaction ID : SA11A.449190
 Amount of Each Receipt this Period
 250.00
 Memo Item
 CONTRIBUTION

B. HUGGINS, PETE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2007 WALNUT BLVD
 City ASHTABULA State OH Zip Code 44004-2613
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) ITEN INDUSTRIES Occupation (for Individual) MANAGER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 01 / 2016
Transaction ID : SA11A.467384
 Amount of Each Receipt this Period
 50.00
 Memo Item
 CONTRIBUTION

C. HUGGINS, PETE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2007 WALNUT BLVD
 City ASHTABULA State OH Zip Code 44004-2613
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) ITEN INDUSTRIES Occupation (for Individual) MANAGER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 01 / 2016
Transaction ID : SA11A.467385
 Amount of Each Receipt this Period
 50.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	350.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1725 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. HUGGINS, PETE, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 2007 WALNUT BLVD

City ASHTABULA	State OH	Zip Code 44004-2613
-------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) ITEN INDUSTRIES	Occupation (for Individual) MANAGER
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
500.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
11		04		2016

Transaction ID : SA11A.471847

Amount of Each Receipt this Period
50.00

Memo Item
CONTRIBUTION

B. HUGGINS, PETE, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 2007 WALNUT BLVD

City ASHTABULA	State OH	Zip Code 44004-2613
-------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) ITEN INDUSTRIES	Occupation (for Individual) MANAGER
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
500.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
11		04		2016

Transaction ID : SA11A.473442

Amount of Each Receipt this Period
50.00

Memo Item
CONTRIBUTION

C. HUGGINS, PETE, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 2007 WALNUT BLVD

City ASHTABULA	State OH	Zip Code 44004-2613
-------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) ITEN INDUSTRIES	Occupation (for Individual) MANAGER
--	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
500.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
11		07		2016

Transaction ID : SA11A.475196

Amount of Each Receipt this Period
100.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	200.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1726 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. HUGHES, BARRY, T., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO BOX 1030
 City JACKSONVILLE State TX Zip Code 75766-1030
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) HALBERT MILL CO Occupation (for Individual) MFG
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 10 / 28 / 2016
Transaction ID : SA11A.454693
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

B. HUGHES, INGA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3100 INDEPENDENCE PARKWAY SUITE 311-184
 City PLANO State TX Zip Code 75075-9152
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 10 / 24 / 2016
Transaction ID : SA11A.445759
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

C. HUGHES, JOHN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 711 CUTLASS
 City LAKEWAY State TX Zip Code 78734-4316
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 425.00

Date of Receipt 11 / 01 / 2016
Transaction ID : SA11A.462457
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	550.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1727 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. HUGHES, JOHN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 711 CUTLASS

City LAKEWAY	State TX	Zip Code 78734-4316
-----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
425.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 01 / 2016
Transaction ID : SA11A.462465

Amount of Each Receipt this Period
50.00

Memo Item
CONTRIBUTION

B. HUGHES, MICHAEL, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5809 GOVERNORS VIEW LANE

City ALEXANDRIA	State VA	Zip Code 22310-2356
--------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1750.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 21 / 2016
Transaction ID : SA11A.444123

Amount of Each Receipt this Period
250.00

Memo Item
CONTRIBUTION

C. HUGHES, MICHAEL, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5809 GOVERNORS VIEW LANE

City ALEXANDRIA	State VA	Zip Code 22310-2356
--------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
1750.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 26 / 2016
Transaction ID : SA11A.450022

Amount of Each Receipt this Period
100.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	400.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1728 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
Team Ryan

A. HUGHES, MICHAEL, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5809 GOVERNORS VIEW LANE
 City ALEXANDRIA State VA Zip Code 22310-2356
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1750.00

Date of Receipt 10 / 31 / 2016
Transaction ID : SA11A.458680
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

B. HUGHES, MICHAEL, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5809 GOVERNORS VIEW LANE
 City ALEXANDRIA State VA Zip Code 22310-2356
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1750.00

Date of Receipt 10 / 31 / 2016
Transaction ID : SA11A.458697
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

C. HUGHES, MICHELLE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 13005 CAMDEN CIRCLE
 City HUNTSVILLE State AL Zip Code 35803-3109
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) UNITED HEALTH GROUP Occupation (for Individual) PHARMACIST /PHARMACY MANAGER
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 10 / 30 / 2016
Transaction ID : SA11A.460037
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	150.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1729 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. HUGHES, MICHAEL, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5809 GOVERNORS VIEW LANE
 City ALEXANDRIA State VA Zip Code 22310-2356
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1750.00

Date of Receipt 11 / 02 / 2016
Transaction ID : SA11A.465843
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

B. HUGHES, MICHELLE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 13005 CAMDEN CIRCLE
 City HUNTSVILLE State AL Zip Code 35803-3109
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) UNITED HEALTH GROUP Occupation (for Individual) PHARMACIST /PHARMACY MANAGE
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 11 / 04 / 2016
Transaction ID : SA11A.471073
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

C. HUGHES, SHELBY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3015 GLENGARY ROAD
 City SANTA YNEZ State CA Zip Code 93460-9692
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) WOOD-CLAEYSSENS FDNT Occupation (for Individual) ACCOUNTANT
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 11 / 04 / 2016
Transaction ID : SA11A.479498
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	200.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1730 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
Team Ryan

A. HUGHES, THOMAS, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 911 KADEL COURT
 City GENESEO State IL Zip Code 61254-1189
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NA Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 10 / 29 / 2016
Transaction ID : SA11A.461139
 Amount of Each Receipt this Period
 50.00
 Memo Item
 CONTRIBUTION

B. HULL, ROBBI, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3804 PEAK LOOKOUT DR.
 City AUSTIN State TX Zip Code 78738-1725
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1200.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 10 / 31 / 2016
Transaction ID : SA11A.463588
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION

C. HULL, ROBBI, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3804 PEAK LOOKOUT DR.
 City AUSTIN State TX Zip Code 78738-1725
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 1200.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 10 / 31 / 2016
Transaction ID : SA11A.463592
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	250.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1731 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. HULSE, DARCEL, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO BOX 3598
 City ALPINE State WY Zip Code 83128-0598
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 3000.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 28 / 2016
Transaction ID : SA11A.455272
 Amount of Each Receipt this Period
 1000.00
 Memo Item
 CONTRIBUTION

B. HUMMEL, ROBERT, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 760 WHALERS WAY SUITE B102
 City FORT COLLINS State CO Zip Code 80525-3372
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 28 / 2016
Transaction ID : SA11A.454734
 Amount of Each Receipt this Period
 1000.00
 Memo Item
 CONTRIBUTION

C. HUMPHREY, PATRICIA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO BOX 1461
 City CONCORD State NH Zip Code 03302-1461
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 27 / 2016
Transaction ID : SA11A.456876
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	2100.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1732 OF 4311
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. HUMPHREY, PATRICIA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO BOX 1461
 City CONCORD State NH Zip Code 03302-1461
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 27 / 2016
Transaction ID : SA11A.456877
 Amount of Each Receipt this Period
 100.00
 Memo Item CONTRIBUTION

B. HUNSINGER, JANE, D., MRS.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 22 WEST HILLS ROAD
 City NEW CANAAN State CT Zip Code 06840-3024
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 06 / 2016
Transaction ID : SA11A.480896
 Amount of Each Receipt this Period
 100.00
 Memo Item CONTRIBUTION

C. HUNSINGER, JANE, D., MRS.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 22 WEST HILLS ROAD
 City NEW CANAAN State CT Zip Code 06840-3024
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 06 / 2016
Transaction ID : SA11A.480898
 Amount of Each Receipt this Period
 100.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	300.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1733 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
HUNT, ALVARO, T., DR.,

Mailing Address 302 CITRUS RD.

City RIVER RIDGE	State LA	Zip Code 70123-2043
---------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1500.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 26 / 2016

Transaction ID : SA11A.450633

Amount of Each Receipt this Period
250.00

Memo Item
CONTRIBUTION

B. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
HUNT, ALVARO, T., DR.,

Mailing Address 302 CITRUS RD.

City RIVER RIDGE	State LA	Zip Code 70123-2043
---------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1500.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 26 / 2016

Transaction ID : SA11A.450674

Amount of Each Receipt this Period
250.00

Memo Item
CONTRIBUTION

C. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
HUNT, ALVARO, T., DR.,

Mailing Address 302 CITRUS RD.

City RIVER RIDGE	State LA	Zip Code 70123-2043
---------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
1500.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 26 / 2016

Transaction ID : SA11A.450675

Amount of Each Receipt this Period
250.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	750.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1734 OF 4311
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. HUNT, DALLAS, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 312 25TH STREET WEST

City TIFTON	State GA	Zip Code 31794-
----------------	-------------	--------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) GM SERVICES, INC	Occupation (for Individual) MANAGEMENT
---	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
462.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		26		2016

Transaction ID : SA11A.454633

Amount of Each Receipt this Period
200.00

Memo Item CONTRIBUTION

B. HUNT, NORMA, K., ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 3900 EUCLID AVENUE

City DALLAS	State TX	Zip Code 75205-3104
----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) SELF	Occupation (for Individual) VINTNER
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
25400.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		24		2016

Transaction ID : SA11A.443872

Amount of Each Receipt this Period
10000.00

Memo Item CONTRIBUTION

C. HUNT, RICHARD, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1225 I ST NW STE 550

City WASHINGTON	State DC	Zip Code 20005-5993
--------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) INFORMATION REQUESTED PER BEST EFFORTS	Occupation (for Individual) INFORMATION REQUESTED PER BES
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
5000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		29		2016

Transaction ID : SA11A.454821

Amount of Each Receipt this Period
2500.00

Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	12700.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1735 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. HUNT, STEPHEN, M., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1401 S JOYCE ST APT 1401
 1401
 City ARLINGTON State VA Zip Code 22202-1883
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1350.00

Date of Receipt 10 / 27 / 2016
Transaction ID : SA11A.452801
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

B. HUNT, WOODY, L., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO BOX 12220
 City EL PASO State TX Zip Code 79913-0220
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) HUNT COMPANIES Occupation (for Individual) EXECUTIVE CHAIRMAN
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 61200.00

Date of Receipt 11 / 03 / 2016
Transaction ID : SA11A.465193
 Amount of Each Receipt this Period 22400.00
 Memo Item CONTRIBUTION

C. HUNTER, HOLLAND, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2360 YUCCA DR
 City CAMARILLO State CA Zip Code 93012-8250
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) ST. AUGUSTINE ACADEMY Occupation (for Individual) TEACHER
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 600.00

Date of Receipt 10 / 22 / 2016
Transaction ID : SA11A.446843
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	22750.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1736 OF 4311		
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14	<input type="checkbox"/> 11c <input type="checkbox"/> 15	<input type="checkbox"/> 12 <input type="checkbox"/> 16

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NAME OF COMMITTEE (In Full)
Team Ryan

A. HUNTER, HOLLAND, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2360 YUCCA DR
 City CAMARILLO State CA Zip Code 93012-8250
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) ST. AUGUSTINE ACADEMY Occupation (for Individual) TEACHER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 600.00

Date of Receipt 11 / 04 / 2016
Transaction ID : SA11A.471914
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

B. HUNTER, JERRY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4545 FOREST PARK AVENUE APT. 318
 City ST. LOUIS State MO Zip Code 63108-2172
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) BRYAN CAVE LLP Occupation (for Individual) ATTORNEY
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 10 / 31 / 2016
Transaction ID : SA11A.463201
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

C. HUNTINGTON, DEE, H., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5901 E IRISH PLACE
 City CENTENNIAL State CO Zip Code 80112-2467
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) HOMEMAKER
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 240.00

Date of Receipt 11 / 04 / 2016
Transaction ID : SA11A.467450
 Amount of Each Receipt this Period 120.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	470.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1737 OF 4311
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. HUNTLEY, RICHARD, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address **PO BOX 327**

City NORTHPORT	State NY	Zip Code 11768-0327
--------------------------	--------------------	-------------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
--	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **904.00**

Date of Receipt
10 / 30 / 2016

Transaction ID : SA11A.464856

Amount of Each Receipt this Period
452.00

Memo Item CONTRIBUTION

B. HUNTLEY, RICHARD, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address **PO BOX 327**

City NORTHPORT	State NY	Zip Code 11768-0327
--------------------------	--------------------	-------------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
--	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **904.00**

Date of Receipt
10 / 30 / 2016

Transaction ID : SA11A.464927

Amount of Each Receipt this Period
113.00

Memo Item CONTRIBUTION

C. HUNTLEY, RICHARD, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address **PO BOX 327**

City NORTHPORT	State NY	Zip Code 11768-0327
--------------------------	--------------------	-------------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
--	---

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼ **904.00**

Date of Receipt
11 / 04 / 2016

Transaction ID : SA11A.473801

Amount of Each Receipt this Period
113.00

Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	678.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1738 OF 4311
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. HURD, ROGER, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 5670 SATINWOOD COURT

City JUPITER	State FL	Zip Code 33458-7927
-----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) HURD, HORVATH & ROSS, P.A.	Occupation (for Individual) ATTORNEY
---	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
450.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		31		2016

Transaction ID : SA11A.458831

Amount of Each Receipt this Period
100.00

Memo Item
CONTRIBUTION

B. HURNI, STEPHEN, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 308 CRESTMONT STREET

City PEN ARGYL	State PA	Zip Code 18072-9680
-------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) DIVERSIFIED INSURANCE SERVICES, INC.	Occupation (for Individual) SALES/SERVICE
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		31		2016

Transaction ID : SA11A.463230

Amount of Each Receipt this Period
250.00

Memo Item
CONTRIBUTION

C. HURST, CHARLES, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 4398 S. DE WOLF AVE

City DEL REY	State CA	Zip Code 93616-9721
-----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
350.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		25		2016

Transaction ID : SA11A.448202

Amount of Each Receipt this Period
100.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	450.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1739 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. HURST, CHARLES, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4398 S. DE WOLF AVE
 City DEL REY State CA Zip Code 93616-9721
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 350.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 06 / 2016
Transaction ID : SA11A.477212
 Amount of Each Receipt this Period
 50.00
 Memo Item
 CONTRIBUTION

B. HURST, CHARLES, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4398 S. DE WOLF AVE
 City DEL REY State CA Zip Code 93616-9721
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 350.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 05 / 2016
Transaction ID : SA11A.478801
 Amount of Each Receipt this Period
 50.00
 Memo Item
 CONTRIBUTION

C. HURST, CHARLES, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4398 S. DE WOLF AVE
 City DEL REY State CA Zip Code 93616-9721
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 350.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 07 / 2016
Transaction ID : SA11A.479975
 Amount of Each Receipt this Period
 50.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	150.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1740 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
Team Ryan

A. HURST, LINDA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 8 THORNE PLACE
 215
 City RYE State NY Zip Code 10580-2636
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 275.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 28 / 2016
Transaction ID : SA11A.456283
 Amount of Each Receipt this Period
 50.00
 Memo Item
 CONTRIBUTION

B. HURST, LINDA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 8 THORNE PLACE
 215
 City RYE State NY Zip Code 10580-2636
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 275.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 04 / 2016
Transaction ID : SA11A.470711
 Amount of Each Receipt this Period
 50.00
 Memo Item
 CONTRIBUTION

C. HURST, R, DON, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1320 WOOD WAY
 City EDMOND State OK Zip Code 73034-2802
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 350.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 25 / 2016
Transaction ID : SA11A.448091
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	200.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1741 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. HURST, R, DON, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1320 WOOD WAY
 City EDMOND State OK Zip Code 73034-2802
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 350.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 27 / 2016
Transaction ID : SA11A.453911
 Amount of Each Receipt this Period
 50.00
 Memo Item
 CONTRIBUTION

B. HURST, R, DON, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1320 WOOD WAY
 City EDMOND State OK Zip Code 73034-2802
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 350.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 31 / 2016
Transaction ID : SA11A.458397
 Amount of Each Receipt this Period
 25.00
 Memo Item
 CONTRIBUTION

C. HURST, R, DON, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1320 WOOD WAY
 City EDMOND State OK Zip Code 73034-2802
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 350.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 31 / 2016
Transaction ID : SA11A.458399
 Amount of Each Receipt this Period
 25.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	100.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1742 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. HURT, GREGORY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 162 S RANCHO SANTA FE RD
 City SAN MARCOS State CA Zip Code 92078-2502
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) SAN MARCOS DENTAL CENTER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt **11 / 04 / 2016**
Transaction ID : SA11A.471894
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

B. HURTADO, GUILLERMO, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 111 SHELLEY AVE F
 City CAMPBELL State CA Zip Code 95008-7078
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) COBHAM Occupation (for Individual) THECNICAL ENGINEER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 427.00

Date of Receipt **10 / 26 / 2016**
Transaction ID : SA11A.451020
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

C. HURTADO, GUILLERMO, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 111 SHELLEY AVE F
 City CAMPBELL State CA Zip Code 95008-7078
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) COBHAM Occupation (for Individual) THECNICAL ENGINEER
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 427.00

Date of Receipt **11 / 04 / 2016**
Transaction ID : SA11A.471831
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	150.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1743 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
Team Ryan

A. HURTADO, GUILLERMO, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 111 SHELLEY AVE
 F
 City CAMPBELL State CA Zip Code 95008-7078
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) COBHAM Occupation (for Individual) THECNICAL ENGINEER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 427.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 06 / 2016
Transaction ID : SA11A.477967
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION

B. HUSBY, PAUL, C., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 80 LA BARRANCA DRIVE
 City SEDONA State AZ Zip Code 86351-6936
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 2425.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 27 / 2016
Transaction ID : SA11A.453436
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION

C. HUSBY, PAUL, C., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 80 LA BARRANCA DRIVE
 City SEDONA State AZ Zip Code 86351-6936
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 2425.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 02 / 2016
Transaction ID : SA11A.466503
 Amount of Each Receipt this Period
 250.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	450.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1744 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. HUSBY, PAUL, C., MR.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 80 LA BARRANCA DRIVE

City SEDONA	State AZ	Zip Code 86351-6936
----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
2425.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	03	/	2016

Transaction ID : SA11A.469157

Amount of Each Receipt this Period
250.00

Memo Item CONTRIBUTION

B. HUSBY, PAUL, C., MR.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 80 LA BARRANCA DRIVE

City SEDONA	State AZ	Zip Code 86351-6936
----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
2425.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	07	/	2016

Transaction ID : SA11A.480242

Amount of Each Receipt this Period
100.00

Memo Item CONTRIBUTION

C. HUSEBY, SONJA, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 3197 WESTHILL DRIVE

City WAUSAU	State WI	Zip Code 54401-3796
----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
325.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	02	/	2016

Transaction ID : SA11A.466207

Amount of Each Receipt this Period
25.00

Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	375.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1745 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. HUSEBY, SONJA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3197 WESTHILL DRIVE
 City WAUSAU State WI Zip Code 54401-3796
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 325.00

Date of Receipt
 11 / 07 / 2016
Transaction ID : SA11A.475591
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

B. HUSEBY, SONJA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3197 WESTHILL DRIVE
 City WAUSAU State WI Zip Code 54401-3796
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 325.00

Date of Receipt
 11 / 07 / 2016
Transaction ID : SA11A.475613
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

C. HUSEBY, SONJA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3197 WESTHILL DRIVE
 City WAUSAU State WI Zip Code 54401-3796
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 325.00

Date of Receipt
 11 / 07 / 2016
Transaction ID : SA11A.475614
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶ 150.00
TOTAL This Period (last page this line number only).....▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1746 OF 4311
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. HUTCHINSON, DICK, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address **9 MONTGOMERY PARKWAY**

City BRANFORD	State CT	Zip Code 06405-5114
-------------------------	--------------------	-------------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) INFORMATION REQUESTED PER BEST EFFORTS	Occupation (for Individual) INFORMATION REQUESTED PER BE
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
300.00

Date of Receipt
11 / 08 / 2016

Transaction ID : SA11A.468082

Amount of Each Receipt this Period
150.00

Memo Item
CONTRIBUTION

B. HUTCHISON, ELAINE, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address **4543 E. ANAHEIM STREET**

City LONG BEACH	State CA	Zip Code 90804-3119
---------------------------	--------------------	-------------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) PARAGON EQUITIES	Occupation (for Individual) MANAGEMENT
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1500.00

Date of Receipt
10 / 20 / 2016

Transaction ID : SA11A.442311

Amount of Each Receipt this Period
250.00

Memo Item
CONTRIBUTION

C. HUTCHISON, ELAINE, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address **4543 E. ANAHEIM STREET**

City LONG BEACH	State CA	Zip Code 90804-3119
---------------------------	--------------------	-------------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) PARAGON EQUITIES	Occupation (for Individual) MANAGEMENT
--	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
1500.00

Date of Receipt
11 / 03 / 2016

Transaction ID : SA11A.469319

Amount of Each Receipt this Period
250.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	650.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1747 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. HUTCHISON, ELAINE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4543 E. ANAHEIM STREET
 City LONG BEACH State CA Zip Code 90804-3119
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) PARAGON EQUITIES Occupation (for Individual) MANAGEMENT
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1500.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 04 / 2016
Transaction ID : SA11A.473248
 Amount of Each Receipt this Period
 250.00
 Memo Item
 CONTRIBUTION

B. HUTCHINSON, F, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 255 PARTRIDGE BEND
 City POWELL State OH Zip Code 43065-8730
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 25 / 2016
Transaction ID : SA11A.447997
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION

C. HUTCHINSON, F, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 255 PARTRIDGE BEND
 City POWELL State OH Zip Code 43065-8730
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 08 / 2016
Transaction ID : SA11A.480977
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	450.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1748 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name A. HUTCHEN, PAUL, D., ,		Date of Receipt M M / D D / Y Y Y Y Y Y 11 / 11 / 2016 Transaction ID : SA11A.468434
Mailing Address 200 E 74TH ST 7TH FL #7C		Amount of Each Receipt this Period 10000.00
City NEW YORK	State NY	Zip Code 10021-3606
FEC ID number of contributing federal political committee. C		<input type="checkbox"/> Memo Item CONTRIBUTION
Name of Employer (for Individual) BANK OF AMERICA	Occupation (for Individual) FINANCIAL ADVISOR	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 10000.00	

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name B. HUTH, MIRIAM, B., MISS,		Date of Receipt M M / D D / Y Y Y Y Y Y 11 / 01 / 2016 Transaction ID : SA11A.461862
Mailing Address 475 FOURTH FAIRWAY DR R.1		Amount of Each Receipt this Period 500.00
City ROSWELL	State GA	Zip Code 30076-3565
FEC ID number of contributing federal political committee. C		<input type="checkbox"/> Memo Item CONTRIBUTION
Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 4564.00	

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name C. HUTH, MIRIAM, B., MISS,		Date of Receipt M M / D D / Y Y Y Y Y Y 11 / 08 / 2016 Transaction ID : SA11A.468061
Mailing Address 475 FOURTH FAIRWAY DR R.1		Amount of Each Receipt this Period 100.00
City ROSWELL	State GA	Zip Code 30076-3565
FEC ID number of contributing federal political committee. C		<input type="checkbox"/> Memo Item CONTRIBUTION
Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Aggregate Year-to-Date ▼ 4564.00	

SUBTOTAL of Receipts This Page (optional).....▶	10600.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 1749 OF 4311
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. HUTSENPILLER, MICHAEL, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 13647 GATEWAY DR

City VICTORVILLE	State CA	Zip Code 92392-8324
---------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) MIKE HUTSENPILLER D.V.M.	Occupation (for Individual) DOCTOR VETERINARY MEDICINE
---	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	04	/	2016

Transaction ID : SA11A.472559

Amount of Each Receipt this Period
100.00

Memo Item
CONTRIBUTION

B. HWANG, Y., C., ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 12 KIWI PATH

City LIVERPOOL	State NY	Zip Code 13090-3304
-------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) INFORMATION REQUESTED PER BEST EFFORTS	Occupation (for Individual) INFORMATION REQUESTED PER BE
---	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
210.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	03	/	2016

Transaction ID : SA11A.465488

Amount of Each Receipt this Period
50.00

Memo Item
CONTRIBUTION

C. HYDE, PETER, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 6922 WOODSTREAM TERRACE

City SEABROOK	State MD	Zip Code 20706-2144
------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
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Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
600.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	04	/	2016

Transaction ID : SA11A.472956

Amount of Each Receipt this Period
50.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	200.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 1750 OF 4311
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. HYDUKE, STANLEY, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 59 GULF STREAM COURT

City LAS VEGAS	State NV	Zip Code 89113-1355
-------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) ALDEC, INC.	Occupation (for Individual) GENERAL MANAGER/OWNER
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
900.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		28		2016

Transaction ID : SA11A.456002

Amount of Each Receipt this Period
300.00

Memo Item
CONTRIBUTION

B. HYDUKE, STANLEY, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 59 GULF STREAM COURT

City LAS VEGAS	State NV	Zip Code 89113-1355
-------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) ALDEC, INC.	Occupation (for Individual) GENERAL MANAGER/OWNER
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
900.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11		04		2016

Transaction ID : SA11A.472958

Amount of Each Receipt this Period
300.00

Memo Item
CONTRIBUTION

C. HYMA, MARK, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 8530 LA MESA BLVD SUITE 306

City LA MESA	State CA	Zip Code 91942-0967
-----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) PFS WEALTH ADVISORS, INC	Occupation (for Individual) FINANCIAL ADVISOR
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
350.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11		07		2016

Transaction ID : SA11A.476208

Amount of Each Receipt this Period
100.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	700.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1751 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. IACOBONI, STEPHEN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 18124 WEDGE PARKWAY #11
 City RENO State NV Zip Code 89511-8134
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 900.00

Date of Receipt 10 / 27 / 2016
Transaction ID : SA11A.454224
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

B. IANNUCCI, MADELINE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 343 VASSAR AVENUE
 City SWARTHMORE State PA Zip Code 19081-2018
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 11 / 01 / 2016
Transaction ID : SA11A.462934
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

C. ICE, LANNY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1311 S MURRAY AVE
 City MONAHANS State TX Zip Code 79756-6305
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 800.00

Date of Receipt 10 / 26 / 2016
Transaction ID : SA11A.451098
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	450.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1752 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
Team Ryan

A. ICE, LANNY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1311 S MURRAY AVE
 City MONAHANS State TX Zip Code 79756-6305
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 800.00

Date of Receipt 11 / 04 / 2016
Transaction ID : SA11A.472700
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

B. IDLER, TODD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1210 200 ST.
 City IONIA State IA Zip Code 50645-9484
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) ACCURATE GEAR AND MACHINE Occupation (for Individual) PROGRAMMER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 11 / 02 / 2016
Transaction ID : SA11A.469580
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

C. INGLIS, WILLIAM, H., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 6175 WICKER BASKET CT
 City COLUMBIA State MD Zip Code 21044-3609
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 600.00

Date of Receipt 10 / 21 / 2016
Transaction ID : SA11A.444188
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	375.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1753 OF 4311
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
Team Ryan

A. INGLIS, WILLIAM, H., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 6175 WICKER BASKET CT
 City COLUMBIA State MD Zip Code 21044-3609
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 600.00

Date of Receipt 10 / 24 / 2016
Transaction ID : SA11A.445920
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

B. INGLIS, WILLIAM, H., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 6175 WICKER BASKET CT
 City COLUMBIA State MD Zip Code 21044-3609
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 600.00

Date of Receipt 10 / 27 / 2016
Transaction ID : SA11A.452545
 Amount of Each Receipt this Period 30.00
 Memo Item CONTRIBUTION

C. INGLIS, WILLIAM, H., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 6175 WICKER BASKET CT
 City COLUMBIA State MD Zip Code 21044-3609
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 600.00

Date of Receipt 10 / 28 / 2016
Transaction ID : SA11A.455576
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶ 80.00
TOTAL This Period (last page this line number only).....▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1754 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. INGLIS, WILLIAM, H., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 6175 WICKER BASKET CT
 City COLUMBIA State MD Zip Code 21044-3609
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 600.00

Date of Receipt 11 / 01 / 2016
Transaction ID : SA11A.462254
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

B. INGLIS, WILLIAM, H., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 6175 WICKER BASKET CT
 City COLUMBIA State MD Zip Code 21044-3609
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 600.00

Date of Receipt 11 / 07 / 2016
Transaction ID : SA11A.475150
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

C. INGLIS, WILLIAM, H., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 6175 WICKER BASKET CT
 City COLUMBIA State MD Zip Code 21044-3609
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 600.00

Date of Receipt 11 / 06 / 2016
Transaction ID : SA11A.478238
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 75.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1755 OF 4311
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
Team Ryan

A. INMAN, WILLIAM, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1600 BROADWAY
 City DENVER State CO Zip Code 80202-4927
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 5095.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 04 / 2016
Transaction ID : SA11A.472719
 Amount of Each Receipt this Period
 30.00
 Memo Item
 CONTRIBUTION

B. INSKEEP, WILLARD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1002 IRIS DRIVE
 City STERLING State CO Zip Code 80751-4733
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) INVESTMENTS
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 26 / 2016
Transaction ID : SA11A.447625
 Amount of Each Receipt this Period
 250.00
 Memo Item
 CONTRIBUTION

C. IOSIVAS, MIHAI, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 239 ANAPALAU PLACE
 City HONOLULU State HI Zip Code 96825-1835
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) TORA TRADING SERVICES Occupation (for Individual) ENGINEER
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 550.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 04 / 2016
Transaction ID : SA11A.472704
 Amount of Each Receipt this Period
 50.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	330.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1756 OF 4311
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. IRACKI, DANIEL, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1341 REDFERN DR.

City PITTSBURGH	State PA	Zip Code 15241-2932
--------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) VITAS HEALTHCARE	Occupation (for Individual) PHYSICIAN
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
225.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		24		2016

Transaction ID : SA11A.445689

Amount of Each Receipt this Period
25.00

Memo Item
CONTRIBUTION

B. IRACKI, DANIEL, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1341 REDFERN DR.

City PITTSBURGH	State PA	Zip Code 15241-2932
--------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) VITAS HEALTHCARE	Occupation (for Individual) PHYSICIAN
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
225.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		24		2016

Transaction ID : SA11A.445690

Amount of Each Receipt this Period
25.00

Memo Item
CONTRIBUTION

C. IRACKI, DANIEL, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1341 REDFERN DR.

City PITTSBURGH	State PA	Zip Code 15241-2932
--------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) VITAS HEALTHCARE	Occupation (for Individual) PHYSICIAN
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
225.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11		07		2016

Transaction ID : SA11A.474682

Amount of Each Receipt this Period
25.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	75.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1757 OF 4311
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. IRACKI, DANIEL, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1341 REDFERN DR.

City PITTSBURGH	State PA	Zip Code 15241-2932
--------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) VITAS HEALTHCARE	Occupation (for Individual) PHYSICIAN
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
225.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	07	/	2016

Transaction ID : SA11A.474684

Amount of Each Receipt this Period
25.00

Memo Item
CONTRIBUTION

B. IRBY, CHARLES, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 4027 HILLSBORO PIKE
SUITE 803

City NASHVILLE	State TN	Zip Code 37215-2783
-------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) IRBY INVESTMENTS, LLC	Occupation (for Individual) INVESTOR
--	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
4000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	23	/	2016

Transaction ID : SA11A.446545

Amount of Each Receipt this Period
1000.00

Memo Item
CONTRIBUTION

C. IRBY, CHARLES, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 4027 HILLSBORO PIKE
SUITE 803

City NASHVILLE	State TN	Zip Code 37215-2783
-------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) IRBY INVESTMENTS, LLC	Occupation (for Individual) INVESTOR
--	---

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
4000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	04	/	2016

Transaction ID : SA11A.471916

Amount of Each Receipt this Period
1000.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	2025.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1758 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. IRVINE, OWEN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO BOX 48819
 City SAINT PETERSBURG State FL Zip Code 33743-8819
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 10 / 25 / 2016
Transaction ID : SA11A.452062
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

B. IRWIN, SANDRA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1180 SHENANDOAH ROAD
 City SAN MARINO State CA Zip Code 91108-1040
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 230.00

Date of Receipt 10 / 31 / 2016
Transaction ID : SA11A.457729
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

C. IRWIN, SANDRA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1180 SHENANDOAH ROAD
 City SAN MARINO State CA Zip Code 91108-1040
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 230.00

Date of Receipt 11 / 02 / 2016
Transaction ID : SA11A.470048
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	300.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1759 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
Team Ryan

A. IRWIN, SANDRA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1180 SHENANDOAH ROAD
 City SAN MARINO State CA Zip Code 91108-1040
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 230.00

Date of Receipt
 11 / 07 / 2016
Transaction ID : SA11A.480517
 Amount of Each Receipt this Period
 25.00
 Memo Item
 CONTRIBUTION

B. ISHIDA, TAKUYA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 8209 RENNES COURT
 City LAS VEGAS State NV Zip Code 89131-4322
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) FAN OUT CO LTD Occupation (for Individual) PRESIDENT
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 6000.00

Date of Receipt
 11 / 07 / 2016
Transaction ID : SA11A.467885
 Amount of Each Receipt this Period
 3000.00
 Memo Item
 CONTRIBUTION

C. ISON, GEORGE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 469 SCENIC DR.
 City SOUTH PITTSBURG State TN Zip Code 37380-7283
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 566.00

Date of Receipt
 11 / 05 / 2016
Transaction ID : SA11A.478680
 Amount of Each Receipt this Period
 25.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	3050.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1760 OF 4311
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. ISON, GEORGE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 469 SCENIC DR.
 City SOUTH PITTSBURG State TN Zip Code 37380-7283
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 566.00

Date of Receipt 11 / 07 / 2016
Transaction ID : SA11A.480153
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

B. ISON, GEORGE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 469 SCENIC DR.
 City SOUTH PITTSBURG State TN Zip Code 37380-7283
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 566.00

Date of Receipt 11 / 07 / 2016
Transaction ID : SA11A.480154
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

C. ISOTALO, LEO, P., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 90 PEACOCK DRIVW
 City SAN RAFAEL State CA Zip Code 94901-1505
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 1950.00

Date of Receipt 10 / 25 / 2016
Transaction ID : SA11A.451682
 Amount of Each Receipt this Period 1000.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶ 1050.00
TOTAL This Period (last page this line number only).....▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1761 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. ISOTALO, LEO, P., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 90 PEACOCK DRIVW
 City SAN RAFAEL State CA Zip Code 94901-1505
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1950.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 31 / 2016
Transaction ID : SA11A.457455
 Amount of Each Receipt this Period
 250.00
 Memo Item
 CONTRIBUTION

B. ISRAEL, MORTON, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 18901 PATRICIAN DRIVE
 City VILLA PARK State CA Zip Code 92861-4250
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) PHYSICIAN
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 31 / 2016
Transaction ID : SA11A.463383
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION

C. ISRAEL, NORMAN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 750 PLAZA AVENUE
 City NEW HYDE PARK State NY Zip Code 11040-
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RAE LUTOMATIC SPRINKLER Occupation (for Individual) CONTRACTOR
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 600.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 20 / 2016
Transaction ID : SA11A.442237
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	450.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1762 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. ISRAEL, NORMAN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 750 PLAZA AVENUE
 City NEW HYDE PARK State NY Zip Code 11040-
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RAE LUTOMATIC SPRINKLER Occupation (for Individual) CONTRACTOR
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 600.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 02 / 2016
Transaction ID : SA11A.466442
 Amount of Each Receipt this Period
 250.00
 Memo Item
 CONTRIBUTION

B. ISRAEL, NORMAN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 750 PLAZA AVENUE
 City NEW HYDE PARK State NY Zip Code 11040-
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RAE LUTOMATIC SPRINKLER Occupation (for Individual) CONTRACTOR
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 600.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 02 / 2016
Transaction ID : SA11A.466444
 Amount of Each Receipt this Period
 250.00
 Memo Item
 CONTRIBUTION

C. IVASCU, ALLAN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 265 INDIES WAY 1603
 City NAPLES State FL Zip Code 34110-6496
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 300.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 25 / 2016
Transaction ID : SA11A.448129
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	600.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1763 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. IVASCU, ALLAN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 265 INDIES WAY
 1603
 City NAPLES State FL Zip Code 34110-6496
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 02 / 2016
Transaction ID : SA11A.467003
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION

B. IVERSON, DEREK, E., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 14420 SE 216TH ST
 City KENT State WA Zip Code 98042-3022
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 450.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 31 / 2016
Transaction ID : SA11A.458167
 Amount of Each Receipt this Period
 50.00
 Memo Item
 CONTRIBUTION

C. IVERSON, DEREK, E., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 14420 SE 216TH ST
 City KENT State WA Zip Code 98042-3022
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 450.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 05 / 2016
Transaction ID : SA11A.478812
 Amount of Each Receipt this Period
 50.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	200.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1764 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
Team Ryan

A. IVERSON, DEREK, E., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 14420 SE 216TH ST
 City KENT State WA Zip Code 98042-3022
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 450.00

Date of Receipt 11 / 04 / 2016
Transaction ID : SA11A.479677
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

B. IVERSON, MARC, M., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5200 BEVINGTON PLACE
 City CHARLOTTE State NC Zip Code 28277-5504
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1200.00

Date of Receipt 11 / 03 / 2016
Transaction ID : SA11A.469241
 Amount of Each Receipt this Period 1000.00
 Memo Item CONTRIBUTION

C. IVES, SUSAN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 208 KENSTON CT.
 City GENEVA State IL Zip Code 60134-2029
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) AMERICAN SLIDE CHART Occupation (for Individual) QUALITY ASSURANCE
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 425.00

Date of Receipt 10 / 23 / 2016
Transaction ID : SA11A.446609
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	1100.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1765 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. IVES, SUSAN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 208 KENSTON CT.
 City GENEVA State IL Zip Code 60134-2029
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) AMERICAN SLIDE CHART Occupation (for Individual) QUALITY ASSURANCE
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 425.00

Date of Receipt 10 / 23 / 2016
Transaction ID : SA11A.446610
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

B. IVES, SUSAN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 208 KENSTON CT.
 City GENEVA State IL Zip Code 60134-2029
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) AMERICAN SLIDE CHART Occupation (for Individual) QUALITY ASSURANCE
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 425.00

Date of Receipt 10 / 27 / 2016
Transaction ID : SA11A.454173
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

C. IVES, SUSAN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 208 KENSTON CT.
 City GENEVA State IL Zip Code 60134-2029
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) AMERICAN SLIDE CHART Occupation (for Individual) QUALITY ASSURANCE
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 425.00

Date of Receipt 10 / 27 / 2016
Transaction ID : SA11A.454176
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶ 150.00
TOTAL This Period (last page this line number only).....▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1766 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. IVES, SUSAN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 208 KENSTON CT.
 City GENEVA State IL Zip Code 60134-2029
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) AMERICAN SLIDE CHART Occupation (for Individual) QUALITY ASSURANCE
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 425.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 06 / 2016
Transaction ID : SA11A.478279
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION

B. IVES, SUSAN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 208 KENSTON CT.
 City GENEVA State IL Zip Code 60134-2029
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) AMERICAN SLIDE CHART Occupation (for Individual) QUALITY ASSURANCE
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 425.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 06 / 2016
Transaction ID : SA11A.478283
 Amount of Each Receipt this Period
 50.00
 Memo Item
 CONTRIBUTION

C. IVES, SUSAN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 208 KENSTON CT.
 City GENEVA State IL Zip Code 60134-2029
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) AMERICAN SLIDE CHART Occupation (for Individual) QUALITY ASSURANCE
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 425.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 06 / 2016
Transaction ID : SA11A.478284
 Amount of Each Receipt this Period
 50.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	200.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1767 OF 4311
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. IVESTER, HENRY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 463 SUNRISE CIRCLE
 City CORNELIA State GA Zip Code 30531-3834
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 380.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 29 / 2016
Transaction ID : SA11A.460647
 Amount of Each Receipt this Period
 25.00
 Memo Item
 CONTRIBUTION

B. IVESTER, HENRY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 463 SUNRISE CIRCLE
 City CORNELIA State GA Zip Code 30531-3834
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 380.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 31 / 2016
Transaction ID : SA11A.464649
 Amount of Each Receipt this Period
 25.00
 Memo Item
 CONTRIBUTION

C. IVESTER, HENRY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 463 SUNRISE CIRCLE
 City CORNELIA State GA Zip Code 30531-3834
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 380.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 31 / 2016
Transaction ID : SA11A.464671
 Amount of Each Receipt this Period
 25.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	75.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1768 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. IZZO, STEPHEN, , MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2730 SUMMIT DR
 City GLENVIEW State IL Zip Code 60025-7633
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) THERMFLO Occupation (for Individual) PRESIDENT
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 21 / 2016
Transaction ID : SA11A.444264
 Amount of Each Receipt this Period
 50.00
 Memo Item
 CONTRIBUTION

B. IZZO, STEPHEN, , MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2730 SUMMIT DR
 City GLENVIEW State IL Zip Code 60025-7633
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) THERMFLO Occupation (for Individual) PRESIDENT
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 01 / 2016
Transaction ID : SA11A.467221
 Amount of Each Receipt this Period
 50.00
 Memo Item
 CONTRIBUTION

C. IZZO, STEPHEN, , MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2730 SUMMIT DR
 City GLENVIEW State IL Zip Code 60025-7633
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) THERMFLO Occupation (for Individual) PRESIDENT
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 06 / 2016
Transaction ID : SA11A.477146
 Amount of Each Receipt this Period
 50.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	150.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1769 OF 4311
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. IZZO, VINCENT, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 4506 MYSTIQUE WAY NE

City ROSWELL	State GA	Zip Code 30075-2087
-----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) ADB CABLE INC	Occupation (for Individual) SALES
--	--------------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
305.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		26		2016

Transaction ID : SA11A.451125

Amount of Each Receipt this Period
30.00

Memo Item
CONTRIBUTION

B. JACKMAN, NELLIE, E., ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 45 CORTE YOLANDA

City MORAGA	State CA	Zip Code 94556-1625
----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
950.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11		10		2016

Transaction ID : SA11A.468193

Amount of Each Receipt this Period
200.00

Memo Item
CONTRIBUTION

C. JACKSON, BRUCE, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 3243 VIA LOMA VISTA

City ESCONDIDO	State CA	Zip Code 92029-7219
-------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) SELF EMPLOYED	Occupation (for Individual) MARKETING COMMUNICATIONS
--	---

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
345.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		21		2016

Transaction ID : SA11A.444182

Amount of Each Receipt this Period
10.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	240.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1770 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. JACKSON, BRUCE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3243 VIA LOMA VISTA
 City ESCONDIDO State CA Zip Code 92029-7219
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) MARKETING COMMUNICATIONS
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 345.00

Date of Receipt 10 / 24 / 2016
Transaction ID : SA11A.449574
 Amount of Each Receipt this Period 10.00
 Memo Item CONTRIBUTION

B. JACKSON, BRUCE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3243 VIA LOMA VISTA
 City ESCONDIDO State CA Zip Code 92029-7219
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) MARKETING COMMUNICATIONS
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 345.00

Date of Receipt 11 / 02 / 2016
Transaction ID : SA11A.465819
 Amount of Each Receipt this Period 20.00
 Memo Item CONTRIBUTION

C. JACKSON, BRUCE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3243 VIA LOMA VISTA
 City ESCONDIDO State CA Zip Code 92029-7219
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) MARKETING COMMUNICATIONS
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 345.00

Date of Receipt 11 / 05 / 2016
Transaction ID : SA11A.478638
 Amount of Each Receipt this Period 20.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	50.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1771 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. JACKSON, ELIZABETH, ANN, MS.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 169 KINGFISHER CIR
 City POOLER State GA Zip Code 31322-9763
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 2857.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 22 / 2016
Transaction ID : SA11A.447020
 Amount of Each Receipt this Period
 50.00
 Memo Item
 CONTRIBUTION

B. JACKSON, ELIZABETH, ANN, MS.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 169 KINGFISHER CIR
 City POOLER State GA Zip Code 31322-9763
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 2857.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 26 / 2016
Transaction ID : SA11A.450117
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION

C. JACKSON, ELIZABETH, ANN, MS.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 169 KINGFISHER CIR
 City POOLER State GA Zip Code 31322-9763
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 2857.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 27 / 2016
Transaction ID : SA11A.453087
 Amount of Each Receipt this Period
 50.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	200.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1772 OF 4311
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
Team Ryan

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name A. JACKSON, ELIZABETH, ANN, MS.,		Date of Receipt
Mailing Address 169 KINGFISHER CIR		<input type="text" value="10"/> / <input type="text" value="26"/> / <input type="text" value="2016"/>
City POOLER	State GA	Zip Code 31322-9763
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		Transaction ID : SA11A.454601
Name of Employer (for Individual) NONE		Amount of Each Receipt this Period <input type="text" value="100.00"/>
Occupation (for Individual) RETIRED		<input type="checkbox"/> Memo Item CONTRIBUTION
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ <input type="text" value="2857.00"/>	

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name B. JACKSON, ELIZABETH, ANN, MS.,		Date of Receipt
Mailing Address 169 KINGFISHER CIR		<input type="text" value="10"/> / <input type="text" value="28"/> / <input type="text" value="2016"/>
City POOLER	State GA	Zip Code 31322-9763
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		Transaction ID : SA11A.455980
Name of Employer (for Individual) NONE		Amount of Each Receipt this Period <input type="text" value="50.00"/>
Occupation (for Individual) RETIRED		<input type="checkbox"/> Memo Item CONTRIBUTION
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ <input type="text" value="2857.00"/>	

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name C. JACKSON, ELIZABETH, ANN, MS.,		Date of Receipt
Mailing Address 169 KINGFISHER CIR		<input type="text" value="10"/> / <input type="text" value="31"/> / <input type="text" value="2016"/>
City POOLER	State GA	Zip Code 31322-9763
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		Transaction ID : SA11A.458619
Name of Employer (for Individual) NONE		Amount of Each Receipt this Period <input type="text" value="100.00"/>
Occupation (for Individual) RETIRED		<input type="checkbox"/> Memo Item CONTRIBUTION
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Aggregate Year-to-Date ▼ <input type="text" value="2857.00"/>	

SUBTOTAL of Receipts This Page (optional).....▶	<input type="text" value="250.00"/>
TOTAL This Period (last page this line number only).....▶	<input type="text"/>

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1773 OF 4311
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
Team Ryan

A. JACKSON, ELIZABETH, ANN, MS.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 169 KINGFISHER CIR

City POOLER	State GA	Zip Code 31322-9763
----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
2857.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		29		2016

Transaction ID : SA11A.460591

Amount of Each Receipt this Period
50.00

Memo Item CONTRIBUTION

B. JACKSON, ELIZABETH, ANN, MS.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 169 KINGFISHER CIR

City POOLER	State GA	Zip Code 31322-9763
----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
2857.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11		03		2016

Transaction ID : SA11A.468726

Amount of Each Receipt this Period
100.00

Memo Item CONTRIBUTION

C. JACKSON, ELIZABETH, ANN, MS.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 169 KINGFISHER CIR

City POOLER	State GA	Zip Code 31322-9763
----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
2857.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11		04		2016

Transaction ID : SA11A.473185

Amount of Each Receipt this Period
50.00

Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	200.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1774 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
Team Ryan

A. JACKSON, LINDA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1480 WOOD ROW WAY
 City WELLINGTON State FL Zip Code 33414-9084
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt
 11 / 06 / 2016
Transaction ID : SA11A.480809
 Amount of Each Receipt this Period
 250.00
 Memo Item
 CONTRIBUTION

B. JACKSON, SHARON, A., MRS.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2143 VISTA ENTRADA
 City NEWPORT BEACH State CA Zip Code 92660-3938
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) WORLD TRAVEL Occupation (for Individual) OWNER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 432.00

Date of Receipt
 10 / 24 / 2016
Transaction ID : SA11A.449130
 Amount of Each Receipt this Period
 25.00
 Memo Item
 CONTRIBUTION

C. JACOBUS, FRANK, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 6197 OBERSTRASSE RD
 City EVERGREEN State CO Zip Code 80439-5452
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt
 10 / 26 / 2016
Transaction ID : SA11A.454448
 Amount of Each Receipt this Period
 50.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	325.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1775 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. JACOBUS, FRANK, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 6197 OBERSTRASSE RD
 City EVERGREEN State CO Zip Code 80439-5452
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 10 / 26 / 2016
Transaction ID : SA11A.454452
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

B. JACOBUS, FRANK, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 6197 OBERSTRASSE RD
 City EVERGREEN State CO Zip Code 80439-5452
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 10 / 26 / 2016
Transaction ID : SA11A.454456
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

C. JACOBI, HERBERT, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3207 BUCCANEER RD
 City LANTANA State FL Zip Code 33462-3705
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 280.00

Date of Receipt 11 / 06 / 2016
Transaction ID : SA11A.480837
 Amount of Each Receipt this Period 30.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶ 130.00
TOTAL This Period (last page this line number only).....▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1776 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. JACOBSON, HILDING, L., MAJ. GEN., USAF

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 480 OAKHILL DR

City LOMPOC	State CA	Zip Code 93436-1111
----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
775.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 04 / 2016

Transaction ID : SA11A.467544

Amount of Each Receipt this Period
100.00

Memo Item CONTRIBUTION

B. JACOBSON, HILDING, L., MAJ. GEN., USAF

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 480 OAKHILL DR

City LOMPOC	State CA	Zip Code 93436-1111
----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
775.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 04 / 2016

Transaction ID : SA11A.467545

Amount of Each Receipt this Period
50.00

Memo Item CONTRIBUTION

C. JACOBSON, HILDING, L., MAJ. GEN., USAF

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 480 OAKHILL DR

City LOMPOC	State CA	Zip Code 93436-1111
----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
775.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 07 / 2016

Transaction ID : SA11A.475673

Amount of Each Receipt this Period
25.00

Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	175.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1777 OF 4311
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/>	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. JACOBSON, HILDING, L., MAJ. GEN., USAF
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 480 OAKHILL DR

City LOMPOC	State CA	Zip Code 93436-1111
----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
775.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	07	/	2016

Transaction ID : SA11A.475685

Amount of Each Receipt this Period
50.00

Memo Item
CONTRIBUTION

B. JACOBSON, HILDING, L., MAJ. GEN., USAF
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 480 OAKHILL DR

City LOMPOC	State CA	Zip Code 93436-1111
----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
775.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	07	/	2016

Transaction ID : SA11A.475711

Amount of Each Receipt this Period
50.00

Memo Item
CONTRIBUTION

C. JACOBSON, MERRILL, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1918 FOXFIELD DR

City CASTLE ROCK	State CO	Zip Code 80104-9484
---------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
800.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	22	/	2016

Transaction ID : SA11A.447066

Amount of Each Receipt this Period
100.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	200.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1778 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. JACOBSON, MERRILL, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1918 FOXFIELD DR
 City CASTLE ROCK State CO Zip Code 80104-9484
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 800.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 22 / 2016
Transaction ID : SA11A.447069
 Amount of Each Receipt this Period
 250.00
 Memo Item
 CONTRIBUTION

B. JACOBSON, MERRILL, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1918 FOXFIELD DR
 City CASTLE ROCK State CO Zip Code 80104-9484
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 800.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 22 / 2016
Transaction ID : SA11A.447070
 Amount of Each Receipt this Period
 250.00
 Memo Item
 CONTRIBUTION

C. JACOBY, WILLIAM, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5030 E BERYL AVE
 City PARADISE VALLEY State AZ Zip Code 85253-1002
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SDI Occupation (for Individual) RADIOLOGIST
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 725.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 01 / 2016
Transaction ID : SA11A.463055
 Amount of Each Receipt this Period
 150.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	650.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1779 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. JAEGER, LOWELL, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 60 POTTERSTOWN ROAD
 City LEBANON State NJ Zip Code 08833-5050
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) JAEGER LUMBER Occupation (for Individual) CEO
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1050.00

Date of Receipt 10 / 28 / 2016
Transaction ID : SA11A.454683
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

B. JAGROWSKI, BARBARA, A., MRS.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 884 SPANISH WELLS DRIVE
 City MELBOURNE State FL Zip Code 32940-1601
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) HOMEMAKER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 10 / 24 / 2016
Transaction ID : SA11A.443999
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

C. JAMES, FRANCIS, E., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2604 LANTZ ROAD
 City BEAVERCREEK State OH Zip Code 45434-6627
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 10 / 25 / 2016
Transaction ID : SA11A.447594
 Amount of Each Receipt this Period 500.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	850.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1780 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. JAMES, STEPHAN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3030 CLIFF OVERLOOK
 City SPICEWOOD State TX Zip Code 78669-3095
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt **10 / 30 / 2016**
Transaction ID : SA11A.464841
 Amount of Each Receipt this Period 1000.00
 Memo Item CONTRIBUTION

B. JAMES, THOMAS, D., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 130 BRUCE DRIVE
 City JASPER State GA Zip Code 30143-4254
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 700.00

Date of Receipt **10 / 21 / 2016**
Transaction ID : SA11A.443559
 Amount of Each Receipt this Period 200.00
 Memo Item CONTRIBUTION

C. JAMIESON, THOMAS, A., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 10354 QUAIL CROWN DRIVE
 City NAPLES State FL Zip Code 34119-8832
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt **10 / 25 / 2016**
Transaction ID : SA11A.447396
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	1300.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1781 OF 4311
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. JANAY, GAD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4621 SOUTH OCEAN BLVD.
 City HIGHLAND BEACH State FL Zip Code 33487-5300
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1250.00

Date of Receipt **10 / 29 / 2016**
Transaction ID : SA11A.461026
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

B. JANAY, GAD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4621 SOUTH OCEAN BLVD.
 City HIGHLAND BEACH State FL Zip Code 33487-5300
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1250.00

Date of Receipt **11 / 04 / 2016**
Transaction ID : SA11A.471942
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

C. JANECZEK, THEODORE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 350 CEDAR RD
 City HERSHEY State PA Zip Code 17033-9302
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) GM LEADER FAMILY CORP Occupation (for Individual) CFO
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt **10 / 29 / 2016**
Transaction ID : SA11A.461105
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	600.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1782 OF 4311
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. JANES, ARTHUR, R., MR.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address P. O. BOX 2506

City GRAPEVINE	State TX	Zip Code 76099-2506
FEC ID number of contributing federal political committee. C		
Name of Employer (for Individual) PDS TECH		Occupation (for Individual) CEO
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 5000.00

Date of Receipt
10 / 22 / 2016
Transaction ID : SA11A.446842

Amount of Each Receipt this Period
1000.00

Memo Item
CONTRIBUTION

B. JANES, ARTHUR, R., MR.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address P. O. BOX 2506

City GRAPEVINE	State TX	Zip Code 76099-2506
FEC ID number of contributing federal political committee. C		
Name of Employer (for Individual) PDS TECH		Occupation (for Individual) CEO
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 5000.00

Date of Receipt
11 / 04 / 2016
Transaction ID : SA11A.471970

Amount of Each Receipt this Period
1000.00

Memo Item
CONTRIBUTION

C. JARA, LISA, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 23 LILAC LN

City JACKSON	State TN	Zip Code 38301-3909
FEC ID number of contributing federal political committee. C		
Name of Employer (for Individual) WEST TN HEALTHCARE		Occupation (for Individual) OCCUPATIONAL THERAPIST
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		Aggregate Year-to-Date ▼ 625.00

Date of Receipt
10 / 22 / 2016
Transaction ID : SA11A.446922

Amount of Each Receipt this Period
25.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	2025.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1783 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
Team Ryan

A. JARA, LISA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 23 LILAC LN
 City JACKSON State TN Zip Code 38301-3909
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) WEST TN HEALTHCARE Occupation (for Individual) OCCUPATIONAL THERAPIST
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 625.00

Date of Receipt
 11 / 02 / 2016
Transaction ID : SA11A.467007
 Amount of Each Receipt this Period
 100.00
 Memo Item CONTRIBUTION

B. JARA, LISA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 23 LILAC LN
 City JACKSON State TN Zip Code 38301-3909
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) WEST TN HEALTHCARE Occupation (for Individual) OCCUPATIONAL THERAPIST
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 625.00

Date of Receipt
 11 / 04 / 2016
Transaction ID : SA11A.473062
 Amount of Each Receipt this Period
 25.00
 Memo Item CONTRIBUTION

C. JARVIS, BONNIE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 11014 WILLINGHAN DRIVE
 City HUNTSVILLE State AL Zip Code 35803-2073
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt
 10 / 30 / 2016
Transaction ID : SA11A.460279
 Amount of Each Receipt this Period
 100.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	225.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1784 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. JARVIS, BONNIE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 11014 WILLINGHAN DRIVE
 City HUNTSVILLE State AL Zip Code 35803-2073
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 11 / 04 / 2016
Transaction ID : SA11A.470676
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

B. JARVIS, DAVID, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4767 MARTHA LANE
 City FORT WORTH State TX Zip Code 76103-2033
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) SAME AS ABOVE
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 402.00

Date of Receipt 10 / 20 / 2016
Transaction ID : SA11A.442395
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

C. JARVIS, DAVID, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4767 MARTHA LANE
 City FORT WORTH State TX Zip Code 76103-2033
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) SAME AS ABOVE
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 402.00

Date of Receipt 11 / 04 / 2016
Transaction ID : SA11A.471563
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	200.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1785 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. JAUBERT, STEVE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5050 FREDERICKSBURG RD
 APT 103
 City SAN ANTONIO State TX Zip Code 78229-3648
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) CIMA HOSPICE Occupation (for Individual) NURSE PRACTITIONER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 27 / 2016
Transaction ID : SA11A.456511
 Amount of Each Receipt this Period
 100.00
 Memo Item CONTRIBUTION

B. JAUBERT, STEVE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5050 FREDERICKSBURG RD
 APT 103
 City SAN ANTONIO State TX Zip Code 78229-3648
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) CIMA HOSPICE Occupation (for Individual) NURSE PRACTITIONER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 07 / 2016
Transaction ID : SA11A.480690
 Amount of Each Receipt this Period
 100.00
 Memo Item CONTRIBUTION

C. JELLETT, JAMES, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 100 WINDFLOWERS CIR SW
 City H State AL Zip Code 35824-3129
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 203.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 04 / 2016
Transaction ID : SA11A.472209
 Amount of Each Receipt this Period
 50.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	250.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1786 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. JENKINS, JUDITH, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1225 WHITESIDE MOUNTAIN RD.
 City HIGHLANDS State NC Zip Code 28741-7367
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 2000.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 26 / 2016
Transaction ID : SA11A.451127
 Amount of Each Receipt this Period
 1000.00
 Memo Item
 CONTRIBUTION

B. JENKINS, PAUL, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5533 VIA ALVITO DR
 City WESTERVILLE State OH Zip Code 43082-2503
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) THE COLUMBUS DISTRIBUTING COMPANY Occupation (for Individual) EXEC
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 350.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 26 / 2016
Transaction ID : SA11A.450527
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION

C. JENKS, DAVID, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5225 FRINGETREE DRIVE
 City MCKINNEY State TX Zip Code 75071-8366
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1050.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 31 / 2016
Transaction ID : SA11A.458807
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	1200.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1787 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. JENKS, DAVID, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 5225 FRINGETREE DRIVE

City MCKINNEY	State TX	Zip Code 75071-8366
------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1050.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
11		06		2016

Transaction ID : SA11A.477283

Amount of Each Receipt this Period
100.00

Memo Item CONTRIBUTION

B. JENKS, DAVID, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 5225 FRINGETREE DRIVE

City MCKINNEY	State TX	Zip Code 75071-8366
------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1050.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
11		06		2016

Transaction ID : SA11A.478202

Amount of Each Receipt this Period
100.00

Memo Item CONTRIBUTION

C. JENNE, GLENN, E., MR.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 435 RIDGE ROAD
APT 403

City WILMETTE	State IL	Zip Code 60091-2462
------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
500.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
10		20		2016

Transaction ID : SA11A.433412

Amount of Each Receipt this Period
200.00

Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	400.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1788 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
-----------------------------	-----------------------------	-----------------------------

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NAME OF COMMITTEE (In Full)
Team Ryan

A. JENNE, GLENN, E., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 435 RIDGE ROAD
 APT 403
 City WILMETTE State IL Zip Code 60091-2462
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 11 / 01 / 2016
Transaction ID : SA11A.461626
 Amount of Each Receipt this Period 200.00
 Memo Item CONTRIBUTION

B. JENNETT, ROBERT, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 501 HIGH ST
 City DENVER State CO Zip Code 80218-3635
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt 11 / 01 / 2016
Transaction ID : SA11A.467355
 Amount of Each Receipt this Period 500.00
 Memo Item CONTRIBUTION

C. JENNETT, ROBERT, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 501 HIGH ST
 City DENVER State CO Zip Code 80218-3635
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt 11 / 01 / 2016
Transaction ID : SA11A.467357
 Amount of Each Receipt this Period 500.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	1200.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1789 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. JENNINGS, EDWIN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO BOX 55487

City HOUSTON	State TX	Zip Code 77255-5487
-----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
 975.00

Date of Receipt
 10 / 20 / 2016
Transaction ID : SA11A.444677

Amount of Each Receipt this Period
 100.00

Memo Item CONTRIBUTION

B. JENNINGS, EDWIN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO BOX 55487

City HOUSTON	State TX	Zip Code 77255-5487
-----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
 975.00

Date of Receipt
 11 / 05 / 2016
Transaction ID : SA11A.479330

Amount of Each Receipt this Period
 50.00

Memo Item CONTRIBUTION

C. JENNINGS, LILLIAN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 9225 QUAIL RIDGE DRIVE

City LAS VEGAS	State NV	Zip Code 89134-8927
-------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
 510.00

Date of Receipt
 10 / 25 / 2016
Transaction ID : SA11A.451476

Amount of Each Receipt this Period
 30.00

Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	180.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1790 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. JENNINGS, LILLIAN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 9225 QUAIL RIDGE DRIVE
 City LAS VEGAS State NV Zip Code 89134-8927
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 510.00

Date of Receipt 10 / 25 / 2016
Transaction ID : SA11A.451793
 Amount of Each Receipt this Period 30.00
 Memo Item CONTRIBUTION

B. JENNINGS, LILLIAN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 9225 QUAIL RIDGE DRIVE
 City LAS VEGAS State NV Zip Code 89134-8927
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 510.00

Date of Receipt 10 / 25 / 2016
Transaction ID : SA11A.451796
 Amount of Each Receipt this Period 30.00
 Memo Item CONTRIBUTION

C. JENNINGS, LILLIAN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 9225 QUAIL RIDGE DRIVE
 City LAS VEGAS State NV Zip Code 89134-8927
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 510.00

Date of Receipt 10 / 27 / 2016
Transaction ID : SA11A.457009
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	110.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1791 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. JENNINGS, LILLIAN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 9225 QUAIL RIDGE DRIVE
 City LAS VEGAS State NV Zip Code 89134-8927
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 510.00

Date of Receipt 10 / 27 / 2016
Transaction ID : SA11A.457013
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

B. JENNINGS, LILLIAN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 9225 QUAIL RIDGE DRIVE
 City LAS VEGAS State NV Zip Code 89134-8927
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 510.00

Date of Receipt 10 / 31 / 2016
Transaction ID : SA11A.464114
 Amount of Each Receipt this Period 30.00
 Memo Item CONTRIBUTION

C. JENNINGS, LILLIAN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 9225 QUAIL RIDGE DRIVE
 City LAS VEGAS State NV Zip Code 89134-8927
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 510.00

Date of Receipt 10 / 31 / 2016
Transaction ID : SA11A.464119
 Amount of Each Receipt this Period 30.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	110.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1792 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
Team Ryan

A. JENNINGS, LILLIAN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 9225 QUAIL RIDGE DRIVE
 City LAS VEGAS State NV Zip Code 89134-8927
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 510.00

Date of Receipt 10 / 31 / 2016
Transaction ID : SA11A.464128
 Amount of Each Receipt this Period 30.00
 Memo Item CONTRIBUTION

B. JENNINGS, LILLIAN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 9225 QUAIL RIDGE DRIVE
 City LAS VEGAS State NV Zip Code 89134-8927
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 510.00

Date of Receipt 10 / 31 / 2016
Transaction ID : SA11A.464130
 Amount of Each Receipt this Period 30.00
 Memo Item CONTRIBUTION

C. JENNINGS, LILLIAN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 9225 QUAIL RIDGE DRIVE
 City LAS VEGAS State NV Zip Code 89134-8927
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 510.00

Date of Receipt 10 / 31 / 2016
Transaction ID : SA11A.464183
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	110.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1793 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
Team Ryan

A. JENNINGS, MARTHA, L., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO BOX 5923
 City KETCHUM State ID Zip Code 83340-5923
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) HOMEMAKER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt
 11 / 01 / 2016
Transaction ID : SA11A.461824
 Amount of Each Receipt this Period
 250.00
 Memo Item
 CONTRIBUTION

B. JENRETTE, ALBERT, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 611 LITTLE CREEK RD.
 City AUBURN State AL Zip Code 36832-3419
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 205.00

Date of Receipt
 10 / 28 / 2016
Transaction ID : SA11A.455373
 Amount of Each Receipt this Period
 30.00
 Memo Item
 CONTRIBUTION

C. JENRETTE, ALBERT, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 611 LITTLE CREEK RD.
 City AUBURN State AL Zip Code 36832-3419
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 205.00

Date of Receipt
 10 / 31 / 2016
Transaction ID : SA11A.464623
 Amount of Each Receipt this Period
 25.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	305.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1794 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. JENRETTE, ALBERT, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 611 LITTLE CREEK RD.
 City AUBURN State AL Zip Code 36832-3419
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 205.00

Date of Receipt **10 / 31 / 2016**
Transaction ID : SA11A.464625
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

B. JENSEN, GERALDINE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1141 SW HENSLEY RD
 City TROUTDALE State OR Zip Code 97060-1473
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 315.00

Date of Receipt **11 / 04 / 2016**
Transaction ID : SA11A.474168
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

C. JENSEN, JON, D., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 133 MAHOGANY WAY
 City UPPER GWYNEDD State PA Zip Code 19446-5689
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 225.00

Date of Receipt **11 / 04 / 2016**
Transaction ID : SA11A.473466
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	75.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1795 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. JENSEN, LINDA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1060 SCOTT DRIVE
 City VALLEY STREAM State NY Zip Code 11580-2138
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 450.00

Date of Receipt 10 / 25 / 2016
Transaction ID : SA11A.451731
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

B. JENSEN, LINDA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1060 SCOTT DRIVE
 City VALLEY STREAM State NY Zip Code 11580-2138
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 450.00

Date of Receipt 10 / 25 / 2016
Transaction ID : SA11A.451736
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

C. JENSEN, LINDA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1060 SCOTT DRIVE
 City VALLEY STREAM State NY Zip Code 11580-2138
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 450.00

Date of Receipt 10 / 25 / 2016
Transaction ID : SA11A.451753
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶ 150.00
TOTAL This Period (last page this line number only).....▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1796 OF 4311
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
Team Ryan

A. JENSEN, LINDA, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 1060 SCOTT DRIVE

City VALLEY STREAM	State NY	Zip Code 11580-2138
-----------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
450.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	25	/	2016

Transaction ID : SA11A.451755

Amount of Each Receipt this Period
50.00

Memo Item CONTRIBUTION

B. JENSEN, SUZANNE, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 17931 NW GILBERT LN

City PORTLAND	State OR	Zip Code 97229-8538
------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
607.50

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	24	/	2016

Transaction ID : SA11A.449125

Amount of Each Receipt this Period
100.00

Memo Item CONTRIBUTION

C. JENSEN, SUZANNE, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 17931 NW GILBERT LN

City PORTLAND	State OR	Zip Code 97229-8538
------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
607.50

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	05	/	2016

Transaction ID : SA11A.478938

Amount of Each Receipt this Period
100.00

Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	250.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1797 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
Team Ryan

A. JEPSEN, DAVID, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 295 BOEING CT
 City LIVERMORE State CA Zip Code 94551-9258
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) JEPSENELECTRIC Occupation (for Individual) ELECTRICIAN
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt 11 / 01 / 2016
Transaction ID : SA11A.462893
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

B. JEPSEN, DAVID, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 295 BOEING CT
 City LIVERMORE State CA Zip Code 94551-9258
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) JEPSENELECTRIC Occupation (for Individual) ELECTRICIAN
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt 11 / 04 / 2016
Transaction ID : SA11A.472232
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

C. JHABVALA, FARROKH, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 6440 SW 72 CT
 City MIAMI State FL Zip Code 33143-2903
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) CARLTON FIELDS Occupation (for Individual) ATTORNEY
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt 10 / 26 / 2016
Transaction ID : SA11A.450911
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	300.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1798 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
JHABVALA, FARROKH, , ,

Mailing Address 6440 SW 72 CT

City MIAMI	State FL	Zip Code 33143-2903
---------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) CARLTON FIELDS	Occupation (for Individual) ATTORNEY
---	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1000.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 26 / 2016

Transaction ID : SA11A.450946

Amount of Each Receipt this Period
100.00

Memo Item CONTRIBUTION

B. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
JHABVALA, FARROKH, , ,

Mailing Address 6440 SW 72 CT

City MIAMI	State FL	Zip Code 33143-2903
---------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) CARLTON FIELDS	Occupation (for Individual) ATTORNEY
---	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1000.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 29 / 2016

Transaction ID : SA11A.460638

Amount of Each Receipt this Period
100.00

Memo Item CONTRIBUTION

C. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
JHABVALA, FARROKH, , ,

Mailing Address 6440 SW 72 CT

City MIAMI	State FL	Zip Code 33143-2903
---------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) CARLTON FIELDS	Occupation (for Individual) ATTORNEY
---	---

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
1000.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 29 / 2016

Transaction ID : SA11A.460640

Amount of Each Receipt this Period
100.00

Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	300.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 1799 OF 4311
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. JIMMERSON, KAREN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4819 COPPERHILL DR
 City RAPID CITY State SD Zip Code 57702-4810
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 275.00

Date of Receipt 10 / 25 / 2016
Transaction ID : SA11A.449088
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

B. JIMMERSON, KAREN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4819 COPPERHILL DR
 City RAPID CITY State SD Zip Code 57702-4810
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 275.00

Date of Receipt 10 / 25 / 2016
Transaction ID : SA11A.449089
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

C. JIMMERSON, KAREN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4819 COPPERHILL DR
 City RAPID CITY State SD Zip Code 57702-4810
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 275.00

Date of Receipt 10 / 27 / 2016
Transaction ID : SA11A.453123
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 75.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1800 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. JIMMERSON, KAREN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4819 COPPERHILL DR
 City RAPID CITY State SD Zip Code 57702-4810
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 275.00

Date of Receipt **10 / 31 / 2016**
Transaction ID : SA11A.458370
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

B. JIMMERSON, KAREN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4819 COPPERHILL DR
 City RAPID CITY State SD Zip Code 57702-4810
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 275.00

Date of Receipt **11 / 07 / 2016**
Transaction ID : SA11A.475473
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

C. JIRALERSPONG, PATCHARIN, E., DR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 18110 BILLABONG CRESENT COURT
 City CYPRESS State TX Zip Code 77429-5265
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt **11 / 02 / 2016**
Transaction ID : SA11A.465113
 Amount of Each Receipt this Period 200.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	250.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1801 OF 4311
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. JOANOU, MICHELLE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 300 HOT SPRINGS RD.
 COTT 10
 City SANTA BARBARA State CA Zip Code 93108-2037
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 10 / 31 / 2016
Transaction ID : SA11A.458224
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

B. JOCHMANN, CARMELLA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1313 WILLOW GROVE DR
 City KNOXVILLE State TN Zip Code 37932-3621
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SAIC Occupation (for Individual) GRAPHIC DESIGNER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 10 / 27 / 2016
Transaction ID : SA11A.454019
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

C. JOCHMANN, CARMELLA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1313 WILLOW GROVE DR
 City KNOXVILLE State TN Zip Code 37932-3621
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SAIC Occupation (for Individual) GRAPHIC DESIGNER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 11 / 03 / 2016
Transaction ID : SA11A.474507
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	400.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1802 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. JOCHMANN, CARMELLA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1313 WILLOW GROVE DR
 City KNOXVILLE State TN Zip Code 37932-3621
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SAIC Occupation (for Individual) GRAPHIC DESIGNER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 11 / 03 / 2016
Transaction ID : SA11A.474508
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

B. JODY, THOMAS, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 114 GOVERNOR STREET
 City GREEN COVE SPRINGS State FL Zip Code 32043-2549
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) CONSULTANT
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 800.00

Date of Receipt 10 / 25 / 2016
Transaction ID : SA11A.448999
 Amount of Each Receipt this Period 500.00
 Memo Item CONTRIBUTION

C. JODY, THOMAS, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 114 GOVERNOR STREET
 City GREEN COVE SPRINGS State FL Zip Code 32043-2549
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) CONSULTANT
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 800.00

Date of Receipt 11 / 04 / 2016
Transaction ID : SA11A.474015
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	650.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1803 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. JOHNSON, ANN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 10306 CANDLEWOOD DR
 City HOUSTON State TX Zip Code 77042-1522
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 350.00

Date of Receipt 11 / 04 / 2016
Transaction ID : SA11A.473592
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

B. JOHNSON, BENJAMIN, H., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4 THORNELL RD.
 City PITTSFORD State NY Zip Code 14534-3526
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) BENJAMIN H. JOHNSON Occupation (for Individual) FINANCIAL ADVISOR
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 10 / 30 / 2016
Transaction ID : SA11A.459915
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

C. JOHNSON, BENJAMIN, H., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4 THORNELL RD.
 City PITTSFORD State NY Zip Code 14534-3526
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) BENJAMIN H. JOHNSON Occupation (for Individual) FINANCIAL ADVISOR
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 11 / 02 / 2016
Transaction ID : SA11A.467014
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	150.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1804 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
Team Ryan

A. JOHNSON JR, BERNARD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 226 WEST MAIN ST
 City WESTFIELD State PA Zip Code 16950-1402
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) BJINSPECTIONS, INC Occupation (for Individual) CO-OWNER PRESIDENT
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 28 / 2016
Transaction ID : SA11A.456173
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION

B. JOHNSON, BILLIE, SUE, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2774 MOORE RD
 City BEAUMONT State TX Zip Code 77713-3945
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 420.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 04 / 2016
Transaction ID : SA11A.472476
 Amount of Each Receipt this Period
 50.00
 Memo Item
 CONTRIBUTION

C. JOHNSON, BRADLEY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 9913 KINGSBRIDGE ROAD
 City RICHMOND State VA Zip Code 23238-5713
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) UNITED SPORTING COMPANIES Occupation (for Individual) CHAIRMAN AND CEO
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 205.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 29 / 2016
Transaction ID : SA11A.460614
 Amount of Each Receipt this Period
 30.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	180.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1805 OF 4311
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. JOHNSON, BRENDA, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 411 HOMESTEAD LANE

City HOLDREGE	State NE	Zip Code 68949-1132
------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) BRJ FARMS	Occupation (for Individual) SELF-EMPLOYED
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
205.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		22		2016

Transaction ID : SA11A.446947

Amount of Each Receipt this Period
30.00

Memo Item CONTRIBUTION

B. JOHNSON, BRENDA, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 411 HOMESTEAD LANE

City HOLDREGE	State NE	Zip Code 68949-1132
------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) BRJ FARMS	Occupation (for Individual) SELF-EMPLOYED
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
205.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11		04		2016

Transaction ID : SA11A.473049

Amount of Each Receipt this Period
30.00

Memo Item CONTRIBUTION

C. JOHNSON, BRUCE, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 840 AUDUBON WAY
T11

City LINCOLNSHIRE	State IL	Zip Code 60069-3835
----------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
350.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		26		2016

Transaction ID : SA11A.450498

Amount of Each Receipt this Period
50.00

Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	110.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1806 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. JOHNSON, BRUCE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 840 AUDUBON WAY
 T11
 City LINCOLNSHIRE State IL Zip Code 60069-3835
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 350.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 28 / 2016
Transaction ID : SA11A.455035
 Amount of Each Receipt this Period
 100.00
 Memo Item CONTRIBUTION

B. JOHNSON, BRUCE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 840 AUDUBON WAY
 T11
 City LINCOLNSHIRE State IL Zip Code 60069-3835
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 350.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 28 / 2016
Transaction ID : SA11A.455036
 Amount of Each Receipt this Period
 100.00
 Memo Item CONTRIBUTION

C. JOHNSON, CALVIN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 739 ROLLING FORK DRIVE
 City BRENTWOOD State TN Zip Code 37027-5919
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 225.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 30 / 2016
Transaction ID : SA11A.464923
 Amount of Each Receipt this Period
 25.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	225.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1807 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. JOHNSON, CALVIN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 739 ROLLING FORK DRIVE
 City BRENTWOOD State TN Zip Code 37027-5919
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 225.00

Date of Receipt 11 / 04 / 2016
Transaction ID : SA11A.473137
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

B. JOHNSTON, CALVIN, , MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 972 VISTA RIDGE LANE
 City THOUSAND OAKS State CA Zip Code 91362-5612
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) INFORMATION REQUESTED PER BEST EFFORTS Occupation (for Individual) INFORMATION REQUESTED PER BE
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt 11 / 08 / 2016
Transaction ID : SA11A.468168
 Amount of Each Receipt this Period 1000.00
 Memo Item CONTRIBUTION

C. JOHNSON, DENNIS, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3418 E SUNCREST CT.
 City PHOENIX State AZ Zip Code 85044-3506
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) TRAFFICADE SERVICE Occupation (for Individual) VICE PRESIDENT
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 450.00

Date of Receipt 10 / 31 / 2016
Transaction ID : SA11A.458417
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 1075.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1808 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
JOHNSON, DENNIS, , ,

Mailing Address **3418 E SUNCREST CT.**

City PHOENIX	State AZ	Zip Code 85044-3506
------------------------	--------------------	-------------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) TRAFFICADE SERVICE	Occupation (for Individual) VICE PRESIDENT
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
450.00

Date of Receipt
11 / 04 / 2016

Transaction ID : SA11A.473414

Amount of Each Receipt this Period
100.00

Memo Item
CONTRIBUTION

B. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
JOHNSON, DENNIS, , ,

Mailing Address **3418 E SUNCREST CT.**

City PHOENIX	State AZ	Zip Code 85044-3506
------------------------	--------------------	-------------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) TRAFFICADE SERVICE	Occupation (for Individual) VICE PRESIDENT
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
450.00

Date of Receipt
11 / 06 / 2016

Transaction ID : SA11A.477794

Amount of Each Receipt this Period
50.00

Memo Item
CONTRIBUTION

C. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
JOHNSON, DENNIS, , ,

Mailing Address **3418 E SUNCREST CT.**

City PHOENIX	State AZ	Zip Code 85044-3506
------------------------	--------------------	-------------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) TRAFFICADE SERVICE	Occupation (for Individual) VICE PRESIDENT
--	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
450.00

Date of Receipt
11 / 06 / 2016

Transaction ID : SA11A.477795

Amount of Each Receipt this Period
50.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	200.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1809 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. JOHNSON, DONNA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 207 SAN JUAN DRIVE
 City PONTE VEDRA BEACH State FL Zip Code 32082-1817
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 10 / 24 / 2016
Transaction ID : SA11A.449208
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

B. JOHNSON, DONALD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2037 POWELL'S LANDING CIRCLE
 City WOODBRIDGE State VA Zip Code 22191-4512
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 10 / 31 / 2016
Transaction ID : SA11A.458660
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

C. JOHNSON, ELDON, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 105 6TH AVE S STE. 103
 City PRINCETON State MN Zip Code 55371-1819
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) ELDON JOHNSON Occupation (for Individual) REAL ESTATE BROKER - OWNER
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 275.00

Date of Receipt 10 / 31 / 2016
Transaction ID : SA11A.457563
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 175.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1810 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. JOHNSON, ELDON, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 105 6TH AVE S
 STE. 103
 City PRINCETON State MN Zip Code 55371-1819
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) ELDON JOHNSON Occupation (for Individual) REAL ESTATE BROKER - OWNER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 275.00

Date of Receipt 10 / 31 / 2016
Transaction ID : SA11A.457566
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

B. JOHNSON, ELDON, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 105 6TH AVE S
 STE. 103
 City PRINCETON State MN Zip Code 55371-1819
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) ELDON JOHNSON Occupation (for Individual) REAL ESTATE BROKER - OWNER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 275.00

Date of Receipt 11 / 02 / 2016
Transaction ID : SA11A.466771
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

C. JOHNSON, ELDON, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 105 6TH AVE S
 STE. 103
 City PRINCETON State MN Zip Code 55371-1819
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) ELDON JOHNSON Occupation (for Individual) REAL ESTATE BROKER - OWNER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 275.00

Date of Receipt 11 / 07 / 2016
Transaction ID : SA11A.475164
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 75.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1811 OF 4311
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Team Ryan

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name A. JOHNSON, ELDON, , ,		Date of Receipt MM / DD / YYYY 11 / 05 / 2016
Mailing Address 105 6TH AVE S STE. 103		Transaction ID : SA11A.478721
City PRINCETON	State MN	Zip Code 55371-1819
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 25.00
Name of Employer (for Individual) ELDON JOHNSON	Occupation (for Individual) REAL ESTATE BROKER - OWNER	<input type="checkbox"/> Memo Item CONTRIBUTION
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 275.00	

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name B. JOHNSON, FRANKLIN, , ,		Date of Receipt MM / DD / YYYY 11 / 04 / 2016
Mailing Address 151 E PIKE RD		Transaction ID : SA11A.473827
City FALKVILLE	State AL	Zip Code 35622-5101
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 100.00
Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED	<input type="checkbox"/> Memo Item CONTRIBUTION
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 425.00	

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name C. JOHNSON, FRED, , ,		Date of Receipt MM / DD / YYYY 10 / 25 / 2016
Mailing Address 32938 AVENUE D		Transaction ID : SA11A.448387
City YUCAIPA	State CA	Zip Code 92399-1916
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 30.00
Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED	<input type="checkbox"/> Memo Item CONTRIBUTION
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Aggregate Year-to-Date ▼ 235.00	

SUBTOTAL of Receipts This Page (optional).....▶	155.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1812 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. JOHNSON, FRED, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 32938 AVENUE D
 City YUCAIPA State CA Zip Code 92399-1916
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 235.00

Date of Receipt **10 / 25 / 2016**
Transaction ID : SA11A.448392
 Amount of Each Receipt this Period 30.00
 Memo Item CONTRIBUTION

B. JOHNSON, FRED, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 32938 AVENUE D
 City YUCAIPA State CA Zip Code 92399-1916
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 235.00

Date of Receipt **11 / 02 / 2016**
Transaction ID : SA11A.466724
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

C. JOHNSON, GEORGE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 12505 VILLAGE CIRCLE DRIVE APT 479
 City SAINT LOUIS State MO Zip Code 63127-1729
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt **10 / 28 / 2016**
Transaction ID : SA11A.454733
 Amount of Each Receipt this Period 1000.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	1080.00
TOTAL This Period (last page this line number only).....▶	

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1813 OF 4311
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. JOHNSON, GLENDEN, F., MR.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1757 HIGHLAND BLVD
13

City BOZEMAN State MT Zip Code 59715-7407

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
275.00

Date of Receipt
10 / 26 / 2016
Transaction ID : SA11A.450515

Amount of Each Receipt this Period
50.00

Memo Item CONTRIBUTION

B. JOHNSON, GLENDEN, F., MR.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1757 HIGHLAND BLVD
13

City BOZEMAN State MT Zip Code 59715-7407

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
275.00

Date of Receipt
10 / 31 / 2016
Transaction ID : SA11A.458420

Amount of Each Receipt this Period
25.00

Memo Item CONTRIBUTION

C. JOHNSON, JAMES, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address PO BOX 292

City CHATHAM State NY Zip Code 12037-0292

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
700.00

Date of Receipt
11 / 07 / 2016
Transaction ID : SA11A.476364

Amount of Each Receipt this Period
100.00

Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 175.00

TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1814 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. JOHNSON, JEANE, G., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 800 BLOSSOM HILL ROAD, UNIT H104
 City LOS GATOS State CA Zip Code 95032-3564
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) INFORMATION REQUESTED PER BEST EFFORTS Occupation (for Individual) INFORMATION REQUESTED PER BE
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 350.00

Date of Receipt
 11 / 03 / 2016
Transaction ID : SA11A.465446
 Amount of Each Receipt this Period
 150.00
 Memo Item
 CONTRIBUTION

B. JOHNSON, JENNIFER, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1010 AMERICAN EAGLE BLVD 110
 City SUN CITY CENTER State FL Zip Code 33573-5284
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 550.00

Date of Receipt
 11 / 04 / 2016
Transaction ID : SA11A.474028
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION

C. JOHNSON, JENNIFER, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1010 AMERICAN EAGLE BLVD 110
 City SUN CITY CENTER State FL Zip Code 33573-5284
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 550.00

Date of Receipt
 11 / 07 / 2016
Transaction ID : SA11A.475010
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	350.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1815 OF 4311
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
JOHNSON, JOSEPHINE, , ,

Mailing Address **110 IOWA AVENUE**

City LINEVILLE	State IA	Zip Code 50147-2018
--------------------------	--------------------	-------------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
--	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
800.00

Date of Receipt
10 / 20 / 2016

Transaction ID : SA11A.433406

Amount of Each Receipt this Period
300.00

Memo Item CONTRIBUTION

B. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
JOHNSON, JOSEPHINE, , ,

Mailing Address **110 IOWA AVENUE**

City LINEVILLE	State IA	Zip Code 50147-2018
--------------------------	--------------------	-------------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
--	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
800.00

Date of Receipt
11 / 02 / 2016

Transaction ID : SA11A.465044

Amount of Each Receipt this Period
300.00

Memo Item CONTRIBUTION

C. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
JOHNSON, KATHRYN, , ,

Mailing Address **834 NORTH 700 EAST**
6

City OREM	State UT	Zip Code 84097-4269
---------------------	--------------------	-------------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
--	---

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
475.00

Date of Receipt
10 / 20 / 2016

Transaction ID : SA11A.442402

Amount of Each Receipt this Period
75.00

Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	675.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1816 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. JOHNSON, KATHRYN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 834 NORTH 700 EAST
 6
 City OREM State UT Zip Code 84097-4269
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 475.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 04 / 2016
Transaction ID : SA11A.471646
 Amount of Each Receipt this Period
 75.00
 Memo Item
 CONTRIBUTION

B. JOHNSON, KENNETH, W., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2165 STOPPER DR.
 City MONTOURSVILLE State PA Zip Code 17754-9697
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 652.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 26 / 2016
Transaction ID : SA11A.450694
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION

C. JOHNSON, KENNETH, W., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2165 STOPPER DR.
 City MONTOURSVILLE State PA Zip Code 17754-9697
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For:
 Primary General
 Other (specify)
 Aggregate Year-to-Date ▼
 652.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 07 / 2016
Transaction ID : SA11A.475721
 Amount of Each Receipt this Period
 25.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	200.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1818 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. JOHNSON, LESTER, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1021 DOWNSHIRE CHASE
 City VIRGINIA BEACH State VA Zip Code 23452-6154
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) MEDICAL CENTER RADIOLOGISTS Occupation (for Individual) PHYSICIAN
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 750.00

Date of Receipt 11 / 05 / 2016
Transaction ID : SA11A.479001
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

B. JOHNSON, LEWIS, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 137 BARNSWALLOW LN
 City STAFFORD State VA Zip Code 22556-6229
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) USAF Occupation (for Individual) FINANCIAL SPECIALIST
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt 11 / 03 / 2016
Transaction ID : SA11A.468446
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

C. JOHNSON, LEWIS, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 137 BARNSWALLOW LN
 City STAFFORD State VA Zip Code 22556-6229
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) USAF Occupation (for Individual) FINANCIAL SPECIALIST
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt 11 / 03 / 2016
Transaction ID : SA11A.468447
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	450.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1819 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. JOHNSON, LYN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1970 EMERALD DR
 City CUMMING State GA Zip Code 30040-3532
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) ADP Occupation (for Individual) DESIGN ENGINEER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 387.00

Date of Receipt 10 / 25 / 2016
Transaction ID : SA11A.451511
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

B. JOHNSON, LYN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1970 EMERALD DR
 City CUMMING State GA Zip Code 30040-3532
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) ADP Occupation (for Individual) DESIGN ENGINEER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 387.00

Date of Receipt 10 / 31 / 2016
Transaction ID : SA11A.457547
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

C. JOHNSON, MARINA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 10670 N CENTRAL EXPRESSWAY SUITE 510
 City DALLAS State TX Zip Code 75231-2111
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) PHYSICIAN
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 11 / 06 / 2016
Transaction ID : SA11A.480904
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶ 100.00
TOTAL This Period (last page this line number only).....▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1820 OF 4311
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. JOHNSON, MARINA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 10670 N CENTRAL EXPRESSWAY
 SUITE 510
 City DALLAS State TX Zip Code 75231-2111
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) PHYSICIAN
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 06 / 2016
Transaction ID : SA11A.480906
 Amount of Each Receipt this Period
 25.00
 Memo Item
 CONTRIBUTION

B. JOHNSON, MARINA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 10670 N CENTRAL EXPRESSWAY
 SUITE 510
 City DALLAS State TX Zip Code 75231-2111
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) PHYSICIAN
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 06 / 2016
Transaction ID : SA11A.480907
 Amount of Each Receipt this Period
 25.00
 Memo Item
 CONTRIBUTION

C. JOHNSON, MARI, SNYDER, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 24840 PACIFIC COAST HWY
 City MALIBU State CA Zip Code 90265-4733
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) INFORMATION REQUESTED PER BEST EFFORTS Occupation (for Individual) INFORMATION REQUESTED PER BEST EFFORTS
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 37500.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 01 / 2016
Transaction ID : SA11A.461906
 Amount of Each Receipt this Period
 25000.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	25050.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1822 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
Team Ryan

A. JOHNSON, PHILIP, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 190 LORELANE PLACE
 City KEY LARGO State FL Zip Code 33037-4235
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 275.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 22 / 2016
Transaction ID : SA11A.446914
 Amount of Each Receipt this Period
 25.00
 Memo Item
 CONTRIBUTION

B. JOHNSON, PHILIP, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 190 LORELANE PLACE
 City KEY LARGO State FL Zip Code 33037-4235
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 275.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 04 / 2016
Transaction ID : SA11A.471270
 Amount of Each Receipt this Period
 25.00
 Memo Item
 CONTRIBUTION

C. JOHNSEN, RICHARD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 96 COUNTRY CLUB DR
 City BISMARCK State ND Zip Code 58501-9374
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) JOHNSEN TRAILER SALES, INC Occupation (for Individual) PRESIDENT
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 350.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 26 / 2016
Transaction ID : SA11A.450623
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	150.00
TOTAL This Period (last page this line number only).....▶	

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1823 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. JOHNSON, RICHARD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 351 SUSSEX LANE
 City LAKE FOREST State IL Zip Code 60045-2057
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 425.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 28 / 2016
Transaction ID : SA11A.455189
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION

B. JOHNSON, RICHARD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 351 SUSSEX LANE
 City LAKE FOREST State IL Zip Code 60045-2057
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 425.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 28 / 2016
Transaction ID : SA11A.455193
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION

C. JOHNSON, RICHARD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 351 SUSSEX LANE
 City LAKE FOREST State IL Zip Code 60045-2057
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 425.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 04 / 2016
Transaction ID : SA11A.471236
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	300.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1824 OF 4311
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. JOHNSEN, RICHARD, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 96 COUNTRY CLUB DR

City BISMARCK	State ND	Zip Code 58501-9374
------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) JOHNSEN TRAILER SALES, INC	Occupation (for Individual) PRESIDENT
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
350.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	04	/	2016

Transaction ID : SA11A.473117

Amount of Each Receipt this Period
100.00

Memo Item CONTRIBUTION

B. JOHNSEN, RICHARD, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 96 COUNTRY CLUB DR

City BISMARCK	State ND	Zip Code 58501-9374
------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) JOHNSEN TRAILER SALES, INC	Occupation (for Individual) PRESIDENT
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
350.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	07	/	2016

Transaction ID : SA11A.480463

Amount of Each Receipt this Period
50.00

Memo Item CONTRIBUTION

C. JOHNSTON, RICHARD, B., MR.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 5486 PASEO DEL LAGO W
A

City LAGUNA WOODS	State CA	Zip Code 92637-2684
----------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
525.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	31	/	2016

Transaction ID : SA11A.458199

Amount of Each Receipt this Period
25.00

Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	175.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1825 OF 4311
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
Team Ryan

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name A. JOHNSON, SHONNIE, , ,		Date of Receipt MM / DD / YYYY 10 / 20 / 2016
Mailing Address 21124 CARDINAL POND TERRACE APT. # 214		Transaction ID : SA11A.442483
City ASHBURN	State VA	Zip Code 20147-6110
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 50.00
Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED	<input type="checkbox"/> Memo Item CONTRIBUTION
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 775.00	

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name B. JOHNSON, SHONNIE, , ,		Date of Receipt MM / DD / YYYY 11 / 01 / 2016
Mailing Address 21124 CARDINAL POND TERRACE APT. # 214		Transaction ID : SA11A.462301
City ASHBURN	State VA	Zip Code 20147-6110
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 25.00
Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED	<input type="checkbox"/> Memo Item CONTRIBUTION
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 775.00	

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name C. JOHNSON, SHONNIE, , ,		Date of Receipt MM / DD / YYYY 11 / 04 / 2016
Mailing Address 21124 CARDINAL POND TERRACE APT. # 214		Transaction ID : SA11A.472649
City ASHBURN	State VA	Zip Code 20147-6110
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 100.00
Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED	<input type="checkbox"/> Memo Item CONTRIBUTION
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Aggregate Year-to-Date ▼ 775.00	

SUBTOTAL of Receipts This Page (optional).....▶	175.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1826 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
Team Ryan

A. JOHNSON, SUSAN, J., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3418 E SUNCREST CT
 City PHOENIX State AZ Zip Code 85044-3506
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) TRAFFICADE Occupation (for Individual) VP
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1025.00

Date of Receipt 10 / 26 / 2016
Transaction ID : SA11A.450060
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

B. JOHNSON, SUSAN, J., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3418 E SUNCREST CT
 City PHOENIX State AZ Zip Code 85044-3506
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) TRAFFICADE Occupation (for Individual) VP
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1025.00

Date of Receipt 10 / 26 / 2016
Transaction ID : SA11A.450066
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

C. JOHNSON, SUSAN, J., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3418 E SUNCREST CT
 City PHOENIX State AZ Zip Code 85044-3506
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) TRAFFICADE Occupation (for Individual) VP
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1025.00

Date of Receipt 11 / 01 / 2016
Transaction ID : SA11A.462509
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶ 150.00
TOTAL This Period (last page this line number only).....▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1827 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. JOHNSON, SUSAN, J., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3418 E SUNCREST CT
 City PHOENIX State AZ Zip Code 85044-3506
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) TRAFFICADE Occupation (for Individual) VP
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1025.00

Date of Receipt
 11 / 04 / 2016
Transaction ID : SA11A.470717
 Amount of Each Receipt this Period 50.00
 Memo Item
CONTRIBUTION

B. JOHNSON, SUSAN, J., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3418 E SUNCREST CT
 City PHOENIX State AZ Zip Code 85044-3506
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) TRAFFICADE Occupation (for Individual) VP
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1025.00

Date of Receipt
 11 / 06 / 2016
Transaction ID : SA11A.476927
 Amount of Each Receipt this Period 50.00
 Memo Item
CONTRIBUTION

C. JOHNSON, SUSAN, J., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3418 E SUNCREST CT
 City PHOENIX State AZ Zip Code 85044-3506
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) TRAFFICADE Occupation (for Individual) VP
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1025.00

Date of Receipt
 11 / 06 / 2016
Transaction ID : SA11A.476928
 Amount of Each Receipt this Period 50.00
 Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	150.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1828 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. JOHNSON, SUSAN, J., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3418 E SUNCREST CT
 City PHOENIX State AZ Zip Code 85044-3506
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) TRAFFICADE Occupation (for Individual) VP
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1025.00

Date of Receipt 11 / 06 / 2016
Transaction ID : SA11A.477963
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

B. JOHNSEN, SUZANNE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4505 S YOSEMITE ST #107
 City DENVER State CO Zip Code 80237-2520
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 10 / 22 / 2016
Transaction ID : SA11A.446763
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

C. JOHNSEN, SUZANNE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4505 S YOSEMITE ST #107
 City DENVER State CO Zip Code 80237-2520
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 10 / 22 / 2016
Transaction ID : SA11A.446918
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	250.00
TOTAL This Period (last page this line number only).....▶	

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1829 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. JOHNSTON, THOMAS, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 13659 EAST MAIN ST
 City REYNOLDSBURG State OH Zip Code 43068-
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 20 / 2016
Transaction ID : SA11A.442440
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION

B. JOHNSON, THORD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 144 PINE DR
 City EMERSON State NJ Zip Code 07630-1345
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 23 / 2016
Transaction ID : SA11A.446594
 Amount of Each Receipt this Period
 250.00
 Memo Item
 CONTRIBUTION

C. JOHNSON, TOM, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 479 26TH AVE NE UNIT E
 UNIT E
 City HICKORY State NC Zip Code 28601-2586
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 502.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 20 / 2016
Transaction ID : SA11A.442013
 Amount of Each Receipt this Period
 25.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	375.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1830 OF 4311
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. JOHNSON, TOM, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 479 26TH AVE NE UNIT E
UNIT E

City HICKORY State NC Zip Code 28601-2586

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
502.00

Date of Receipt
10 / 25 / 2016
Transaction ID : SA11A.447821

Amount of Each Receipt this Period
50.00

Memo Item CONTRIBUTION

B. JOHNSON, TOM, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 479 26TH AVE NE UNIT E
UNIT E

City HICKORY State NC Zip Code 28601-2586

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
502.00

Date of Receipt
10 / 27 / 2016
Transaction ID : SA11A.456582

Amount of Each Receipt this Period
25.00

Memo Item CONTRIBUTION

C. JOHNSON, TOM, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 479 26TH AVE NE UNIT E
UNIT E

City HICKORY State NC Zip Code 28601-2586

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
502.00

Date of Receipt
11 / 01 / 2016
Transaction ID : SA11A.462674

Amount of Each Receipt this Period
50.00

Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 125.00

TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1831 OF 4311
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. JOHNSON, TOM, W., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 7881 COCOBAY DR
 City NAPLES State FL Zip Code 34108-6510
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 26 / 2016
Transaction ID : SA11A.450979
 Amount of Each Receipt this Period
 200.00
 Memo Item
 CONTRIBUTION

B. JOHNSON, WILLIAM, E., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4350 TANGLEWOOD TRAIL
 City ST. JOSEPH State MI Zip Code 49085-9618
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 780.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 21 / 2016
Transaction ID : SA11A.444467
 Amount of Each Receipt this Period
 25.00
 Memo Item
 CONTRIBUTION

C. JOHNSON, WILLIAM, E., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4350 TANGLEWOOD TRAIL
 City ST. JOSEPH State MI Zip Code 49085-9618
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 780.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 24 / 2016
Transaction ID : SA11A.445680
 Amount of Each Receipt this Period
 25.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	250.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1832 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. JOHNSON, WILLIAM, E., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4350 TANGLEWOOD TRAIL
 City ST. JOSEPH State MI Zip Code 49085-9618
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 780.00

Date of Receipt 10 / 21 / 2016
Transaction ID : SA11A.447123
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

B. JOHNSON, WILLIAM, E., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4350 TANGLEWOOD TRAIL
 City ST. JOSEPH State MI Zip Code 49085-9618
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 780.00

Date of Receipt 10 / 25 / 2016
Transaction ID : SA11A.447842
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

C. JOHNSON, WILLIAM, E., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4350 TANGLEWOOD TRAIL
 City ST. JOSEPH State MI Zip Code 49085-9618
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 780.00

Date of Receipt 10 / 29 / 2016
Transaction ID : SA11A.460490
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 75.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1833 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
Team Ryan

A. JOHNSON, WILLIAM, E., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4350 TANGLEWOOD TRAIL
 City ST. JOSEPH State MI Zip Code 49085-9618
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 780.00

Date of Receipt 10 / 28 / 2016
Transaction ID : SA11A.461274
 Amount of Each Receipt this Period 20.00
 Memo Item CONTRIBUTION

B. JOHNSON, WILLIAM, E., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4350 TANGLEWOOD TRAIL
 City ST. JOSEPH State MI Zip Code 49085-9618
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 780.00

Date of Receipt 10 / 28 / 2016
Transaction ID : SA11A.461294
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

C. JOHNSON, WILLIAM, E., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4350 TANGLEWOOD TRAIL
 City ST. JOSEPH State MI Zip Code 49085-9618
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 780.00

Date of Receipt 10 / 28 / 2016
Transaction ID : SA11A.461510
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	70.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1834 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
Team Ryan

A. JOHNSON, WILLIAM, E., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4350 TANGLEWOOD TRAIL
 City ST. JOSEPH State MI Zip Code 49085-9618
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 780.00

Date of Receipt 11 / 02 / 2016
Transaction ID : SA11A.469690
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

B. JOHNSON, WILLIAM, E., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4350 TANGLEWOOD TRAIL
 City ST. JOSEPH State MI Zip Code 49085-9618
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 780.00

Date of Receipt 11 / 06 / 2016
Transaction ID : SA11A.477742
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

C. JOHNSON, WILLIAM, E., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4350 TANGLEWOOD TRAIL
 City ST. JOSEPH State MI Zip Code 49085-9618
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 780.00

Date of Receipt 11 / 05 / 2016
Transaction ID : SA11A.478368
 Amount of Each Receipt this Period 15.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	65.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1835 OF 4311
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. JOHNSTON, WILLIAM, R., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 6249 MUSKET LANE
 City HIXSON State TN Zip Code 37343-4825
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) SALES-SEMI IRETIREDD
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 813.00

Date of Receipt 11 / 04 / 2016
Transaction ID : SA11A.474016
 Amount of Each Receipt this Period 30.00
 Memo Item CONTRIBUTION

B. JOHNSTON, WILLIAM, R., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 6249 MUSKET LANE
 City HIXSON State TN Zip Code 37343-4825
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) SALES-SEMI IRETIREDD
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 813.00

Date of Receipt 11 / 04 / 2016
Transaction ID : SA11A.474242
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

C. JOLLY, WALTER, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 10101 DITCH ROAD
 City CARMEL State IN Zip Code 46032-8897
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 10 / 31 / 2016
Transaction ID : SA11A.458087
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶ 155.00
TOTAL This Period (last page this line number only).....▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1836 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. JOLLY, WALTER, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 10101 DITCH ROAD
 City CARMEL State IN Zip Code 46032-8897
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 31 / 2016
Transaction ID : SA11A.458104
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION

B. JONAS, ARETA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 405 CHRISTIAN VILLAGE CIRCLE 205
 City LOUISVILLE State KY Zip Code 40243-1352
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 450.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 21 / 2016
Transaction ID : SA11A.444580
 Amount of Each Receipt this Period
 50.00
 Memo Item
 CONTRIBUTION

C. JONAS, ARETA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 405 CHRISTIAN VILLAGE CIRCLE 205
 City LOUISVILLE State KY Zip Code 40243-1352
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 450.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 04 / 2016
Transaction ID : SA11A.472071
 Amount of Each Receipt this Period
 50.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	200.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1837 OF 4311
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/>	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. JONES, A , , , JR
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 332 BRECKENRIDGE ROAD
PO BOX 2068

City ALBANY State TX Zip Code 76430-2756

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) INFORMATION REQUESTED PER BEST EFFORTS Occupation (for Individual) INFORMATION REQUESTED PER BE

Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 10400.00

Date of Receipt 10 / 25 / 2016
Transaction ID : SA11A.447270

Amount of Each Receipt this Period 10400.00

Memo Item CONTRIBUTION

B. JONES, ALYCE, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 3421 NORTH POWERLINE ROAD

City POMPANO BEACH State FL Zip Code 33069-1021

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) A.M. JONES, CPA, PA Occupation (for Individual) CERTIFIED PUBLIC ACCOUNTANT

Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 750.00

Date of Receipt 10 / 30 / 2016
Transaction ID : SA11A.460277

Amount of Each Receipt this Period 250.00

Memo Item CONTRIBUTION

C. JONES, ALYCE, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 3421 NORTH POWERLINE ROAD

City POMPANO BEACH State FL Zip Code 33069-1021

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) A.M. JONES, CPA, PA Occupation (for Individual) CERTIFIED PUBLIC ACCOUNTANT

Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 750.00

Date of Receipt 11 / 04 / 2016
Transaction ID : SA11A.470834

Amount of Each Receipt this Period 250.00

Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶ 10900.00

TOTAL This Period (last page this line number only).....▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1838 OF 4311
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. JONES, ARTHUR, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5232 DUNLEIGH DRIVE
 City BURKE State VA Zip Code 22015-1644
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 10 / 24 / 2016
Transaction ID : SA11A.444042
 Amount of Each Receipt this Period 500.00
 Memo Item CONTRIBUTION

B. JONES, CARLTON, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2219 S. TERWILLEGER
 City TULSA State OK Zip Code 74114-1317
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 10 / 21 / 2016
Transaction ID : SA11A.444147
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

C. JONES, DORIS, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address P O BOX 751
 City HOSCHTON State GA Zip Code 30548-0751
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 535.00

Date of Receipt 10 / 27 / 2016
Transaction ID : SA11A.456501
 Amount of Each Receipt this Period 30.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 580.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1839 OF 4311
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. JONES, DORIS, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address P O BOX 751

City HOSCHTON	State GA	Zip Code 30548-0751
------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
535.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		27		2016

Transaction ID : SA11A.456564

Amount of Each Receipt this Period
30.00

Memo Item
CONTRIBUTION

B. JONES, DORIS, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address P O BOX 751

City HOSCHTON	State GA	Zip Code 30548-0751
------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
535.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		27		2016

Transaction ID : SA11A.456565

Amount of Each Receipt this Period
30.00

Memo Item
CONTRIBUTION

C. JONES, EDWARD, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 2460 S. 161ST ST.

City SEATAC	State WA	Zip Code 98158-1117
----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) SUMMIT NW CORP.	Occupation (for Individual) DIRECTOR
--	---

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
600.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		26		2016

Transaction ID : SA11A.449811

Amount of Each Receipt this Period
100.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	160.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1840 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
-----------------------------	-----------------------------	-----------------------------

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NAME OF COMMITTEE (In Full)
Team Ryan

A. JONES, EDWARD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2460 S. 161ST ST.
 City SEATAC State WA Zip Code 98158-1117
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SUMMIT NW CORP. Occupation (for Individual) DIRECTOR
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 600.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 31 / 2016
Transaction ID : SA11A.459127
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION

B. JONES, EDWARD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2460 S. 161ST ST.
 City SEATAC State WA Zip Code 98158-1117
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SUMMIT NW CORP. Occupation (for Individual) DIRECTOR
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 600.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 04 / 2016
Transaction ID : SA11A.471263
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION

C. JONES, GARVIN, L., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 668 HARBOR CREEK PL P
 City CHARLESTON State SC Zip Code 29412-3203
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 260.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 26 / 2016
Transaction ID : SA11A.450754
 Amount of Each Receipt this Period
 30.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	230.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1841 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. JONES, GARVIN, L., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 668 HARBOR CREEK PL
 P
 City CHARLESTON State SC Zip Code 29412-3203
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 260.00

Date of Receipt 10 / 26 / 2016
Transaction ID : SA11A.450787
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

B. JONES, GARVIN, L., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 668 HARBOR CREEK PL
 P
 City CHARLESTON State SC Zip Code 29412-3203
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 260.00

Date of Receipt 10 / 25 / 2016
Transaction ID : SA11A.451942
 Amount of Each Receipt this Period 30.00
 Memo Item CONTRIBUTION

C. JONES, GARVIN, L., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 668 HARBOR CREEK PL
 P
 City CHARLESTON State SC Zip Code 29412-3203
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 260.00

Date of Receipt 11 / 06 / 2016
Transaction ID : SA11A.477096
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	80.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1842 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. JONES, GARVIN, L., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 668 HARBOR CREEK PL
 P
 City CHARLESTON State SC Zip Code 29412-3203
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 260.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 05 / 2016
Transaction ID : SA11A.478775
 Amount of Each Receipt this Period
 25.00
 Memo Item
 CONTRIBUTION

B. JONES, GARVIN, L., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 668 HARBOR CREEK PL
 P
 City CHARLESTON State SC Zip Code 29412-3203
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 260.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 05 / 2016
Transaction ID : SA11A.478776
 Amount of Each Receipt this Period
 25.00
 Memo Item
 CONTRIBUTION

C. JONES, GLENN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 644 WILDWOOD
 City HEMET State CA Zip Code 92543-5810
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For:
 Primary General
 Other (specify)
 Aggregate Year-to-Date ▼
 210.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 03 / 2016
Transaction ID : SA11A.469243
 Amount of Each Receipt this Period
 160.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	210.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1843 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. JONES, HOWARD, R., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1001 NORTHFIELD PL N
 City REYNOLDSBURG State OH Zip Code 43068-1810
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 585.00

Date of Receipt 10 / 24 / 2016
Transaction ID : SA11A.445561
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

B. JONES, HOWARD, R., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1001 NORTHFIELD PL N
 City REYNOLDSBURG State OH Zip Code 43068-1810
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 585.00

Date of Receipt 11 / 04 / 2016
Transaction ID : SA11A.473436
 Amount of Each Receipt this Period 30.00
 Memo Item CONTRIBUTION

C. JONES, HOWARD, R., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1001 NORTHFIELD PL N
 City REYNOLDSBURG State OH Zip Code 43068-1810
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 585.00

Date of Receipt 11 / 04 / 2016
Transaction ID : SA11A.479548
 Amount of Each Receipt this Period 35.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	90.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1844 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. JONES JR, JACK, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4535 PUTNAM AVE
 City JACKSONVILLE State FL Zip Code 32207-6907
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RECYCLING ESCRAP Occupation (for Individual) RECYCLING
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 350.00

Date of Receipt
 11 / 03 / 2016
Transaction ID : SA11A.468910
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

B. JONES JR, JACK, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4535 PUTNAM AVE
 City JACKSONVILLE State FL Zip Code 32207-6907
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RECYCLING ESCRAP Occupation (for Individual) RECYCLING
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 350.00

Date of Receipt
 11 / 03 / 2016
Transaction ID : SA11A.468916
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

C. JONES JR, JACK, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4535 PUTNAM AVE
 City JACKSONVILLE State FL Zip Code 32207-6907
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RECYCLING ESCRAP Occupation (for Individual) RECYCLING
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 350.00

Date of Receipt
 11 / 03 / 2016
Transaction ID : SA11A.468917
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	150.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1845 OF 4311
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. JONES, LARRY, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 14027 MEMORIAL DR. #266

City HOUSTON	State TX	Zip Code 77079-6826
-----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) SELF EMPLOYED	Occupation (for Individual) GEOLOGIST
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
425.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		26		2016

Transaction ID : SA11A.449826

Amount of Each Receipt this Period
50.00

Memo Item
CONTRIBUTION

B. JONES, LARRY, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 14027 MEMORIAL DR. #266

City HOUSTON	State TX	Zip Code 77079-6826
-----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) SELF EMPLOYED	Occupation (for Individual) GEOLOGIST
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
425.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		26		2016

Transaction ID : SA11A.449847

Amount of Each Receipt this Period
50.00

Memo Item
CONTRIBUTION

C. JONES, LARRY, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 14027 MEMORIAL DR. #266

City HOUSTON	State TX	Zip Code 77079-6826
-----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) SELF EMPLOYED	Occupation (for Individual) GEOLOGIST
--	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
425.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		31		2016

Transaction ID : SA11A.458615

Amount of Each Receipt this Period
25.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	125.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1846 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. JONES, LINDA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 23710 COLLINFORD CT
 City KATY State TX Zip Code 77494-4509
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 282.00

Date of Receipt 11 / 02 / 2016
Transaction ID : SA11A.465896
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

B. JONES, MARTIN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1443 N HOMER ST
 City LANSING State MI Zip Code 48912-5075
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 11 / 04 / 2016
Transaction ID : SA11A.473301
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

C. JONES, NANCY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5872 BRIERGLEN AVE.
 City MEMPHIS State TN Zip Code 38120-2312
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 305.00

Date of Receipt 10 / 25 / 2016
Transaction ID : SA11A.448600
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	150.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1847 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
Team Ryan

A. JONES, NANCY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5872 BRIERGLEN AVE.
 City MEMPHIS State TN Zip Code 38120-2312
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 305.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 25 / 2016
Transaction ID : SA11A.448626
 Amount of Each Receipt this Period
 50.00
 Memo Item
 CONTRIBUTION

B. JONES, NANCY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5872 BRIERGLEN AVE.
 City MEMPHIS State TN Zip Code 38120-2312
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 305.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 26 / 2016
Transaction ID : SA11A.450659
 Amount of Each Receipt this Period
 25.00
 Memo Item
 CONTRIBUTION

C. JONES, NANCY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5872 BRIERGLEN AVE.
 City MEMPHIS State TN Zip Code 38120-2312
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 305.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 26 / 2016
Transaction ID : SA11A.450661
 Amount of Each Receipt this Period
 25.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	100.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1848 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. JONES, NANCY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5872 BRIERGLEN AVE.
 City MEMPHIS State TN Zip Code 38120-2312
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 305.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 26 / 2016
Transaction ID : SA11A.450685
 Amount of Each Receipt this Period
 25.00
 Memo Item
 CONTRIBUTION

B. JONES, NANCY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5872 BRIERGLEN AVE.
 City MEMPHIS State TN Zip Code 38120-2312
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 305.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 26 / 2016
Transaction ID : SA11A.450690
 Amount of Each Receipt this Period
 25.00
 Memo Item
 CONTRIBUTION

C. JONES, RICHARD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 12916 BAY PLANTATION DR
 City JACKSONVILLE State FL Zip Code 32223-0784
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) PEGASYSTEMS INC Occupation (for Individual) DIRECTOR
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 6000.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 25 / 2016
Transaction ID : SA11A.452153
 Amount of Each Receipt this Period
 5000.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	5050.00
TOTAL This Period (last page this line number only).....▶	

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1849 OF 4311
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. JONES, ROBERT, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 104 PELCZAR ROAD

City DRACUT	State MA	Zip Code 01826-4118
----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) FOCUS TECHNOLOGY GROUP	Occupation (for Individual) BUSINESS DEVELOPMENT
---	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
280.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		25		2016

Transaction ID : SA11A.448323

Amount of Each Receipt this Period
30.00

Memo Item
CONTRIBUTION

B. JONES, ROBIN, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1 LITTLE PINE ROAD

City BEDFORD CORNERS	State NY	Zip Code 10549-4109
-------------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11		06		2016

Transaction ID : SA11A.476707

Amount of Each Receipt this Period
250.00

Memo Item
CONTRIBUTION

C. JONES, ROBERT, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 104 PELCZAR ROAD

City DRACUT	State MA	Zip Code 01826-4118
----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) FOCUS TECHNOLOGY GROUP	Occupation (for Individual) BUSINESS DEVELOPMENT
---	---

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
280.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11		05		2016

Transaction ID : SA11A.478744

Amount of Each Receipt this Period
30.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	310.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 1850 OF 4311
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. JONES, STANLEY, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 101 CAREFREE CT.

City GREENWOOD	State IN	Zip Code 46142-8501
-------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	25	/	2016

Transaction ID : SA11A.448848

Amount of Each Receipt this Period
100.00

Memo Item CONTRIBUTION

B. JONES, STANLEY, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 101 CAREFREE CT.

City GREENWOOD	State IN	Zip Code 46142-8501
-------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	04	/	2016

Transaction ID : SA11A.471208

Amount of Each Receipt this Period
100.00

Memo Item CONTRIBUTION

C. JONES, STANLEY, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 101 CAREFREE CT.

City GREENWOOD	State IN	Zip Code 46142-8501
-------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	07	/	2016

Transaction ID : SA11A.476049

Amount of Each Receipt this Period
100.00

Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	300.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1851 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. JONES, STANLEY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 101 CAREFREE CT.
 City GREENWOOD State IN Zip Code 46142-8501
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 11 / 07 / 2016
Transaction ID : SA11A.476051
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

B. JONES, SUSAN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1317 S REISNER ST
 City INDIANAPOLIS State IN Zip Code 46221-1634
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 725.00

Date of Receipt 10 / 24 / 2016
Transaction ID : SA11A.449184
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

C. JONES, SUSAN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1317 S REISNER ST
 City INDIANAPOLIS State IN Zip Code 46221-1634
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 725.00

Date of Receipt 10 / 24 / 2016
Transaction ID : SA11A.449186
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 300.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1852 OF 4311
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. JONES, SUSAN, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1317 S REISNER ST

City INDIANAPOLIS	State IN	Zip Code 46221-1634
----------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
725.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		28		2016

Transaction ID : SA11A.456075

Amount of Each Receipt this Period
50.00

Memo Item CONTRIBUTION

B. JONES, SUSAN, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1317 S REISNER ST

City INDIANAPOLIS	State IN	Zip Code 46221-1634
----------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
725.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11		04		2016

Transaction ID : SA11A.473742

Amount of Each Receipt this Period
50.00

Memo Item CONTRIBUTION

C. JONES, THOMAS, C., ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 4831 SW PARKGATE BLVD
P

City PALM CITY	State FL	Zip Code 34990-4416
-------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
2250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		21		2016

Transaction ID : SA11A.444546

Amount of Each Receipt this Period
250.00

Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	350.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1853 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. JONES, THOMAS, C., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4831 SW PARKGATE BLVD
 P
 City PALM CITY State FL Zip Code 34990-4416
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 2250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 31 / 2016
Transaction ID : SA11A.458353
 Amount of Each Receipt this Period
 250.00
 Memo Item
 CONTRIBUTION

B. JONES, THOMAS, C., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4831 SW PARKGATE BLVD
 P
 City PALM CITY State FL Zip Code 34990-4416
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 2250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 31 / 2016
Transaction ID : SA11A.458372
 Amount of Each Receipt this Period
 250.00
 Memo Item
 CONTRIBUTION

C. JONES, THOMAS, C., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4831 SW PARKGATE BLVD
 P
 City PALM CITY State FL Zip Code 34990-4416
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For:
 Primary General
 Other (specify)
 Aggregate Year-to-Date ▼
 2250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 04 / 2016
Transaction ID : SA11A.471889
 Amount of Each Receipt this Period
 250.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	750.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1854 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. JORDAN, DAVID, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 916 FAIRLAWN AVE
 City LIBERTYVILLE State IL Zip Code 60048-3046
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 209.00

Date of Receipt 11 / 03 / 2016
Transaction ID : SA11A.469334
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

B. JORDAN, JOHN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4644 BANCROFT DRIVE
 City NEW ORLEANS State LA Zip Code 70122-1208
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 315.00

Date of Receipt 11 / 04 / 2016
Transaction ID : SA11A.472433
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

C. JORDAN, MICHAEL, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 156 BLACKROCK ROAD
 City SWARTHMORE State PA Zip Code 19081-
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) CONDO ROCCIA KUPTIN LLP Occupation (for Individual) ATTORNEY
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 10 / 25 / 2016
Transaction ID : SA11A.447254
 Amount of Each Receipt this Period 200.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	275.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1855 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. JORGENSEN, ROBERT, R., DR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 6501 BOWIE DR.
 City SPRINGFIELD State VA Zip Code 22150-1306
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 370.00

Date of Receipt
 11 / 04 / 2016
Transaction ID : SA11A.472517
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

B. JORGENSEN, RULEN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 23147 CALIFA STREET
 City WOODLAND HILLS State CA Zip Code 91367-4216
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt
 10 / 28 / 2016
Transaction ID : SA11A.455998
 Amount of Each Receipt this Period 75.00
 Memo Item CONTRIBUTION

C. JOSEY, CLINTON, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4944 BRIARWOOD PLACE SUITE 560
 City DALLAS State TX Zip Code 75209-2004
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 750.00

Date of Receipt
 10 / 24 / 2016
Transaction ID : SA11A.445918
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	375.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1856 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
Team Ryan

A. JOST, HELEN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1 VERMONT DRIVE
 City PARAMUS State NJ Zip Code 07652-2348
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 225.00

Date of Receipt
 11 / 02 / 2016
Transaction ID : SA11A.467000
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

B. JOST, HELEN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1 VERMONT DRIVE
 City PARAMUS State NJ Zip Code 07652-2348
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 225.00

Date of Receipt
 11 / 02 / 2016
Transaction ID : SA11A.467026
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

C. JOSTOCK, JACQUELYN, R., MS.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1030 N STATE STREET APT 1L
 City CHICAGO State IL Zip Code 60610-2832
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt
 11 / 10 / 2016
Transaction ID : SA11A.468211
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 200.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1857 OF 4311
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. JOYCE, NOEL, M., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 24763 LAKE ROAD
 City BAY VILLAGE State OH Zip Code 44140-2736
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 775.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 06 / 2016
Transaction ID : SA11A.477962
 Amount of Each Receipt this Period
 200.00
 Memo Item
 CONTRIBUTION

B. JOYCE, RICHARD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO BOX 330
 City WELLSVILLE State NY Zip Code 14895-0330
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) OTIS EASTERN SERVICE LLC Occupation (for Individual) CONSTRUCTION MGR
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1600.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 20 / 2016
Transaction ID : SA11A.442142
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION

C. JOYCE, RICHARD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO BOX 330
 City WELLSVILLE State NY Zip Code 14895-0330
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) OTIS EASTERN SERVICE LLC Occupation (for Individual) CONSTRUCTION MGR
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1600.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 20 / 2016
Transaction ID : SA11A.442144
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	400.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1858 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. JOYCE, RICHARD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO BOX 330

City WELLSVILLE	State NY	Zip Code 14895-0330
--------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) OTIS EASTERN SERVICE LLC	Occupation (for Individual) CONSTRUCTION MGR
---	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1600.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 01 / 2016
Transaction ID : SA11A.462631

Amount of Each Receipt this Period
100.00

Memo Item
CONTRIBUTION

B. JOYCE, RICHARD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO BOX 330

City WELLSVILLE	State NY	Zip Code 14895-0330
--------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) OTIS EASTERN SERVICE LLC	Occupation (for Individual) CONSTRUCTION MGR
---	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1600.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 07 / 2016
Transaction ID : SA11A.475088

Amount of Each Receipt this Period
150.00

Memo Item
CONTRIBUTION

C. JOYNER, JOHNATHAN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 7950 MONTEREY BAY DR

City JACKSONVILLE	State FL	Zip Code 32256-2933
----------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) JOHN JOYNER	Occupation (for Individual) CFO
--	------------------------------------

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
650.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 06 / 2016
Transaction ID : SA11A.477577

Amount of Each Receipt this Period
100.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	350.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1859 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
Team Ryan

A. JOYNER, JOHNATHAN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 7950 MONTEREY BAY DR
 City JACKSONVILLE State FL Zip Code 32256-2933
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) JOHN JOYNER Occupation (for Individual) CFO
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 650.00

Date of Receipt
 11 / 06 / 2016
Transaction ID : SA11A.477578
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION

B. JOYNER, JOHNATHAN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 7950 MONTEREY BAY DR
 City JACKSONVILLE State FL Zip Code 32256-2933
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) JOHN JOYNER Occupation (for Individual) CFO
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 650.00

Date of Receipt
 11 / 06 / 2016
Transaction ID : SA11A.477589
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION

C. JOYNER, JOHNATHAN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 7950 MONTEREY BAY DR
 City JACKSONVILLE State FL Zip Code 32256-2933
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) JOHN JOYNER Occupation (for Individual) CFO
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 650.00

Date of Receipt
 11 / 06 / 2016
Transaction ID : SA11A.477590
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	300.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1860 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. JUDDS, RAYMOND, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 26899 WEST PARK HWY
 City ASHLAND State NE Zip Code 68003-3528
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 359.00

Date of Receipt 10 / 27 / 2016
Transaction ID : SA11A.453914
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

B. JUDDS, RAYMOND, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 26899 WEST PARK HWY
 City ASHLAND State NE Zip Code 68003-3528
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 359.00

Date of Receipt 11 / 04 / 2016
Transaction ID : SA11A.471028
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

C. JUDGE JR, JOHN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1095 SMARTTS LANE
 City LEESBURG State VA Zip Code 20176-4819
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) HUGHES NETWORK SYSTEMS Occupation (for Individual) ENGINEER
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 225.00

Date of Receipt 11 / 04 / 2016
Transaction ID : SA11A.471905
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	225.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1861 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. JUDSON, ROBERT, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3 TURTLE GROVE LANE
 City VILLAGE OF GOLF State FL Zip Code 33436-5626
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) KC FUNDING, LLC Occupation (for Individual) SCHOOL OWNER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 900.00

Date of Receipt 10 / 31 / 2016
Transaction ID : SA11A.458978
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

B. JUDSON, ROBERT, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3 TURTLE GROVE LANE
 City VILLAGE OF GOLF State FL Zip Code 33436-5626
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) KC FUNDING, LLC Occupation (for Individual) SCHOOL OWNER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 900.00

Date of Receipt 11 / 06 / 2016
Transaction ID : SA11A.477854
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

C. JULIAN , SAMUEL, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 12029 CASTLE ROW OVERLOOK
 City CARMEL State IN Zip Code 46033-3120
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) JULIAN FINANCIAL Occupation (for Individual) FINANCIAL ADVISOR
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 305.00

Date of Receipt 10 / 20 / 2016
Transaction ID : SA11A.441974
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	375.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1862 OF 4311
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. JULIAN , SAMUEL , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 12029 CASTLE ROW OVERLOOK
 City CARMEL State IN Zip Code 46033-3120
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) JULIAN FINANCIAL Occupation (for Individual) FINANCIAL ADVISOR
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 305.00

Date of Receipt 10 / 27 / 2016
Transaction ID : SA11A.453093
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

B. JUMPER, BILLY, S., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 14006 WOODTHORPE LN.
 City HOUSTON State TX Zip Code 77079-3241
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 650.00

Date of Receipt 10 / 26 / 2016
Transaction ID : SA11A.451354
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

C. JUMPER, BILLY, S., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 14006 WOODTHORPE LN.
 City HOUSTON State TX Zip Code 77079-3241
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 650.00

Date of Receipt 10 / 26 / 2016
Transaction ID : SA11A.451358
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶ 175.00
TOTAL This Period (last page this line number only).....▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1863 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. JUMPER, BILLY, S., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 14006 WOODTHORPE LN.
 City HOUSTON State TX Zip Code 77079-3241
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 650.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 26 / 2016
Transaction ID : SA11A.451359
 Amount of Each Receipt this Period
 50.00
 Memo Item
 CONTRIBUTION

B. JUMPER, BILLY, S., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 14006 WOODTHORPE LN.
 City HOUSTON State TX Zip Code 77079-3241
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 650.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 06 / 2016
Transaction ID : SA11A.477260
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION

C. JUMPER, BILLY, S., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 14006 WOODTHORPE LN.
 City HOUSTON State TX Zip Code 77079-3241
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 650.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 06 / 2016
Transaction ID : SA11A.477298
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	250.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1864 OF 4311
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. JUNE, ROHLAND, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 10846 DOWN YONDER LANE
 City WINDERMERE State FL Zip Code 34786-7912
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) JUNE ENGINEERING Occupation (for Individual) CIVIL ENGINEER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt **11 / 03 / 2016**
Transaction ID : SA11A.469007
 Amount of Each Receipt this Period 500.00
 Memo Item CONTRIBUTION

B. JUNTILA, HARRY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 7261 E. CENTER ST.
 City PORT ORCHARD State WA Zip Code 98366-8408
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt **10 / 31 / 2016**
Transaction ID : SA11A.458207
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

C. JUNTILA, HARRY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 7261 E. CENTER ST.
 City PORT ORCHARD State WA Zip Code 98366-8408
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt **10 / 31 / 2016**
Transaction ID : SA11A.458210
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	700.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1865 OF 4311
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. JUNTILA, HARRY, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 7261 E. CENTER ST.

City PORT ORCHARD	State WA	Zip Code 98366-8408
----------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		31		2016

Transaction ID : SA11A.458410

Amount of Each Receipt this Period
100.00

Memo Item CONTRIBUTION

B. JUSTO, EDUARDO, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 2100 NW 82

City MIAMI	State FL	Zip Code 33122-1507
---------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) THE AMERICAN VAULT LLC	Occupation (for Individual) OENER
---	--------------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
300.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11		03		2016

Transaction ID : SA11A.468980

Amount of Each Receipt this Period
300.00

Memo Item CONTRIBUTION

C. KAARLELA, CAROL, M., ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 6649 MADISON MCLEAN DRIVE

City MCLEAN	State VA	Zip Code 22101-2902
----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
300.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11		01		2016

Transaction ID : SA11A.461771

Amount of Each Receipt this Period
200.00

Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	600.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1866 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. KADRE, MANUEL, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5345 HAMMOCK DR
 City CORAL GABLES State FL Zip Code 33156-2103
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) MEDNAX INC Occupation (for Individual) EXECUTIVE
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 35000.00

Date of Receipt 10 / 24 / 2016
Transaction ID : SA11A.443492
 Amount of Each Receipt this Period 25000.00
 Memo Item
CONTRIBUTION

B. KAEDING, KEVIN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 7701 RIDGELAND DRIVE
 City BISMARCK State ND Zip Code 58503-6235
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) DCN,LLC Occupation (for Individual) DIRECTOR OF SALES
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 550.00

Date of Receipt 11 / 07 / 2016
Transaction ID : SA11A.474681
 Amount of Each Receipt this Period 150.00
 Memo Item
CONTRIBUTION

C. KAGAHASTIAN, MARISSA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5041 N. GLEN ARDEN AVENUE
 City COVINA State CA Zip Code 91724-1416
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) CBRE, INC. Occupation (for Individual) SR. LEGAL ADMIN. ASSISTANT
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 352.00

Date of Receipt 10 / 28 / 2016
Transaction ID : SA11A.461366
 Amount of Each Receipt this Period 25.00
 Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	25175.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1867 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
Team Ryan

A. KAGAHASTIAN, MARISSA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5041 N. GLEN ARDEN AVENUE
 City COVINA State CA Zip Code 91724-1416
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) CBRE, INC. Occupation (for Individual) SR. LEGAL ADMIN. ASSISTANT
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 352.00

Date of Receipt **11 / 04 / 2016**
Transaction ID : SA11A.473736
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

B. KAGAHASTIAN, MARISSA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5041 N. GLEN ARDEN AVENUE
 City COVINA State CA Zip Code 91724-1416
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) CBRE, INC. Occupation (for Individual) SR. LEGAL ADMIN. ASSISTANT
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 352.00

Date of Receipt **11 / 06 / 2016**
Transaction ID : SA11A.476744
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

C. KAGAHASTIAN, MARISSA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5041 N. GLEN ARDEN AVENUE
 City COVINA State CA Zip Code 91724-1416
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) CBRE, INC. Occupation (for Individual) SR. LEGAL ADMIN. ASSISTANT
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 352.00

Date of Receipt **11 / 04 / 2016**
Transaction ID : SA11A.479662
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	75.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1868 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name A. KAH, MARIANNE, , ,		Date of Receipt M M M / D D D / Y Y Y Y Y Y 10 / 24 / 2016
Mailing Address 6316 HASKELL		Transaction ID : SA11A.443698
City HOUSTON	State TX	Zip Code 77007-2008
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 300.00
Name of Employer (for Individual) CONOCO PHILLIPS	Occupation (for Individual) CHIEF ECONOMIST	<input type="checkbox"/> Memo Item CONTRIBUTION
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00	

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name B. KAISER, LYMAN, L., MR.,		Date of Receipt M M M / D D D / Y Y Y Y Y Y 10 / 27 / 2016
Mailing Address 5976 DEL PAZ DR.		Transaction ID : SA11A.456525
City COLORADO SPRINGS	State CO	Zip Code 80918-1706
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 50.00
Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED	<input type="checkbox"/> Memo Item CONTRIBUTION
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 275.00	

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name C. KAISER, LYMAN, L., MR.,		Date of Receipt M M M / D D D / Y Y Y Y Y Y 11 / 07 / 2016
Mailing Address 5976 DEL PAZ DR.		Transaction ID : SA11A.480003
City COLORADO SPRINGS	State CO	Zip Code 80918-1706
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 25.00
Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED	<input type="checkbox"/> Memo Item CONTRIBUTION
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Aggregate Year-to-Date ▼ 275.00	

SUBTOTAL of Receipts This Page (optional).....▶	375.00
TOTAL This Period (last page this line number only).....▶	

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1869 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
Team Ryan

A. KALETA, EDW, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 732 COURTLAND AVE
 City PARK RIDGE State IL Zip Code 60068-4861
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 31 / 2016
Transaction ID : SA11A.464543
 Amount of Each Receipt this Period
 250.00
 Memo Item
 CONTRIBUTION

B. KALETA, PAUL, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 19459 N 101ST STREET
 City SCOTTSDALE State AZ Zip Code 85255-3780
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) FIRST SOLAR Occupation (for Individual) GENERAL CONTRACTOR
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 26 / 2016
Transaction ID : SA11A.447749
 Amount of Each Receipt this Period
 1000.00
 Memo Item
 CONTRIBUTION

C. KALIN, ALAN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 507 ENTRADA WAY
 City MENLO PARK State CA Zip Code 94025-2340
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) INFORMATION REQUESTED PER BEST EFFORTS Occupation (for Individual) INFORMATION REQUESTED PER BEST EFFORTS
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 27 / 2016
Transaction ID : SA11A.452338
 Amount of Each Receipt this Period
 250.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	1500.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1870 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
Team Ryan

A. KALISKI, JANICE, G., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1665 GKENSIDE DRIVE
 City ROCKINGHAM State VA Zip Code 22801-2392
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 880.00

Date of Receipt 10 / 31 / 2016
Transaction ID : SA11A.458737
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

B. KALISKI, JANICE, G., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1665 GKENSIDE DRIVE
 City ROCKINGHAM State VA Zip Code 22801-2392
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 880.00

Date of Receipt 10 / 31 / 2016
Transaction ID : SA11A.458771
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

C. KALLEN, NANCY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2324 NE 28 TH ST
 City LIGHTHOUSE POINT State FL Zip Code 33064-8236
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) J&N Occupation (for Individual) J&N
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 475.00

Date of Receipt 11 / 03 / 2016
Transaction ID : SA11A.468901
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 150.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1871 OF 4311
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/>	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. KALLEN, NANCY, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 2324 NE 28 TH ST

City LIGHTHOUSE POINT	State FL	Zip Code 33064-8236
--------------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) J&N	Occupation (for Individual) J&N
--	------------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
475.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11		03		2016

Transaction ID : SA11A.468902

Amount of Each Receipt this Period
50.00

Memo Item
CONTRIBUTION

B. KALLEN, NANCY, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 2324 NE 28 TH ST

City LIGHTHOUSE POINT	State FL	Zip Code 33064-8236
--------------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) J&N	Occupation (for Individual) J&N
--	------------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
475.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11		03		2016

Transaction ID : SA11A.468979

Amount of Each Receipt this Period
50.00

Memo Item
CONTRIBUTION

C. KALLEN, NANCY, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 2324 NE 28 TH ST

City LIGHTHOUSE POINT	State FL	Zip Code 33064-8236
--------------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) J&N	Occupation (for Individual) J&N
--	------------------------------------

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
475.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11		03		2016

Transaction ID : SA11A.468982

Amount of Each Receipt this Period
50.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	150.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1872 OF 4311
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. KALLEN, NANCY, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 2324 NE 28 TH ST

City LIGHTHOUSE POINT	State FL	Zip Code 33064-8236
--------------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) J&N	Occupation (for Individual) J&N
--	------------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
475.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	03	/	2016

Transaction ID : SA11A.468985

Amount of Each Receipt this Period
50.00

Memo Item
CONTRIBUTION

B. KALLOS, STEVEN, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 830 MOUNT KATAHDIN TRAIL

City JOHNS CREEK	State GA	Zip Code 30022-7104
---------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) ISLA INC.	Occupation (for Individual) PROF ENGINEER
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
480.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	26	/	2016

Transaction ID : SA11A.449780

Amount of Each Receipt this Period
25.00

Memo Item
CONTRIBUTION

C. KALLOS, STEVEN, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 830 MOUNT KATAHDIN TRAIL

City JOHNS CREEK	State GA	Zip Code 30022-7104
---------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) ISLA INC.	Occupation (for Individual) PROF ENGINEER
--	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
480.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	27	/	2016

Transaction ID : SA11A.453279

Amount of Each Receipt this Period
25.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	100.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1873 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. KALLOS, STEVEN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 830 MOUNT KATAHDIN TRAIL
 City JOHNS CREEK State GA Zip Code 30022-7104
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) ISLA INC. Occupation (for Individual) PROF ENGINEER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 480.00

Date of Receipt
 11 / 01 / 2016
Transaction ID : SA11A.462247
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

B. KALLOS, STEVEN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 830 MOUNT KATAHDIN TRAIL
 City JOHNS CREEK State GA Zip Code 30022-7104
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) ISLA INC. Occupation (for Individual) PROF ENGINEER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 480.00

Date of Receipt
 11 / 01 / 2016
Transaction ID : SA11A.462534
 Amount of Each Receipt this Period 30.00
 Memo Item CONTRIBUTION

C. KALLOS, STEVEN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 830 MOUNT KATAHDIN TRAIL
 City JOHNS CREEK State GA Zip Code 30022-7104
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) ISLA INC. Occupation (for Individual) PROF ENGINEER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 480.00

Date of Receipt
 10 / 30 / 2016
Transaction ID : SA11A.464946
 Amount of Each Receipt this Period 30.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	85.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1874 OF 4311
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. KALLOS, STEVEN, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 830 MOUNT KATAHDIN TRAIL

City JOHNS CREEK	State GA	Zip Code 30022-7104
---------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) ISLA INC.	Occupation (for Individual) PROF ENGINEER
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
480.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
11 / 04 / 2016

Transaction ID : SA11A.471079

Amount of Each Receipt this Period

30.00

Memo Item
CONTRIBUTION

B. KALLOS, STEVEN, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 830 MOUNT KATAHDIN TRAIL

City JOHNS CREEK	State GA	Zip Code 30022-7104
---------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) ISLA INC.	Occupation (for Individual) PROF ENGINEER
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
480.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
11 / 04 / 2016

Transaction ID : SA11A.472262

Amount of Each Receipt this Period

30.00

Memo Item
CONTRIBUTION

C. KALOGEROS, GARY, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 273 KEEFAUVER ROAD

City JOHNSON CITY	State TN	Zip Code 37615-4413
----------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) PEERLESS STEAK HOUSE	Occupation (for Individual) PRESIDENT
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
450.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
10 / 26 / 2016

Transaction ID : SA11A.449755

Amount of Each Receipt this Period

150.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	210.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1875 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. KALT, MICHAEL, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4403 VEREDA LUNA LLENA
 City SAN DIEGO State CA Zip Code 92130-2666
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) WILSON TURNER KOSMO LLP Occupation (for Individual) ATTORNEY
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 10 / 23 / 2016
Transaction ID : SA11A.446576
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

B. KALT, MICHAEL, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4403 VEREDA LUNA LLENA
 City SAN DIEGO State CA Zip Code 92130-2666
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) WILSON TURNER KOSMO LLP Occupation (for Individual) ATTORNEY
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 10 / 31 / 2016
Transaction ID : SA11A.458856
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

C. KALT, MICHAEL, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4403 VEREDA LUNA LLENA
 City SAN DIEGO State CA Zip Code 92130-2666
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) WILSON TURNER KOSMO LLP Occupation (for Individual) ATTORNEY
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 11 / 04 / 2016
Transaction ID : SA11A.470973
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	300.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1876 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. KALTENBACH, JOHN, L., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2313 S VENICE DRIVE
 City PEARLAND State TX Zip Code 77581-7508
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 350.00

Date of Receipt 10 / 25 / 2016
Transaction ID : SA11A.447331
 Amount of Each Receipt this Period 150.00
 Memo Item CONTRIBUTION

B. KALUDIS, GEORGE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 616 BOSCOBEL STREET
 City NASHVILLE State TN Zip Code 37206-4141
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) KALUDIS CONSULTING Occupation (for Individual) MANAGEMENT CONSULTANT
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 230.00

Date of Receipt 10 / 21 / 2016
Transaction ID : SA11A.444271
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

C. KALUDIS, GEORGE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 616 BOSCOBEL STREET
 City NASHVILLE State TN Zip Code 37206-4141
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) KALUDIS CONSULTING Occupation (for Individual) MANAGEMENT CONSULTANT
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 230.00

Date of Receipt 10 / 25 / 2016
Transaction ID : SA11A.452224
 Amount of Each Receipt this Period 30.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	205.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1877 OF 4311
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
Team Ryan

A. KALUDIS, GEORGE, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 616 BOSCOBEL STREET

City NASHVILLE	State TN	Zip Code 37206-4141
-------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) KALUDIS CONSULTING	Occupation (for Individual) MANAGEMENT CONSULTANT
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
230.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	31	/	2016

Transaction ID : SA11A.458663

Amount of Each Receipt this Period
25.00

Memo Item
CONTRIBUTION

B. KAMIN, DAVID, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 10380 WILSHIRE BLVD
1504

City LOS ANGELES	State CA	Zip Code 90024-4763
---------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) SELF EMPLOYED	Occupation (for Individual) PHYSICIAN
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
750.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	01	/	2016

Transaction ID : SA11A.467429

Amount of Each Receipt this Period
250.00

Memo Item
CONTRIBUTION

C. KAMPMEIER, CURT, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1000 URLIN AVE
212

City COLUMBUS	State OH	Zip Code 43212-3362
------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
1283.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	28	/	2016

Transaction ID : SA11A.455322

Amount of Each Receipt this Period
100.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	375.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1878 OF 4311
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
Team Ryan

A. KAMPMEIER, CURT, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1000 URLIN AVE
 212
 City COLUMBUS State OH Zip Code 43212-3362
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1283.00

Date of Receipt 10 / 28 / 2016
Transaction ID : SA11A.455329
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

B. KAMPMEIER, CURT, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1000 URLIN AVE
 212
 City COLUMBUS State OH Zip Code 43212-3362
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1283.00

Date of Receipt 10 / 28 / 2016
Transaction ID : SA11A.455331
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

C. KAMPMEIER, CURT, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1000 URLIN AVE
 212
 City COLUMBUS State OH Zip Code 43212-3362
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1283.00

Date of Receipt 11 / 02 / 2016
Transaction ID : SA11A.466635
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶ 300.00
TOTAL This Period (last page this line number only).....▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1879 OF 4311
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. KAMPMEIER, CURT, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1000 URLIN AVE
 212
 City COLUMBUS State OH Zip Code 43212-3362
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1283.00

Date of Receipt
 11 / 03 / 2016
Transaction ID : SA11A.474390
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION

B. KAMPMEIER, CURT, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1000 URLIN AVE
 212
 City COLUMBUS State OH Zip Code 43212-3362
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1283.00

Date of Receipt
 11 / 04 / 2016
Transaction ID : SA11A.479368
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION

C. KANE, DAVID, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 141 BOULDERWOOD DRIVE
 City BERNARDSVILLE State NJ Zip Code 07924-1403
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt
 10 / 28 / 2016
Transaction ID : SA11A.456266
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	300.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1880 OF 4311
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. KANE, DAVID, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 141 BOULDERWOOD DRIVE

City BERNARDSVILLE	State NJ	Zip Code 07924-1403
-----------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
400.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	03	/	2016

Transaction ID : SA11A.469109

Amount of Each Receipt this Period
100.00

Memo Item CONTRIBUTION

B. KANE, DAVID, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 141 BOULDERWOOD DRIVE

City BERNARDSVILLE	State NJ	Zip Code 07924-1403
-----------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
400.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	07	/	2016

Transaction ID : SA11A.476392

Amount of Each Receipt this Period
100.00

Memo Item CONTRIBUTION

C. KANE, ED, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 45 REESE RD

City MILLVILLE	State NJ	Zip Code 08332-6227
-------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) BODYBIO	Occupation (for Individual) CEO
--	------------------------------------

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
300.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	28	/	2016

Transaction ID : SA11A.455772

Amount of Each Receipt this Period
100.00

Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	300.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1881 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
Team Ryan

A. KANE, ED, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 45 REESE RD
 City MILLVILLE State NJ Zip Code 08332-6227
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) BODYBIO Occupation (for Individual) CEO
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 28 / 2016
Transaction ID : SA11A.455797
 Amount of Each Receipt this Period
 100.00
 Memo Item
CONTRIBUTION

B. KANE, RICHARD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 14000 PAWNEE LN
 City LEAWOOD State KS Zip Code 66224-1143
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 409.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 02 / 2016
Transaction ID : SA11A.470044
 Amount of Each Receipt this Period
 50.00
 Memo Item
CONTRIBUTION

C. KANE, RICHARD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 14000 PAWNEE LN
 City LEAWOOD State KS Zip Code 66224-1143
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 409.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 07 / 2016
Transaction ID : SA11A.475027
 Amount of Each Receipt this Period
 50.00
 Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	200.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1882 OF 4311
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. KANTER, VALERIE, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 127 JAFFREY RD

City MALVERN	State PA	Zip Code 19355-3417
-----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
226.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
11		07		2016

Transaction ID : SA11A.480070

Amount of Each Receipt this Period
113.00

Memo Item
CONTRIBUTION

B. KANTER, VALERIE, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 127 JAFFREY RD

City MALVERN	State PA	Zip Code 19355-3417
-----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
226.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
11		07		2016

Transaction ID : SA11A.480072

Amount of Each Receipt this Period
113.00

Memo Item
CONTRIBUTION

C. KAPLAN, ROBERT, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 2110 TIMBERLINE TRL

City WOODSTOCK	State IL	Zip Code 60098-8782
-------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
320.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
10		21		2016

Transaction ID : SA11A.444118

Amount of Each Receipt this Period
25.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	251.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1883 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. KAPLAN, ROBERT, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2110 TIMBERLINE TRL
 City WOODSTOCK State IL Zip Code 60098-8782
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 320.00

Date of Receipt 10 / 28 / 2016
Transaction ID : SA11A.455253
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

B. KAPLAN, ROBERT, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2110 TIMBERLINE TRL
 City WOODSTOCK State IL Zip Code 60098-8782
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 320.00

Date of Receipt 10 / 28 / 2016
Transaction ID : SA11A.455255
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

C. KAPLAN, ROBERT, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2110 TIMBERLINE TRL
 City WOODSTOCK State IL Zip Code 60098-8782
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 320.00

Date of Receipt 10 / 28 / 2016
Transaction ID : SA11A.455266
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 75.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1884 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. KAPLAN, ROBERT, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2110 TIMBERLINE TRL
 City WOODSTOCK State IL Zip Code 60098-8782
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 320.00

Date of Receipt 10 / 28 / 2016
Transaction ID : SA11A.455267
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

B. KAPLAN, ROBERT, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2110 TIMBERLINE TRL
 City WOODSTOCK State IL Zip Code 60098-8782
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 320.00

Date of Receipt 11 / 07 / 2016
Transaction ID : SA11A.475995
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

C. KAPLAN, STEPHEN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 434 MARGUERITA AVE
 City SANTA MONICA State CA Zip Code 90402-1916
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) OKTREE CAPITAL Occupation (for Individual) INVESTOR
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 50000.00

Date of Receipt 11 / 03 / 2016
Transaction ID : SA11A.465240
 Amount of Each Receipt this Period 50000.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	50075.00
TOTAL This Period (last page this line number only).....	

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1885 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. KAPLAN, WARREN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 15340 PEPPER LANE
 City SARATOGA State CA Zip Code 95070-6427
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 323.00

Date of Receipt 10 / 27 / 2016
Transaction ID : SA11A.457102
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

B. KAPP, HOWARD, , MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 6300 NORTHWOOD AVE 3W
 City CLAYTON State MO Zip Code 63105-2263
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 11 / 05 / 2016
Transaction ID : SA11A.478882
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

C. KAPP, HOWARD, , MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 6300 NORTHWOOD AVE 3W
 City CLAYTON State MO Zip Code 63105-2263
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 11 / 05 / 2016
Transaction ID : SA11A.479068
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	300.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1886 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. KAPP, HOWARD, , MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 6300 NORTHWOOD AVE
 3W
 City CLAYTON State MO Zip Code 63105-2263
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 300.00

Date of Receipt
 11 / 05 / 2016
Transaction ID : SA11A.479075
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION

B. KAPP, JASON, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4403 DESERT VIEW
 City SAN ANTONIO State TX Zip Code 78217-3631
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) VERSACOR Occupation (for Individual) PEST CONTROL
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 275.00

Date of Receipt
 10 / 23 / 2016
Transaction ID : SA11A.446537
 Amount of Each Receipt this Period
 50.00
 Memo Item
 CONTRIBUTION

C. KAPP, JASON, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4403 DESERT VIEW
 City SAN ANTONIO State TX Zip Code 78217-3631
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) VERSACOR Occupation (for Individual) PEST CONTROL
 Receipt For:
 Primary General
 Other (specify)
 Aggregate Year-to-Date ▼
 275.00

Date of Receipt
 11 / 04 / 2016
Transaction ID : SA11A.471604
 Amount of Each Receipt this Period
 50.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	200.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1887 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. KARABINUS, JOSEPH, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5756 TOWNSHIP RD 466

City LAKEVILLE	State OH	Zip Code 44638-9741
-------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
519.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 28 / 2016

Transaction ID : SA11A.455841

Amount of Each Receipt this Period
25.00

Memo Item
CONTRIBUTION

B. KARABINUS, JOSEPH, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5756 TOWNSHIP RD 466

City LAKEVILLE	State OH	Zip Code 44638-9741
-------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
519.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 28 / 2016

Transaction ID : SA11A.455845

Amount of Each Receipt this Period
25.00

Memo Item
CONTRIBUTION

C. KARABINUS, JOSEPH, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5756 TOWNSHIP RD 466

City LAKEVILLE	State OH	Zip Code 44638-9741
-------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
519.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 30 / 2016

Transaction ID : SA11A.459907

Amount of Each Receipt this Period
25.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	75.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1888 OF 4311
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. KARABINUS, JOSEPH, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 5756 TOWNSHIP RD 466

City LAKEVILLE	State OH	Zip Code 44638-9741
-------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
519.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		30		2016

Transaction ID : SA11A.459908

Amount of Each Receipt this Period
25.00

Memo Item CONTRIBUTION

B. KARABINUS, JOSEPH, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 5756 TOWNSHIP RD 466

City LAKEVILLE	State OH	Zip Code 44638-9741
-------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
519.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11		04		2016

Transaction ID : SA11A.473676

Amount of Each Receipt this Period
25.00

Memo Item CONTRIBUTION

C. KARAFIATH, DEANNA, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 10209 BROOKMOOR DR

City SILVER SPRING	State MD	Zip Code 20901-2620
-----------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) VAIL CORP	Occupation (for Individual) SKI INSTRUCTOR
--	---

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
225.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11		03		2016

Transaction ID : SA11A.469105

Amount of Each Receipt this Period
100.00

Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	150.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1889 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
Team Ryan

A. KARAFIATH, DEANNA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 10209 BROOKMOOR DR
 City SILVER SPRING State MD Zip Code 20901-2620
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) VAIL CORP Occupation (for Individual) SKI INSTRUCTOR
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 225.00

Date of Receipt 11 / 03 / 2016
Transaction ID : SA11A.469106
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

B. KARDES, ROBERT, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 909 RIVER DR
 City HAMMOND State IN Zip Code 46324-3056
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 10 / 21 / 2016
Transaction ID : SA11A.444285
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

C. KARDES, ROBERT, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 909 RIVER DR
 City HAMMOND State IN Zip Code 46324-3056
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 10 / 27 / 2016
Transaction ID : SA11A.453385
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶ 150.00
TOTAL This Period (last page this line number only).....▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1890 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. KARLOVEC, LUCIEN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 136 LONG POINT DRIVE
 City AMELIA ISLAND State FL Zip Code 32034-6406
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 28 / 2016
Transaction ID : SA11A.454739
 Amount of Each Receipt this Period
 500.00
 Memo Item
 CONTRIBUTION

B. KARLSEN, LIND, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address UNIT 9800, BOX 299
 City DPO State AP Zip Code 96303-0299
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 26 / 2016
Transaction ID : SA11A.454294
 Amount of Each Receipt this Period
 50.00
 Memo Item
 CONTRIBUTION

C. KARLSEN, LIND, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address UNIT 9800, BOX 299
 City DPO State AP Zip Code 96303-0299
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 03 / 2016
Transaction ID : SA11A.469258
 Amount of Each Receipt this Period
 50.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	600.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1891 OF 4311
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. KARLSEN, LIND, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address UNIT 9800, BOX 299
 City DPO State AP Zip Code 96303-0299
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 07 / 2016
Transaction ID : SA11A.476619
 Amount of Each Receipt this Period
 50.00
 Memo Item
 CONTRIBUTION

B. KARNAI, ALICE, L., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 31 EARLY STREET APT 1A
 City MORRISTOWN State NJ Zip Code 07960-3801
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 25 / 2016
Transaction ID : SA11A.447425
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION

C. KARWICK, BERNARD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 12632 ROAD G
 City CORTEZ State CO Zip Code 81321-9570
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) DIRECTOR Occupation (for Individual) CAMPBIRD MANAGEMENT
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 550.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 04 / 2016
Transaction ID : SA11A.474066
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	250.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1892 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. KASPUTYS, JOSEPH, E., MR,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1000 WINTER STREET
 City WALTHAM State MA Zip Code 02451-1436
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) ENTREPRENEUR
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1050.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 28 / 2016
Transaction ID : SA11A.456001
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION

B. KASPUTYS, JOSEPH, E., MR,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1000 WINTER STREET
 City WALTHAM State MA Zip Code 02451-1436
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) ENTREPRENEUR
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1050.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 04 / 2016
Transaction ID : SA11A.471418
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION

C. KASSAL, HEIDI, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 22475 E. HIDDEN TRAIL DRIVE
 City PARKER State CO Zip Code 80138-8846
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) MY FAMILY Occupation (for Individual) MY FAMILY
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 06 / 2016
Transaction ID : SA11A.477222
 Amount of Each Receipt this Period
 50.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	250.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1893 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. KASSAL, HEIDI, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 22475 E. HIDDEN TRAIL DRIVE
 City PARKER State CO Zip Code 80138-8846
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) MY FAMILY Occupation (for Individual) MY FAMILY
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt
 11 / 06 / 2016
Transaction ID : SA11A.477232
 Amount of Each Receipt this Period 50.00
 Memo Item
 CONTRIBUTION

B. KASSAL, HEIDI, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 22475 E. HIDDEN TRAIL DRIVE
 City PARKER State CO Zip Code 80138-8846
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) MY FAMILY Occupation (for Individual) MY FAMILY
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt
 11 / 06 / 2016
Transaction ID : SA11A.477244
 Amount of Each Receipt this Period 50.00
 Memo Item
 CONTRIBUTION

C. KASSAL, HEIDI, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 22475 E. HIDDEN TRAIL DRIVE
 City PARKER State CO Zip Code 80138-8846
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) MY FAMILY Occupation (for Individual) MY FAMILY
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt
 11 / 06 / 2016
Transaction ID : SA11A.477246
 Amount of Each Receipt this Period 50.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	150.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1894 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. KASTEN, G. FREDERICK, , , JR.
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 160 LOGGERHEAD POINT

City VERO BEACH	State FL	Zip Code 32963-4405
--------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) RETIRED	Occupation (for Individual) RETIRED
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
15000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	03	/	2016

Transaction ID : SA11A.465192

Amount of Each Receipt this Period
10000.00

Memo Item CONTRIBUTION

B. KASZTON, WILLIAM, , MR.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 41 VAN GOGH WAY

City COTO DE CAZA	State CA	Zip Code 92679-8503
----------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	26	/	2016

Transaction ID : SA11A.449920

Amount of Each Receipt this Period
200.00

Memo Item CONTRIBUTION

C. KASZTON, WILLIAM, , MR.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 41 VAN GOGH WAY

City COTO DE CAZA	State CA	Zip Code 92679-8503
----------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
1250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	05	/	2016

Transaction ID : SA11A.478455

Amount of Each Receipt this Period
100.00

Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	10300.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1895 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. KASZTON, WILLIAM, , MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 41 VAN GOGH WAY
 City COTO DE CAZA State CA Zip Code 92679-8503
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1250.00

Date of Receipt 11 / 05 / 2016
Transaction ID : SA11A.478457
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

B. KATERNDAHL, RICHARD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 15 MOODY CT.
 City SAN RAFAEL State CA Zip Code 94901-1028
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) ATTORNEY
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 10 / 26 / 2016
Transaction ID : SA11A.450255
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

C. KATERNDAHL, RICHARD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 15 MOODY CT.
 City SAN RAFAEL State CA Zip Code 94901-1028
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) ATTORNEY
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 11 / 05 / 2016
Transaction ID : SA11A.478511
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	200.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1896 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. KATHARINE, LIFSEY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 23217 N119TH DRIVE
 City SUN CITY State AZ Zip Code 85373-
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) KATHARINE LIFSEY Occupation (for Individual) RECEPTIONIST
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 275.00

Date of Receipt 10 / 26 / 2016
Transaction ID : SA11A.454333
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

B. KATHARINE, LIFSEY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 23217 N119TH DRIVE
 City SUN CITY State AZ Zip Code 85373-
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) KATHARINE LIFSEY Occupation (for Individual) RECEPTIONIST
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 275.00

Date of Receipt 10 / 26 / 2016
Transaction ID : SA11A.454340
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

C. KATZEN, AMELIA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 40 NONANTUM STREET
 City NEWTON State MA Zip Code 02458-2434
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 10 / 26 / 2016
Transaction ID : SA11A.449759
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶ 300.00
TOTAL This Period (last page this line number only).....▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 1897 OF 4311
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. KAUFFMAN, GORDON, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 2006 HAY TERRACE
City EASTON State PA Zip Code 18042-4617
FEC ID number of contributing federal political committee. **C**
Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 409.00

Date of Receipt 10 / 25 / 2016
Transaction ID : SA11A.448727
Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

B. KAUFFMAN, JOHN, H., MR., III
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 14319 MUIRFIELD LANE
City HOUSTON State TX Zip Code 77095-3409
FEC ID number of contributing federal political committee. **C**
Name of Employer (for Individual) JOHN H KAUFFMAN III Occupation (for Individual) PRESIDENT
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 700.00

Date of Receipt 10 / 21 / 2016
Transaction ID : SA11A.444576
Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

C. KAUFFMAN, JOHN, H., MR., III
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 14319 MUIRFIELD LANE
City HOUSTON State TX Zip Code 77095-3409
FEC ID number of contributing federal political committee. **C**
Name of Employer (for Individual) JOHN H KAUFFMAN III Occupation (for Individual) PRESIDENT
Receipt For: Primary General Other (specify)
Aggregate Year-to-Date ▼ 700.00

Date of Receipt 11 / 04 / 2016
Transaction ID : SA11A.472169
Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	300.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1898 OF 4311
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. KAUFMANN, BERNARD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 778 INDIAN HILLS RD.
 City FONTANA State WI Zip Code 53125-1549
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1050.00

Date of Receipt
 11 / 01 / 2016
Transaction ID : SA11A.467365
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION

B. KAUFMAN, DELMAR, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 7085 BRIDLEWOOD DR.
 City TRINITY State NC Zip Code 27370-7829
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) KAUFMAN TRAILERS OF NC, INC. Occupation (for Individual) CEO/OWNER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 2000.00

Date of Receipt
 10 / 21 / 2016
Transaction ID : SA11A.444442
 Amount of Each Receipt this Period
 2000.00
 Memo Item
 CONTRIBUTION

C. KAUFMAN, WAYNE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 616 JEFFERSON AVE.
 City GLEN DALE State WV Zip Code 26038-1326
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 275.00

Date of Receipt
 10 / 26 / 2016
Transaction ID : SA11A.450927
 Amount of Each Receipt this Period
 50.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	2150.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1899 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. KAUFMAN, WAYNE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 616 JEFFERSON AVE.
 City GLEN DALE State WV Zip Code 26038-1326
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 275.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 28 / 2016
Transaction ID : SA11A.456004
 Amount of Each Receipt this Period
 50.00
 Memo Item
 CONTRIBUTION

B. KAUFMAN, WAYNE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 616 JEFFERSON AVE.
 City GLEN DALE State WV Zip Code 26038-1326
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 275.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 04 / 2016
Transaction ID : SA11A.471902
 Amount of Each Receipt this Period
 50.00
 Memo Item
 CONTRIBUTION

C. KAZOUR, JOHN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 200 MULBERRY DR.
 City METAIRIE State LA Zip Code 70005-4017
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) PETROTECH, INC. Occupation (for Individual) EXECUTIVE
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 450.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 24 / 2016
Transaction ID : SA11A.445817
 Amount of Each Receipt this Period
 250.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	350.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1900 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
Team Ryan

A. KEARNS, RICHARD, B., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 14419 OPEN MEADOW COURT W
 City CHESTERFIELD State MO Zip Code 63017-9627
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt **10 / 31 / 2016**
Transaction ID : SA11A.457280
 Amount of Each Receipt this Period 1000.00
 Memo Item CONTRIBUTION

B. KEATING, MARY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 10276 RIVERSIDE DR
 City PALM BEACH GARDENS State FL Zip Code 33410-4852
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) KEATING MOORE CONST Occupation (for Individual) CFO
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt **10 / 20 / 2016**
Transaction ID : SA11A.442424
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

C. KEATING, MARY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 10276 RIVERSIDE DR
 City PALM BEACH GARDENS State FL Zip Code 33410-4852
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) KEATING MOORE CONST Occupation (for Individual) CFO
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt **11 / 04 / 2016**
Transaction ID : SA11A.472093
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	1200.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1901 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
Team Ryan

A. KECK, ALLAN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 13622 PASEO DE LA HUERTA
 City POWAY State CA Zip Code 92064-2100
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) TRIMARK R. W. SMITH AND CO Occupation (for Individual) PRESIDENT
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 500.00

Date of Receipt **10 / 26 / 2016**
Transaction ID : SA11A.454567
 Amount of Each Receipt this Period 500.00
 Memo Item CONTRIBUTION

B. KEEFE, ROBERT, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1301 SARASOTA CENTER BLVD NA
 City SARASOTA State FL Zip Code 34240-7852
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) SELF
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 522.00

Date of Receipt **11 / 01 / 2016**
Transaction ID : SA11A.462518
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

C. KEEFE, ROBERT, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1301 SARASOTA CENTER BLVD NA
 City SARASOTA State FL Zip Code 34240-7852
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) SELF
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 522.00

Date of Receipt **11 / 01 / 2016**
Transaction ID : SA11A.462520
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	550.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1902 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
Team Ryan

A. KEEGAN, HOWARD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1029 RAY STREET
 City MANCHESTER State NH Zip Code 03104-1619
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 04 / 2016
Transaction ID : SA11A.467488
 Amount of Each Receipt this Period
 50.00
 Memo Item
 CONTRIBUTION

B. KEEHAN, DONALD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 951 JAYCOX RD.
 City AVON State OH Zip Code 44011-1351
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) APC,INC. Occupation (for Individual) SALES ENGINEER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 600.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 28 / 2016
Transaction ID : SA11A.455967
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION

C. KEEHAN, DONALD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 951 JAYCOX RD.
 City AVON State OH Zip Code 44011-1351
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) APC,INC. Occupation (for Individual) SALES ENGINEER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 600.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 04 / 2016
Transaction ID : SA11A.472853
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	250.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1903 OF 4311
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. KEENAN, SANDY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 12303 OAKLAND HILLS POINT
 City KNOXVILLE State TN Zip Code 37934-3738
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 2000.00

Date of Receipt 10 / 21 / 2016
Transaction ID : SA11A.447125
 Amount of Each Receipt this Period 2000.00
 Memo Item CONTRIBUTION

B. KEENE, CATHERINE, U., MRS.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3509 WINDSOR COURT
 City COLLEYVILLE State TX Zip Code 76034-4801
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SOUTHERN METHODIST U Occupation (for Individual) PROFESSOR
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 2000.00

Date of Receipt 10 / 25 / 2016
Transaction ID : SA11A.447292
 Amount of Each Receipt this Period 2000.00
 Memo Item CONTRIBUTION

C. KEINATH, WARREN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 24 RAVENS POINTE DR.
 City LAKE SAINT LOUIS State MO Zip Code 63367-2238
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 5010.00

Date of Receipt 10 / 28 / 2016
Transaction ID : SA11A.456420
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 4050.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1904 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
KEINATH, WARREN, , ,

Mailing Address 24 RAVENS POINTE DR.

City LAKE SAINT LOUIS	State MO	Zip Code 63367-2238
--------------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
5010.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 31 / 2016

Transaction ID : SA11A.458248

Amount of Each Receipt this Period
250.00

Memo Item CONTRIBUTION

B. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
KEINATH, WARREN, , ,

Mailing Address 24 RAVENS POINTE DR.

City LAKE SAINT LOUIS	State MO	Zip Code 63367-2238
--------------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
5010.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 31 / 2016

Transaction ID : SA11A.458249

Amount of Each Receipt this Period
250.00

Memo Item CONTRIBUTION

C. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
KEINATH, WARREN, , ,

Mailing Address 24 RAVENS POINTE DR.

City LAKE SAINT LOUIS	State MO	Zip Code 63367-2238
--------------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
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Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
5010.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 30 / 2016

Transaction ID : SA11A.459611

Amount of Each Receipt this Period
100.00

Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	600.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1905 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
KEINATH, WARREN, , ,

Mailing Address 24 RAVENS POINTE DR.

City LAKE SAINT LOUIS	State MO	Zip Code 63367-2238
--------------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
5010.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 30 / 2016

Transaction ID : SA11A.459612

Amount of Each Receipt this Period
100.00

Memo Item CONTRIBUTION

B. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
KEINATH, WARREN, , ,

Mailing Address 24 RAVENS POINTE DR.

City LAKE SAINT LOUIS	State MO	Zip Code 63367-2238
--------------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
5010.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 04 / 2016

Transaction ID : SA11A.472157

Amount of Each Receipt this Period
100.00

Memo Item CONTRIBUTION

C. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
KEINATH, WARREN, , ,

Mailing Address 24 RAVENS POINTE DR.

City LAKE SAINT LOUIS	State MO	Zip Code 63367-2238
--------------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
5010.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 04 / 2016

Transaction ID : SA11A.473672

Amount of Each Receipt this Period
25.00

Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	225.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1906 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. KEINATH, WARREN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 24 RAVENS POINTE DR.
 City LAKE SAINT LOUIS State MO Zip Code 63367-2238
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 5010.00

Date of Receipt 11 / 07 / 2016
Transaction ID : SA11A.480214
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

B. KEISER, MICHAEL, L., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2450 N LAKEVIEW AVENUE
 City CHICAGO State IL Zip Code 60614-2878
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF Occupation (for Individual) OWNER OF GOLF RESORT
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 55000.00

Date of Receipt 11 / 01 / 2016
Transaction ID : SA11A.461903
 Amount of Each Receipt this Period 5000.00
 Memo Item CONTRIBUTION

C. KEISTER, SHARMAN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 6155 DEL MONTE
 City HOUSTON State TX Zip Code 77057-3517
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 10 / 27 / 2016
Transaction ID : SA11A.452968
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	5125.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1907 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. KEISTER, SHARMAN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 6155 DEL MONTE
 City HOUSTON State TX Zip Code 77057-3517
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 27 / 2016
Transaction ID : SA11A.452981
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION

B. KEITH, ALLAN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address P. O. BOX 247
 City CHILMARK State MA Zip Code 02535-0247
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 350.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 24 / 2016
Transaction ID : SA11A.445839
 Amount of Each Receipt this Period
 50.00
 Memo Item
 CONTRIBUTION

C. KEITH, KEVIN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 186 HAMILTON ST
 E
 City SOUTHBRIDGE State MA Zip Code 01550-1881
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) FALL PREVENTION ALARMS, INC Occupation (for Individual) SALES AND MANUFACTURING
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 26 / 2016
Transaction ID : SA11A.451049
 Amount of Each Receipt this Period
 50.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	200.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1908 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. KEITH, KEVIN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 186 HAMILTON ST
 E
 City SOUTHBRIDGE State MA Zip Code 01550-1881
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) FALL PREVENTION ALARMS, INC Occupation (for Individual) SALES AND MANUFACTURING
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 300.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 04 / 2016
Transaction ID : SA11A.473650
 Amount of Each Receipt this Period
 50.00
 Memo Item
 CONTRIBUTION

B. KELEMAN, MELVIN, W., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5500 PASEO DEL LAGO W, APT 3E
 APT 3E
 City LAGUNA WOODS State CA Zip Code 92637-2665
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 252.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 02 / 2016
Transaction ID : SA11A.465054
 Amount of Each Receipt this Period
 72.00
 Memo Item
 CONTRIBUTION

C. KELLER, JIM, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5929 WILD HORSE RUN
 City COLLEGE STATION State TX Zip Code 77845-2346
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) TEXAS A&M FDN. Occupation (for Individual) DIRECTOR OF DEVELOPMENT
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 330.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 26 / 2016
Transaction ID : SA11A.450779
 Amount of Each Receipt this Period
 30.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶ 152.00
TOTAL This Period (last page this line number only).....▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1909 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. KELLER, JIM, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5929 WILD HORSE RUN
 City COLLEGE STATION State TX Zip Code 77845-2346
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) TEXAS A&M FDN. Occupation (for Individual) DIRECTOR OF DEVELOPMENT
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 330.00

Date of Receipt 11 / 02 / 2016
Transaction ID : SA11A.466222
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

B. KELLEHER, JOHN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3215 HAWTHORNE DR
 City AMARILLO State TX Zip Code 79109-3415
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1175.00

Date of Receipt 10 / 31 / 2016
Transaction ID : SA11A.457952
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

C. KELLEHER, JOHN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3215 HAWTHORNE DR
 City AMARILLO State TX Zip Code 79109-3415
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 1175.00

Date of Receipt 10 / 31 / 2016
Transaction ID : SA11A.457953
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶ 125.00
TOTAL This Period (last page this line number only).....▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1910 OF 4311
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. KELLEHER, JOHN, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 3215 HAWTHORNE DR

City AMARILLO	State TX	Zip Code 79109-3415
------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1175.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	07	/	2016

Transaction ID : SA11A.475445

Amount of Each Receipt this Period
50.00

Memo Item
CONTRIBUTION

B. KELLEHER, MARGARET, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 3217 WEST HARBOR VIEW AVENUE

City TAMPA	State FL	Zip Code 33611-1920
---------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) SELF EMPLOYED	Occupation (for Individual) PHYSICIAN
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
400.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	31	/	2016

Transaction ID : SA11A.457519

Amount of Each Receipt this Period
400.00

Memo Item
CONTRIBUTION

C. KELLER, PAUL, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 15911 EDWARDS DR. # 2

City AUSTIN	State TX	Zip Code 78734-1304
----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) AUSTIN ENGINEERING CO. INC	Occupation (for Individual) ENGINEER
---	---

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
700.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	29	/	2016

Transaction ID : SA11A.461080

Amount of Each Receipt this Period
100.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	550.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1911 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. KELLER, PAUL, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 15911 EDWARDS DR. # 2
 City AUSTIN State TX Zip Code 78734-1304
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) AUSTIN ENGINEERING CO. INC Occupation (for Individual) ENGINEER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 700.00

Date of Receipt 11 / 04 / 2016
Transaction ID : SA11A.472223
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

B. KELLER, PHILIP, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1114 ROYAL ADELADE DR
 City COLLEGE STATION State TX Zip Code 77845-4482
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 225.00

Date of Receipt 11 / 01 / 2016
Transaction ID : SA11A.462950
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

C. KELLEY, RANDY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 310 CHAFFIN RIDGE COURT
 City ROSWELL State GA Zip Code 30075-2317
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) CAMBRIDGE ADVISORY GROUP Occupation (for Individual) ACTUARY
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt 11 / 04 / 2016
Transaction ID : SA11A.472113
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 175.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1912 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. KELLEY, RICHARD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 8937 CRICHTON WOODS CT
 City ORLANDO State FL Zip Code 32819-4809
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) DUSOBOX CORP Occupation (for Individual) EXECUTIVE
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 335.00

Date of Receipt 11 / 04 / 2016
Transaction ID : SA11A.472061
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

B. KELLER, ROBERT, P., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 20 WINSLOW ROAD UNIT 803
 City FALMOUTH State ME Zip Code 04105-1924
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1500.00

Date of Receipt 10 / 31 / 2016
Transaction ID : SA11A.457279
 Amount of Each Receipt this Period 500.00
 Memo Item CONTRIBUTION

C. KELLETT, WILLIAM, H., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 117 BANK BARN LANE
 City LANCASTER State PA Zip Code 17602-1579
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 10 / 31 / 2016
Transaction ID : SA11A.457328
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	800.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1913 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. KELLOGG, DONNA, , MRS.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 11991 36TH STREET NW
 City WATFORD CITY State ND Zip Code 58854-9633
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 600.00

Date of Receipt 10 / 21 / 2016
Transaction ID : SA11A.443589
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

B. KELLY, CAROLINE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3313 KELLY PLANTATION RS
 City CARTHAGE State NC Zip Code 28327-8257
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt 10 / 31 / 2016
Transaction ID : SA11A.457838
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

C. KELLY, CAROLINE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3313 KELLY PLANTATION RS
 City CARTHAGE State NC Zip Code 28327-8257
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt 10 / 31 / 2016
Transaction ID : SA11A.458760
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	200.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1914 OF 4311
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. KELLY, CAROLINE, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 3313 KELLY PLANTATION RS

City CARTHAGE	State NC	Zip Code 28327-8257
------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
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Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
400.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	01	/	2016

Transaction ID : SA11A.462430

Amount of Each Receipt this Period
100.00

Memo Item
CONTRIBUTION

B. KELLY, CAROLINE, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 3313 KELLY PLANTATION RS

City CARTHAGE	State NC	Zip Code 28327-8257
------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
400.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	04	/	2016

Transaction ID : SA11A.472986

Amount of Each Receipt this Period
25.00

Memo Item
CONTRIBUTION

C. KELLY, DANIEL, T., , JR
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 250 E ALAMEDA #240

City SANTA FE	State NM	Zip Code 87501-6203
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
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Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
600.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	24	/	2016

Transaction ID : SA11A.443898

Amount of Each Receipt this Period
100.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	225.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1915 OF 4311
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. KELLY, DOUGLAS, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 23 VREELAND ROAD
 SUITE 104
 City FLORHAM PARK State NJ Zip Code 07932-1510
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) DOUGLAS J KELLY ASSOCIATES Occupation (for Individual) MORTGAGE BANKER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 10 / 28 / 2016
Transaction ID : SA11A.456046
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

B. KELLY, MICHAEL, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1250 S BUCKLEY RD
 UNIT I-287
 City AURORA State CO Zip Code 80017-4180
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SFA COLORADO Occupation (for Individual) SALES
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt 11 / 04 / 2016
Transaction ID : SA11A.473479
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

C. KELLY, PAMELA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3829 NORTH RANDOLPH COURT
 City ARLINGTON State VA Zip Code 22207-4577
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 11 / 02 / 2016
Transaction ID : SA11A.469627
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 250.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1916 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
Team Ryan

A. KELLY, RONALD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 11737 WHITE OAK TRAIL
 City CONROE State TX Zip Code 77385-2728
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 10 / 25 / 2016
Transaction ID : SA11A.448826
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

B. KELLY, RONALD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 11737 WHITE OAK TRAIL
 City CONROE State TX Zip Code 77385-2728
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 10 / 25 / 2016
Transaction ID : SA11A.451840
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

C. KELLY, RONALD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 11737 WHITE OAK TRAIL
 City CONROE State TX Zip Code 77385-2728
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 10 / 25 / 2016
Transaction ID : SA11A.451843
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	150.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1917 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. KELLY, WILLIAM, T., MR., III
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4555 E MAYO BOULEVARD
 UNIT 2216
 City PHOENIX State AZ Zip Code 85050-6974
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 230.00

Date of Receipt 11 / 04 / 2016
Transaction ID : SA11A.471950
 Amount of Each Receipt this Period 30.00
 Memo Item CONTRIBUTION

B. KELSEY, ALINE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1310 N. LAFAYETTE BLVD
 City SOUTH BEND State IN Zip Code 46617-1139
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 332.00

Date of Receipt 10 / 28 / 2016
Transaction ID : SA11A.455501
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

C. KELSEY, ALINE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1310 N. LAFAYETTE BLVD
 City SOUTH BEND State IN Zip Code 46617-1139
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 332.00

Date of Receipt 10 / 28 / 2016
Transaction ID : SA11A.455508
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶ 130.00
TOTAL This Period (last page this line number only).....▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1918 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. KELSEY, ALINE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1310 N. LAFAYETTE BLVD
 City SOUTH BEND State IN Zip Code 46617-1139
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 332.00

Date of Receipt 10 / 28 / 2016
Transaction ID : SA11A.455509
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

B. KELSEY, ALINE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1310 N. LAFAYETTE BLVD
 City SOUTH BEND State IN Zip Code 46617-1139
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 332.00

Date of Receipt 10 / 31 / 2016
Transaction ID : SA11A.458188
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

C. KELSEY, ALINE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1310 N. LAFAYETTE BLVD
 City SOUTH BEND State IN Zip Code 46617-1139
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 332.00

Date of Receipt 10 / 31 / 2016
Transaction ID : SA11A.458208
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶ 100.00
TOTAL This Period (last page this line number only).....▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1919 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. KELSEY, MRS. THOMAS, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5313 BAYOU GLEN ROAD
 City HOUSTON State TX Zip Code 77056-1306
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 10 / 27 / 2016
Transaction ID : SA11A.452309
 Amount of Each Receipt this Period 500.00
 Memo Item CONTRIBUTION

B. KELSEOE, JERRY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address P O BOX 1746
 City DENTON State TX Zip Code 76202-1746
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 430.00

Date of Receipt 10 / 26 / 2016
Transaction ID : SA11A.451179
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

C. KELSEOE, JERRY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address P O BOX 1746
 City DENTON State TX Zip Code 76202-1746
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 430.00

Date of Receipt 10 / 26 / 2016
Transaction ID : SA11A.451183
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	700.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1920 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. KELSOE, JERRY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address P O BOX 1746
 City DENTON State TX Zip Code 76202-1746
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 430.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 02 / 2016
Transaction ID : SA11A.467005
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION

B. KELSOE, JERRY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address P O BOX 1746
 City DENTON State TX Zip Code 76202-1746
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 430.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 02 / 2016
Transaction ID : SA11A.467045
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION

C. KELSO, SARA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 7 ROSA PARK
 City NEW ORLEANS State LA Zip Code 70115-5043
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 29 / 2016
Transaction ID : SA11A.461082
 Amount of Each Receipt this Period
 25.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	225.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1921 OF 4311
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. KELSO, SARA, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 7 ROSA PARK

City NEW ORLEANS	State LA	Zip Code 70115-5043
---------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt

M M / D D / Y Y Y Y Y
11 / 03 / 2016

Transaction ID : SA11A.468761

Amount of Each Receipt this Period
25.00

Memo Item
CONTRIBUTION

B. KELSO, SARA, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 7 ROSA PARK

City NEW ORLEANS	State LA	Zip Code 70115-5043
---------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt

M M / D D / Y Y Y Y Y
11 / 07 / 2016

Transaction ID : SA11A.480741

Amount of Each Receipt this Period
25.00

Memo Item
CONTRIBUTION

C. KELSO, SARA, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 7 ROSA PARK

City NEW ORLEANS	State LA	Zip Code 70115-5043
---------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
250.00

Date of Receipt

M M / D D / Y Y Y Y Y
11 / 07 / 2016

Transaction ID : SA11A.480743

Amount of Each Receipt this Period
25.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	75.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1922 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. KEMBLE, LAURIE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1716 WESTERN AVE
 City FORT WORTH State TX Zip Code 76107-3850
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 2000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 10 / 26 / 2016
Transaction ID : SA11A.450421
 Amount of Each Receipt this Period
 250.00
 Memo Item
 CONTRIBUTION

B. KEMBLE, LAURIE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1716 WESTERN AVE
 City FORT WORTH State TX Zip Code 76107-3850
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 2000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 11 / 05 / 2016
Transaction ID : SA11A.479108
 Amount of Each Receipt this Period
 250.00
 Memo Item
 CONTRIBUTION

C. KEMBLE, LAURIE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1716 WESTERN AVE
 City FORT WORTH State TX Zip Code 76107-3850
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 2000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 11 / 05 / 2016
Transaction ID : SA11A.479125
 Amount of Each Receipt this Period
 250.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	750.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1923 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. KEMBLE, LAURIE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1716 WESTERN AVE
 City FORT WORTH State TX Zip Code 76107-3850
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 2000.00

Date of Receipt 11 / 05 / 2016
Transaction ID : SA11A.479126
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

B. KEMP, FRAN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 150 WEST END AVE 3M
 City NEW YORK State NY Zip Code 10023-5702
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 225.00

Date of Receipt 11 / 02 / 2016
Transaction ID : SA11A.466150
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

C. KEMP, FRAN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 150 WEST END AVE 3M
 City NEW YORK State NY Zip Code 10023-5702
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 225.00

Date of Receipt 11 / 07 / 2016
Transaction ID : SA11A.474981
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	300.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1924 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. KEMP, JONET, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO BOX 2966
 City WINNEMUCCA State NV Zip Code 89446-2966
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 225.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 24 / 2016
Transaction ID : SA11A.446205
 Amount of Each Receipt this Period
 25.00
 Memo Item
 CONTRIBUTION

B. KEMP, JONET, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO BOX 2966
 City WINNEMUCCA State NV Zip Code 89446-2966
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 225.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 04 / 2016
Transaction ID : SA11A.472830
 Amount of Each Receipt this Period
 25.00
 Memo Item
 CONTRIBUTION

C. KEMP, JONET, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO BOX 2966
 City WINNEMUCCA State NV Zip Code 89446-2966
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 225.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 08 / 2016
Transaction ID : SA11A.480975
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	150.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1925 OF 4311
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. KENDALL, GLENNA, J., ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address **9816 24TH AVENUE NW**

City **SEATTLE** State **WA** Zip Code **98117-2507**

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) **NONE** Occupation (for Individual) **RETIRED**

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **1400.00**

Date of Receipt **11 / 08 / 2016**

Transaction ID : SA11A.467985

Amount of Each Receipt this Period **500.00**

Memo Item CONTRIBUTION

B. KENDALL III, TED, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address **2932 WILLIAMS LAKE RD**

City **BOLTON** State **MS** Zip Code **39041-9639**

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) **THE GADDIS FARMS** Occupation (for Individual) **CHAIRMAN**

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **350.00**

Date of Receipt **10 / 28 / 2016**

Transaction ID : SA11A.456234

Amount of Each Receipt this Period **250.00**

Memo Item CONTRIBUTION

C. KENDRICK, LLOYD, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address **0841 SW GAINES ST.
UNIT 335**

City **PORTLAND** State **OR** Zip Code **97239-3062**

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) **NONE** Occupation (for Individual) **RETIRED**

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼ **388.00**

Date of Receipt **10 / 25 / 2016**

Transaction ID : SA11A.449078

Amount of Each Receipt this Period **38.00**

Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... **788.00**

TOTAL This Period (last page this line number only).....

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1926 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. KENDRICK, LLOYD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 0841 SW GAINES ST.
 UNIT 335
 City PORTLAND State OR Zip Code 97239-3062
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 388.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 31 / 2016
Transaction ID : SA11A.458023
 Amount of Each Receipt this Period
 25.00
 Memo Item
 CONTRIBUTION

B. KENDRICK, LLOYD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 0841 SW GAINES ST.
 UNIT 335
 City PORTLAND State OR Zip Code 97239-3062
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 388.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 04 / 2016
Transaction ID : SA11A.473118
 Amount of Each Receipt this Period
 25.00
 Memo Item
 CONTRIBUTION

C. KENNA, LEE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 162 FAIR OAKS LANE
 City ATHERTON State CA Zip Code 94027-3058
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SIMCO ELECTRONICS Occupation (for Individual) ENGINEER
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 26 / 2016
Transaction ID : SA11A.454420
 Amount of Each Receipt this Period
 50.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶ 100.00
TOTAL This Period (last page this line number only).....▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1927 OF 4311
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. KENNA, LEE, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 162 FAIR OAKS LANE

City ATHERTON	State CA	Zip Code 94027-3058
------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) SIMCO ELECTRONICS	Occupation (for Individual) ENGINEER
--	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
400.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	30	/	2016

Transaction ID : SA11A.460110

Amount of Each Receipt this Period
50.00

Memo Item
CONTRIBUTION

B. KENNA, LEE, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 162 FAIR OAKS LANE

City ATHERTON	State CA	Zip Code 94027-3058
------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) SIMCO ELECTRONICS	Occupation (for Individual) ENGINEER
--	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
400.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	04	/	2016

Transaction ID : SA11A.472468

Amount of Each Receipt this Period
50.00

Memo Item
CONTRIBUTION

C. KENNAMER, WILLIAM, R., MR,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1060 COLORADO BEND

City WATKINSVILLE	State GA	Zip Code 30677-7814
----------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
275.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	25	/	2016

Transaction ID : SA11A.447887

Amount of Each Receipt this Period
50.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	150.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1928 OF 4311
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. KENNAMER, WILLIAM, R., MR,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1060 COLORADO BEND

City WATKINSVILLE	State GA	Zip Code 30677-7814
----------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
275.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	27	/	2016

Transaction ID : SA11A.453847

Amount of Each Receipt this Period
25.00

Memo Item
CONTRIBUTION

B. KENNAMER, WILLIAM, R., MR,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1060 COLORADO BEND

City WATKINSVILLE	State GA	Zip Code 30677-7814
----------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
275.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	04	/	2016

Transaction ID : SA11A.473453

Amount of Each Receipt this Period
25.00

Memo Item
CONTRIBUTION

C. KENNAMER, WILLIAM, R., MR,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1060 COLORADO BEND

City WATKINSVILLE	State GA	Zip Code 30677-7814
----------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
275.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	04	/	2016

Transaction ID : SA11A.473857

Amount of Each Receipt this Period
25.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	75.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1929 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. KENNEDY, CHARLES, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 598 UNIVERSITY PLACE
 City GROSSE POINTE State MI Zip Code 48230-1259
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) FILDEW HINKS, PLLC Occupation (for Individual) ATTORNEY
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt **10 / 28 / 2016**
Transaction ID : SA11A.454764
 Amount of Each Receipt this Period 1000.00
 Memo Item CONTRIBUTION

B. KENNEDY, CHARLES, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1332 POMONA RD
 City ANN ARBOR State MI Zip Code 48103-3049
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) TRENTON CORPORATION Occupation (for Individual) PRESIDENT
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1200.00

Date of Receipt **10 / 31 / 2016**
Transaction ID : SA11A.464019
 Amount of Each Receipt this Period 1200.00
 Memo Item CONTRIBUTION

C. KENNEDY, DALLAS, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4 GRANBY ROAD
 City NATICK State MA Zip Code 01760-3328
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) COORDINATES OPERATIONS LLC Occupation (for Individual) WRITER
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 285.00

Date of Receipt **10 / 31 / 2016**
Transaction ID : SA11A.463743
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 2225.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1930 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. KENNEDY, DALLAS, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4 GRANBY ROAD
 City NATICK State MA Zip Code 01760-3328
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) COORDINATES OPERATIONS LLC Occupation (for Individual) WRITER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 285.00

Date of Receipt 11 / 04 / 2016
Transaction ID : SA11A.473081
 Amount of Each Receipt this Period 30.00
 Memo Item CONTRIBUTION

B. KENNEDY, DAVID, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 600 BAXTER LANE
 City NASHVILLE State TN Zip Code 37220-1919
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt 10 / 20 / 2016
Transaction ID : SA11A.442148
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

C. KENNEDY, DAVID, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 600 BAXTER LANE
 City NASHVILLE State TN Zip Code 37220-1919
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt 10 / 28 / 2016
Transaction ID : SA11A.455604
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	230.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1931 OF 4311
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. KENNEDY, DAVID, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 600 BAXTER LANE

City NASHVILLE	State TN	Zip Code 37220-1919
-------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
400.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	04	/	2016

Transaction ID : SA11A.472832

Amount of Each Receipt this Period
100.00

Memo Item CONTRIBUTION

B. KENNEDY, DAVID, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 600 BAXTER LANE

City NASHVILLE	State TN	Zip Code 37220-1919
-------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
400.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	07	/	2016

Transaction ID : SA11A.476124

Amount of Each Receipt this Period
100.00

Memo Item CONTRIBUTION

C. KENNEDY, DEAN, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1004 S SIERRA VISTA AVE

City ALHAMBRA	State CA	Zip Code 91801-4818
------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
1800.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	27	/	2016

Transaction ID : SA11A.453830

Amount of Each Receipt this Period
200.00

Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	400.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1932 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. KENNEDY, DEAN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1004 S SIERRA VISTA AVE
 City ALHAMBRA State CA Zip Code 91801-4818
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1800.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 04 / 2016
Transaction ID : SA11A.470943
 Amount of Each Receipt this Period
 200.00
 Memo Item
 CONTRIBUTION

B. KENNEDY, LESA, D., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1 DAYTONA BLVD
 City DAYTONA BEACH State FL Zip Code 32114-1252
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) INTERNATIONAL SPEEDWAY CORPORATION Occupation (for Individual) CEO
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 75000.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 24 / 2016
Transaction ID : SA11A.443448
 Amount of Each Receipt this Period
 25000.00
 Memo Item
 CONTRIBUTION

C. KENT, PAT, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3257 FALCON DR1
 City ABILENE State TX Zip Code 79606-3312
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 257.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 22 / 2016
Transaction ID : SA11A.446733
 Amount of Each Receipt this Period
 25.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	25225.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1933 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. KENT, PAT, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3257 FALCON DR1
 City ABILENE State TX Zip Code 79606-3312
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 257.00

Date of Receipt 10 / 31 / 2016
Transaction ID : SA11A.463807
 Amount of Each Receipt this Period 10.00
 Memo Item CONTRIBUTION

B. KENT, PAT, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3257 FALCON DR1
 City ABILENE State TX Zip Code 79606-3312
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 257.00

Date of Receipt 10 / 31 / 2016
Transaction ID : SA11A.464541
 Amount of Each Receipt this Period 10.00
 Memo Item CONTRIBUTION

C. KENT, VESTA, W., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 40 KAUFMAN DRIVE
 City PETERBOROUGH State NH Zip Code 03458-1520
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt 11 / 03 / 2016
Transaction ID : SA11A.465405
 Amount of Each Receipt this Period 1000.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 1020.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1934 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. KENYON, MARLENE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5035 S NEWCOMBE CT
 City LITTLETON State CO Zip Code 80127-1398
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 900.00

Date of Receipt 10 / 22 / 2016
Transaction ID : SA11A.46654
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

B. KENYON, MARLENE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5035 S NEWCOMBE CT
 City LITTLETON State CO Zip Code 80127-1398
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 900.00

Date of Receipt 11 / 02 / 2016
Transaction ID : SA11A.466615
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

C. KENYON, MARLENE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5035 S NEWCOMBE CT
 City LITTLETON State CO Zip Code 80127-1398
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 900.00

Date of Receipt 11 / 02 / 2016
Transaction ID : SA11A.466646
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	300.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1935 OF 4311
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. KENYON, ROBERT, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 200 HENRY STREET
1203

City STAMFORD State CT Zip Code 06902-5875

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
375.00

Date of Receipt
10 / 31 / 2016
Transaction ID : SA11A.457439

Amount of Each Receipt this Period
100.00

Memo Item CONTRIBUTION

B. KENYON, ROBERT, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 200 HENRY STREET
1203

City STAMFORD State CT Zip Code 06902-5875

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
375.00

Date of Receipt
10 / 31 / 2016
Transaction ID : SA11A.457639

Amount of Each Receipt this Period
25.00

Memo Item CONTRIBUTION

C. KENYON, ROBERT, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 200 HENRY STREET
1203

City STAMFORD State CT Zip Code 06902-5875

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
375.00

Date of Receipt
10 / 31 / 2016
Transaction ID : SA11A.457646

Amount of Each Receipt this Period
25.00

Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶ 150.00

TOTAL This Period (last page this line number only).....▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1936 OF 4311
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. KENYON, ROBERT, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 200 HENRY STREET
1203

City STAMFORD State CT Zip Code 06902-5875

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
375.00

Date of Receipt
MM / DD / YYYY
10 / 31 / 2016

Transaction ID : SA11A.464091

Amount of Each Receipt this Period
50.00

Memo Item CONTRIBUTION

B. KENYON, ROBERT, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 200 HENRY STREET
1203

City STAMFORD State CT Zip Code 06902-5875

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
375.00

Date of Receipt
MM / DD / YYYY
11 / 07 / 2016

Transaction ID : SA11A.475733

Amount of Each Receipt this Period
25.00

Memo Item CONTRIBUTION

C. KENYON, ROBERT, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 200 HENRY STREET
1203

City STAMFORD State CT Zip Code 06902-5875

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
375.00

Date of Receipt
MM / DD / YYYY
11 / 07 / 2016

Transaction ID : SA11A.475752

Amount of Each Receipt this Period
50.00

Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶ 125.00

TOTAL This Period (last page this line number only).....▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1937 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. KENYON, ROBERT, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 200 HENRY STREET
 1203
 City STAMFORD State CT Zip Code 06902-5875
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 375.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 07 / 2016
Transaction ID : SA11A.475779
 Amount of Each Receipt this Period
 50.00
 Memo Item
 CONTRIBUTION

B. KERLEY, MICHAEL, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 14 MEMORY COURT
 City SILVER SPRING State MD Zip Code 20904-6859
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) ASTRELLA CORP Occupation (for Individual) ANALYST
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 06 / 2016
Transaction ID : SA11A.477605
 Amount of Each Receipt this Period
 250.00
 Memo Item
 CONTRIBUTION

C. KERLEY, MICHAEL, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 14 MEMORY COURT
 City SILVER SPRING State MD Zip Code 20904-6859
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) ASTRELLA CORP Occupation (for Individual) ANALYST
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 06 / 2016
Transaction ID : SA11A.477680
 Amount of Each Receipt this Period
 250.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	550.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1938 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. KERN, DON, S., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address N4348 COUNTY ROAD O
 City ELLSWORTH State WI Zip Code 54011-4625
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) FLINT HILLS RESOURCES LP Occupation (for Individual) MANAGER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 321.00

Date of Receipt 10 / 26 / 2016
Transaction ID : SA11A.450777
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

B. KERN, DON, S., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address N4348 COUNTY ROAD O
 City ELLSWORTH State WI Zip Code 54011-4625
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) FLINT HILLS RESOURCES LP Occupation (for Individual) MANAGER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 321.00

Date of Receipt 10 / 31 / 2016
Transaction ID : SA11A.457572
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

C. KERNS, CHRISTOPHER, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4100 CANTLE CIR
 City OKLAHOMA CITY State OK Zip Code 73120-8039
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) OKLAHOMA HEART HOSPITAL PHYSICIANS Occupation (for Individual) PHYSICIAN
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 1297.00

Date of Receipt 10 / 26 / 2016
Transaction ID : SA11A.454615
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶ 150.00
TOTAL This Period (last page this line number only).....▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1939 OF 4311
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. KERNS, CHRISTOPHER, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4100 CANTLE CIR
 City OKLAHOMA CITY State OK Zip Code 73120-8039
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) OKLAHOMA HEART HOSPITAL PHYSICIANS Occupation (for Individual) PHYSICIAN
 Receipt For: Primary General Other (specify) Aggregate Year-to-Date 1297.00

Date of Receipt 11 / 02 / 2016
Transaction ID : SA11A.470157
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

B. KERNS, CHRISTOPHER, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4100 CANTLE CIR
 City OKLAHOMA CITY State OK Zip Code 73120-8039
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) OKLAHOMA HEART HOSPITAL PHYSICIANS Occupation (for Individual) PHYSICIAN
 Receipt For: Primary General Other (specify) Aggregate Year-to-Date 1297.00

Date of Receipt 11 / 03 / 2016
Transaction ID : SA11A.474435
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

C. KERR, MARIELLA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 41 COMPTON COURT
 City PRAIRIE VILLAGE State KS Zip Code 66208-5205
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) Aggregate Year-to-Date 300.00

Date of Receipt 10 / 30 / 2016
Transaction ID : SA11A.460173
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... 300.00
TOTAL This Period (last page this line number only).....

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1940 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. KERR, MARIELLA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 41 COMPTON COURT
 City PRAIRIE VILLAGE State KS Zip Code 66208-5205
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 11 / 04 / 2016
Transaction ID : SA11A.473803
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

B. KERR, STEPHEN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 6621 125 STREET CT E
 City PUYALLUP State WA Zip Code 98373-8820
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) MULTICARE HEALTH SYSTEMS Occupation (for Individual) PHYSICIAN
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 800.00

Date of Receipt 11 / 04 / 2016
Transaction ID : SA11A.473612
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

C. KERR, TED, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2203 BOYD AVENUE
 City MIDLAND State TX Zip Code 79705-8604
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 700.00

Date of Receipt 11 / 04 / 2016
Transaction ID : SA11A.472292
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	300.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1941 OF 4311
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. KERSTEN, KATHERINE, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 5201 CHANTREY RD.

City EDINA	State MN	Zip Code 55436-2040
---------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) SELF EMPLOYED	Occupation (for Individual) KERSTEN1@COMCAST.NET
--	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
600.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		28		2016

Transaction ID : SA11A.456140

Amount of Each Receipt this Period
50.00

Memo Item CONTRIBUTION

B. KERSTEN, KATHERINE, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 5201 CHANTREY RD.

City EDINA	State MN	Zip Code 55436-2040
---------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) SELF EMPLOYED	Occupation (for Individual) KERSTEN1@COMCAST.NET
--	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
600.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11		04		2016

Transaction ID : SA11A.471415

Amount of Each Receipt this Period
50.00

Memo Item CONTRIBUTION

C. KERWIN, JOSEPH, P., MR.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 10411 RIVER ROAD

City COLLEGE STATION	State TX	Zip Code 77845-6719
-------------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
2350.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11		04		2016

Transaction ID : SA11A.467648

Amount of Each Receipt this Period
1000.00

Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	1100.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1942 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. KESSINGER, RANDALL, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address P. O. BOX 36212
 City ROCK HILL State SC Zip Code 29732-0503
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1043.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 26 / 2016
Transaction ID : SA11A.454412
 Amount of Each Receipt this Period
 18.00
 Memo Item
 CONTRIBUTION

B. KESSINGER, RANDALL, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address P. O. BOX 36212
 City ROCK HILL State SC Zip Code 29732-0503
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1043.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 26 / 2016
Transaction ID : SA11A.454416
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION

C. KESSINGER, RANDALL, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address P. O. BOX 36212
 City ROCK HILL State SC Zip Code 29732-0503
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1043.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 28 / 2016
Transaction ID : SA11A.455162
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	218.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1943 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. KESSINGER, RANDALL, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address P. O. BOX 36212

City ROCK HILL	State SC	Zip Code 29732-0503
-------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1043.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 31 / 2016
Transaction ID : SA11A.458556

Amount of Each Receipt this Period
25.00

Memo Item
CONTRIBUTION

B. KESSINGER, RANDALL, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address P. O. BOX 36212

City ROCK HILL	State SC	Zip Code 29732-0503
-------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1043.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 02 / 2016
Transaction ID : SA11A.469560

Amount of Each Receipt this Period
50.00

Memo Item
CONTRIBUTION

C. KESSINGER, RANDALL, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address P. O. BOX 36212

City ROCK HILL	State SC	Zip Code 29732-0503
-------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
1043.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 07 / 2016
Transaction ID : SA11A.480375

Amount of Each Receipt this Period
50.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	125.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1944 OF 4311
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. KESSINGER, RANDALL, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address P. O. BOX 36212
 City ROCK HILL State SC Zip Code 29732-0503
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1043.00

Date of Receipt 11 / 07 / 2016
Transaction ID : SA11A.480378
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

B. KESSLER, JUDD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4907 BROOKWAY DRIVE
 City BETHESDA State MD Zip Code 20816-1909
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) PORTER WRIGHT LLP Occupation (for Individual) ATTORNEY
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 11 / 07 / 2016
Transaction ID : SA11A.467891
 Amount of Each Receipt this Period 200.00
 Memo Item CONTRIBUTION

C. KETTERSON, BETTY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3932 CONSTITUTION AVW
 City COLORADO SPRINGS State CO Zip Code 80909-1615
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 255.00

Date of Receipt 10 / 24 / 2016
Transaction ID : SA11A.445926
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	275.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1945 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. KETTERSON, BETTY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3932 CONSTITUTION AVW
 City COLORADO SPRINGS State CO Zip Code 80909-1615
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 255.00

Date of Receipt 10 / 24 / 2016
Transaction ID : SA11A.445928
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

B. KETTERSON, BETTY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3932 CONSTITUTION AVW
 City COLORADO SPRINGS State CO Zip Code 80909-1615
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 255.00

Date of Receipt 10 / 24 / 2016
Transaction ID : SA11A.445935
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

C. KEVILLE, JOHN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 6330 BELMONT
 City HOUSTON State TX Zip Code 77005-3402
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) WS Occupation (for Individual) ATTORNEY
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 10 / 31 / 2016
Transaction ID : SA11A.464075
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 175.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1946 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. KEVILLE, JOHN, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 6330 BELMONT

City HOUSTON	State TX	Zip Code 77005-3402
-----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) WS	Occupation (for Individual) ATTORNEY
---	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	04	/	2016

Transaction ID : SA11A.473794

Amount of Each Receipt this Period
100.00

Memo Item
CONTRIBUTION

B. KEY, DONALD, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 6615 NORWAY ROAD

City DALLAS	State TX	Zip Code 75230-5243
----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
2500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	26	/	2016

Transaction ID : SA11A.450120

Amount of Each Receipt this Period
250.00

Memo Item
CONTRIBUTION

C. KEY, DONALD, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 6615 NORWAY ROAD

City DALLAS	State TX	Zip Code 75230-5243
----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
2500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	30	/	2016

Transaction ID : SA11A.459563

Amount of Each Receipt this Period
250.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	600.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1947 OF 4311
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. KEY, DONALD, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address **6615 NORWAY ROAD**
City **DALLAS** State **TX** Zip Code **75230-5243**
FEC ID number of contributing federal political committee. **C**
Name of Employer (for Individual) **NONE** Occupation (for Individual) **RETIRED**
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ **2500.00**

Date of Receipt **11 / 05 / 2016**
Transaction ID : SA11A.478606
Amount of Each Receipt this Period **250.00**
 Memo Item
CONTRIBUTION

B. KEY, DONALD, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address **6615 NORWAY ROAD**
City **DALLAS** State **TX** Zip Code **75230-5243**
FEC ID number of contributing federal political committee. **C**
Name of Employer (for Individual) **NONE** Occupation (for Individual) **RETIRED**
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ **2500.00**

Date of Receipt **11 / 05 / 2016**
Transaction ID : SA11A.478608
Amount of Each Receipt this Period **250.00**
 Memo Item
CONTRIBUTION

C. KEY, DONALD, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address **6615 NORWAY ROAD**
City **DALLAS** State **TX** Zip Code **75230-5243**
FEC ID number of contributing federal political committee. **C**
Name of Employer (for Individual) **NONE** Occupation (for Individual) **RETIRED**
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ **2500.00**

Date of Receipt **11 / 05 / 2016**
Transaction ID : SA11A.478609
Amount of Each Receipt this Period **250.00**
 Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... **750.00**
TOTAL This Period (last page this line number only).....

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1948 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
Team Ryan

A. KEYES, BETTIE, A., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3640 POMPARO COURT
 City JOHNS ISLAND State SC Zip Code 29455-6029
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) HOMEMAKER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 31 / 2016
Transaction ID : SA11A.457318
 Amount of Each Receipt this Period
 1000.00
 Memo Item
 CONTRIBUTION

B. KEYS, MARTHA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1418 CIRCLE DRIVE
 City TARPON SPRINGS State FL Zip Code 34689-2059
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 541.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 07 / 2016
Transaction ID : SA11A.475768
 Amount of Each Receipt this Period
 5.00
 Memo Item
 CONTRIBUTION

C. KEYS, MARTHA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1418 CIRCLE DRIVE
 City TARPON SPRINGS State FL Zip Code 34689-2059
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 541.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 07 / 2016
Transaction ID : SA11A.475769
 Amount of Each Receipt this Period
 18.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	1023.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1949 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. KEYS, MARTHA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1418 CIRCLE DRIVE
 City TARPON SPRINGS State FL Zip Code 34689-2059
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 541.00

Date of Receipt
 11 / 07 / 2016
Transaction ID : SA11A.475770
 Amount of Each Receipt this Period 18.00
 Memo Item CONTRIBUTION

B. KEYS, MARTHA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1418 CIRCLE DRIVE
 City TARPON SPRINGS State FL Zip Code 34689-2059
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 541.00

Date of Receipt
 11 / 07 / 2016
Transaction ID : SA11A.475774
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

C. KEYS, MARTHA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1418 CIRCLE DRIVE
 City TARPON SPRINGS State FL Zip Code 34689-2059
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 541.00

Date of Receipt
 11 / 07 / 2016
Transaction ID : SA11A.475775
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	518.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1950 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
Team Ryan

A. KEYSER, JEFFREY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 247 CORLIES AVE
 City PELHAM State NY Zip Code 10803-1903
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) DELOITTE LLP (SELF EMPLOYED PARTNER) Occupation (for Individual) CPA
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 2500.00

Date of Receipt 10 / 29 / 2016
Transaction ID : SA11A.460554
 Amount of Each Receipt this Period 1000.00
 Memo Item CONTRIBUTION

B. KEYSER, JEFFREY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 247 CORLIES AVE
 City PELHAM State NY Zip Code 10803-1903
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) DELOITTE LLP (SELF EMPLOYED PARTNER) Occupation (for Individual) CPA
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 2500.00

Date of Receipt 11 / 04 / 2016
Transaction ID : SA11A.471289
 Amount of Each Receipt this Period 1000.00
 Memo Item CONTRIBUTION

C. KHAN, MUHOMMAD, F., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 631 PAR DRIVE
 City GILLETTE State WY Zip Code 82718-7623
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) INFORMATION REQUESTED PER BEST EFFORTS Occupation (for Individual) INFORMATION REQUESTED PER BEST EFFORTS
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt 10 / 24 / 2016
Transaction ID : SA11A.444062
 Amount of Each Receipt this Period 1000.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	3000.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1951 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
Team Ryan

A. KIBBY, DONALD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 15132 REYNOSA DRIVE
 City RANCHO MURIETA State CA Zip Code 95683-9164
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 10 / 31 / 2016
Transaction ID : SA11A.459131
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

B. KIERMEIER, JOHN, L., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1140 HEMPSTEAD TPKE APT 116
 City FRANKLIN SQUARE State NY Zip Code 11010-1505
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 310.00

Date of Receipt 10 / 24 / 2016
Transaction ID : SA11A.443786
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

C. KIERMEIER, JOHN, L., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1140 HEMPSTEAD TPKE APT 116
 City FRANKLIN SQUARE State NY Zip Code 11010-1505
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 310.00

Date of Receipt 11 / 10 / 2016
Transaction ID : SA11A.468208
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	100.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1952 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
Team Ryan

A. KILBURN, EDWIN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 28306 N. 114TH PL.
 City SCOTTSDALE State AZ Zip Code 85262-4723
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 800.00

Date of Receipt 10 / 28 / 2016
Transaction ID : SA11A.456043
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

B. KILGORE, MANLEY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 12904 BAY PLANTATIOM DRIVE
 City JACKSONVILLE State FL Zip Code 32223-0784
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) PHYSICIAN
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 10 / 25 / 2016
Transaction ID : SA11A.447874
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

C. KILLINS, CHARLES, R., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4121 HATTERLY LANE
 City NORMAN State OK Zip Code 73072-2277
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 205.00

Date of Receipt 10 / 26 / 2016
Transaction ID : SA11A.447639
 Amount of Each Receipt this Period 35.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	385.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1953 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. KILLINGSWORTH, JOHN, F., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2110 BIRCHER WAY
 City CARMICHAEL State CA Zip Code 95608-5602
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 240.00

Date of Receipt 10 / 26 / 2016
Transaction ID : SA11A.451365
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

B. KILLINGSWORTH, JOHN, F., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2110 BIRCHER WAY
 City CARMICHAEL State CA Zip Code 95608-5602
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 240.00

Date of Receipt 10 / 26 / 2016
Transaction ID : SA11A.451375
 Amount of Each Receipt this Period 30.00
 Memo Item CONTRIBUTION

C. KILLINGSWORTH, JOHN, F., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2110 BIRCHER WAY
 City CARMICHAEL State CA Zip Code 95608-5602
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 240.00

Date of Receipt 10 / 27 / 2016
Transaction ID : SA11A.452716
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶ 80.00
TOTAL This Period (last page this line number only).....▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1954 OF 4311
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. KIM, JHONG, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 501 MORNINGSTAR ROAD
 City STATEN ISLAND State NY Zip Code 10303-2836
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RICHMOND IHOP LLC Occupation (for Individual) CEO
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 3000.00

Date of Receipt 10 / 30 / 2016
Transaction ID : SA11A.464949
 Amount of Each Receipt this Period 1000.00
 Memo Item CONTRIBUTION

B. KIMBALL, H., , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4931 ORCAS STREET NE
 City OLYMPIA State WA Zip Code 98516-6647
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 10 / 26 / 2016
Transaction ID : SA11A.447724
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

C. KIMBALL, SCOTT, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 488 W PASO FINO DR
 City BOISE State ID Zip Code 83702-5142
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) BUILDER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 225.00

Date of Receipt 11 / 01 / 2016
Transaction ID : SA11A.463090
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶ 1125.00
TOTAL This Period (last page this line number only).....▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1955 OF 4311
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. KIMBALL, SY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1102 SOUTH BAYFRONT
 City NEWPORT BEACH State CA Zip Code 92662-1234
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 10 / 28 / 2016
Transaction ID : SA11A.455076
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

B. KIMBER, CLARENCE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2553 TRES LAGOS
 City ALAMOGORDO State NM Zip Code 88310-7764
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 475.00

Date of Receipt 10 / 25 / 2016
Transaction ID : SA11A.448883
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

C. KIMMINS, WILLIAM, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 16 COUNTRY CLUB WOODS DR
 City SAINT CHARLES State MO Zip Code 63303-3300
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 10 / 29 / 2016
Transaction ID : SA11A.460970
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 550.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1956 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. KIMMINS, WILLIAM, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 16 COUNTRY CLUB WOODS DR
 City SAINT CHARLES State MO Zip Code 63303-3300
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 30 / 2016
Transaction ID : SA11A.464877
 Amount of Each Receipt this Period
 250.00
 Memo Item
 CONTRIBUTION

B. KIND, PETER, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 9006 SOUTHPOINTE LANE
 City LORTON State VA Zip Code 22079-3241
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) IDA Occupation (for Individual) RESEARCH
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 02 / 2016
Transaction ID : SA11A.469795
 Amount of Each Receipt this Period
 50.00
 Memo Item
 CONTRIBUTION

C. KING, HANNAH, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1409 N HALIFAX AVE
 City DAYTONA BEACH State FL Zip Code 32118-3517
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) SALES AND MARKETING
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 525.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 26 / 2016
Transaction ID : SA11A.454332
 Amount of Each Receipt this Period
 50.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	350.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1957 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. KING, HANNAH, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1409 N HALIFAX AVE
 City DAYTONA BEACH State FL Zip Code 32118-3517
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) SALES AND MARKETING
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 525.00

Date of Receipt 11 / 04 / 2016
Transaction ID : SA11A.471938
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

B. KING, HANNAH, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1409 N HALIFAX AVE
 City DAYTONA BEACH State FL Zip Code 32118-3517
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) SALES AND MARKETING
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 525.00

Date of Receipt 11 / 07 / 2016
Transaction ID : SA11A.475713
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

C. KING, RANDY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2746 SKY HORSE TRL
 City RENO State NV Zip Code 89511-5373
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) PHYSICIAN
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 450.00

Date of Receipt 10 / 22 / 2016
Transaction ID : SA11A.446829
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 200.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1958 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. KING, RUSS, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 8696 HALE ROAD
 City MANLIUS State NY Zip Code 13104-8781
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 03 / 2016
Transaction ID : SA11A.469012
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION

B. KING, RUSS, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 8696 HALE ROAD
 City MANLIUS State NY Zip Code 13104-8781
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 03 / 2016
Transaction ID : SA11A.469016
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION

C. KING, TODD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3855 WATERTOWN RD
 City ORONO State MN Zip Code 55359-9615
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) GLADWIN MACHINERY Occupation (for Individual) PRES.
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 20 / 2016
Transaction ID : SA11A.444704
 Amount of Each Receipt this Period
 1000.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	1200.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1959 OF 4311
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. KING, WILLIAM, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 625D ARDEN HILL RD

City COLVILLE	State WA	Zip Code 99114-8273
------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) KING MARINE, INC	Occupation (for Individual) CEO / OWNER
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	22	/	2016

Transaction ID : SA11A.446878

Amount of Each Receipt this Period
100.00

Memo Item
CONTRIBUTION

B. KING, WILLIAM, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 625D ARDEN HILL RD

City COLVILLE	State WA	Zip Code 99114-8273
------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) KING MARINE, INC	Occupation (for Individual) CEO / OWNER
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	04	/	2016

Transaction ID : SA11A.472091

Amount of Each Receipt this Period
100.00

Memo Item
CONTRIBUTION

C. KINGRY, ANNA, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1005 16TH ST NE

City SALEM	State OR	Zip Code 97301-1347
---------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
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Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
475.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	24	/	2016

Transaction ID : SA11A.445882

Amount of Each Receipt this Period
50.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	250.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1960 OF 4311
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. KINMAN, GERALD, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 645 KELLER SMITHFIELD ROAD

City KELLER	State TX	Zip Code 76248-4229
----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
275.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		31		2016

Transaction ID : SA11A.463444

Amount of Each Receipt this Period
25.00

Memo Item CONTRIBUTION

B. KINMAN, GERALD, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 645 KELLER SMITHFIELD ROAD

City KELLER	State TX	Zip Code 76248-4229
----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
275.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11		02		2016

Transaction ID : SA11A.466214

Amount of Each Receipt this Period
25.00

Memo Item CONTRIBUTION

C. KINNISON, ROYCE, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 3395 OLDENBURG ROAD W

City MEADVILLE	State MS	Zip Code 39653-8282
-------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
310.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		28		2016

Transaction ID : SA11A.454748

Amount of Each Receipt this Period
25.00

Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	75.00
TOTAL This Period (last page this line number only).....	

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1961 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
Team Ryan

A. KINSKEY, CHARLES, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4530 E 24TH STREET
 City CASPER State WY Zip Code 82609-3288
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1150.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 25 / 2016
Transaction ID : SA11A.452162
 Amount of Each Receipt this Period
 250.00
 Memo Item
 CONTRIBUTION

B. KINSKEY, CHARLES, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4530 E 24TH STREET
 City CASPER State WY Zip Code 82609-3288
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1150.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 25 / 2016
Transaction ID : SA11A.452164
 Amount of Each Receipt this Period
 250.00
 Memo Item
 CONTRIBUTION

C. KINSKEY, CHARLES, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4530 E 24TH STREET
 City CASPER State WY Zip Code 82609-3288
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1150.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 04 / 2016
Transaction ID : SA11A.472793
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	600.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1962 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name A. KINSLEY, JONATHAN, , ,			Date of Receipt MM / DD / YYYY 11 / 07 / 2016 Transaction ID : SA11A.475525
Mailing Address 6815 STARPASS COURT			Amount of Each Receipt this Period 25.00
City LAKE WORTH	State FL	Zip Code 33463-7300	<input type="checkbox"/> Memo Item CONTRIBUTION
FEC ID number of contributing federal political committee. C			
Name of Employer (for Individual) TRI-CITY ELECTRIC	Occupation (for Individual) ELECTRICIAN / IBEW LOCAL 728		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 205.00		

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name B. KINSLEY, JONATHAN, , ,			Date of Receipt MM / DD / YYYY 11 / 06 / 2016 Transaction ID : SA11A.478196
Mailing Address 6815 STARPASS COURT			Amount of Each Receipt this Period 25.00
City LAKE WORTH	State FL	Zip Code 33463-7300	<input type="checkbox"/> Memo Item CONTRIBUTION
FEC ID number of contributing federal political committee. C			
Name of Employer (for Individual) TRI-CITY ELECTRIC	Occupation (for Individual) ELECTRICIAN / IBEW LOCAL 728		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 205.00		

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name C. KINSLEY, JONATHAN, , ,			Date of Receipt MM / DD / YYYY 11 / 07 / 2016 Transaction ID : SA11A.480602
Mailing Address 6815 STARPASS COURT			Amount of Each Receipt this Period 25.00
City LAKE WORTH	State FL	Zip Code 33463-7300	<input type="checkbox"/> Memo Item CONTRIBUTION
FEC ID number of contributing federal political committee. C			
Name of Employer (for Individual) TRI-CITY ELECTRIC	Occupation (for Individual) ELECTRICIAN / IBEW LOCAL 728		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Aggregate Year-to-Date ▼ 205.00		

SUBTOTAL of Receipts This Page (optional).....▶	75.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1963 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. KINZER, LORETTA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 7514 CARUTH BLVD
 City DALLAS State TX Zip Code 75225-4505
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 900.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 28 / 2016
Transaction ID : SA11A.456021
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION

B. KINZER, LORETTA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 7514 CARUTH BLVD
 City DALLAS State TX Zip Code 75225-4505
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 900.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 04 / 2016
Transaction ID : SA11A.473386
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION

C. KIPFER, BRIDGET, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 20 BUNN AVENUE
 City ZEBULON State NC Zip Code 27597-5866
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RELATIONOMICS LLC Occupation (for Individual) PRINCIPAL
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 425.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 02 / 2016
Transaction ID : SA11A.466929
 Amount of Each Receipt this Period
 50.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	250.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1964 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. KIPFER, BRIDGET, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address **20 BUNN AVENUE**

City ZEBULON	State NC	Zip Code 27597-5866
------------------------	--------------------	-------------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) RELATIONOMICS LLC	Occupation (for Individual) PRINCIPAL
---	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
425.00

Date of Receipt
11 / 02 / 2016

Transaction ID : SA11A.469662

Amount of Each Receipt this Period
25.00

Memo Item
CONTRIBUTION

B. KIPP, PATRICIA, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address **PO BOX 1881**

City PARK CITY	State UT	Zip Code 84060-1881
--------------------------	--------------------	-------------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
--	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
210.00

Date of Receipt
10 / 24 / 2016

Transaction ID : SA11A.449344

Amount of Each Receipt this Period
25.00

Memo Item
CONTRIBUTION

C. KIPP, PATRICIA, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address **PO BOX 1881**

City PARK CITY	State UT	Zip Code 84060-1881
--------------------------	--------------------	-------------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
--	---

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
210.00

Date of Receipt
11 / 03 / 2016

Transaction ID : SA11A.474547

Amount of Each Receipt this Period
25.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	75.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1965 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. KIPP, PATRICIA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO BOX 1881
 City PARK CITY State UT Zip Code 84060-1881
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 210.00

Date of Receipt 11 / 06 / 2016
Transaction ID : SA11A.476978
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

B. KIPP, PATRICIA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO BOX 1881
 City PARK CITY State UT Zip Code 84060-1881
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 210.00

Date of Receipt 11 / 07 / 2016
Transaction ID : SA11A.480468
 Amount of Each Receipt this Period 10.00
 Memo Item CONTRIBUTION

C. KIRBY, MARY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4443 PARKER ST
 City DEARBORN HEIGHTS State MI Zip Code 48125-2234
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 353.00

Date of Receipt 10 / 31 / 2016
Transaction ID : SA11A.458217
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶ 135.00
TOTAL This Period (last page this line number only).....▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1966 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. KIRBY, MARY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4443 PARKER ST
 City DEARBORN HEIGHTS State MI Zip Code 48125-2234
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 353.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 29 / 2016
Transaction ID : SA11A.460354
 Amount of Each Receipt this Period
 25.00
 Memo Item
 CONTRIBUTION

B. KIRBY, MARY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4443 PARKER ST
 City DEARBORN HEIGHTS State MI Zip Code 48125-2234
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 353.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 04 / 2016
Transaction ID : SA11A.470884
 Amount of Each Receipt this Period
 25.00
 Memo Item
 CONTRIBUTION

C. KIRCHER, MARIANNE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 9150 S DADELAND BLVD SUITE 908
 City MIAMI State FL Zip Code 33156-7841
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) KIRCHER LAW, P.A. Occupation (for Individual) ATTORNEY
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 904.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 25 / 2016
Transaction ID : SA11A.447978
 Amount of Each Receipt this Period
 30.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	80.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1967 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. KIRCHER, MARIANNE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 9150 S DADELAND BLVD
 SUITE 908
 City MIAMI State FL Zip Code 33156-7841
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) KIRCHER LAW, P.A. Occupation (for Individual) ATTORNEY
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 904.00

Date of Receipt 10 / 25 / 2016
Transaction ID : SA11A.447980
 Amount of Each Receipt this Period 30.00
 Memo Item CONTRIBUTION

B. KIRCHER, MARIANNE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 9150 S DADELAND BLVD
 SUITE 908
 City MIAMI State FL Zip Code 33156-7841
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) KIRCHER LAW, P.A. Occupation (for Individual) ATTORNEY
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 904.00

Date of Receipt 10 / 28 / 2016
Transaction ID : SA11A.455744
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

C. KIRCHER, MARIANNE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 9150 S DADELAND BLVD
 SUITE 908
 City MIAMI State FL Zip Code 33156-7841
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) KIRCHER LAW, P.A. Occupation (for Individual) ATTORNEY
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 904.00

Date of Receipt 10 / 29 / 2016
Transaction ID : SA11A.460876
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶ 80.00
TOTAL This Period (last page this line number only).....▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1968 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
Team Ryan

A. KIRCHER, MARIANNE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 9150 S DADELAND BLVD
 SUITE 908
 City MIAMI State FL Zip Code 33156-7841
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) KIRCHER LAW, P.A. Occupation (for Individual) ATTORNEY
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 904.00

Date of Receipt 11 / 04 / 2016
Transaction ID : SA11A.471497
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

B. KIRCOS, ELIZABETH, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1104 WILLOW GROVE COURT
 City ROCHESTER HILLS State MI Zip Code 48307-2550
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt 10 / 31 / 2016
Transaction ID : SA11A.458120
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

C. KIRCOS, ELIZABETH, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1104 WILLOW GROVE COURT
 City ROCHESTER HILLS State MI Zip Code 48307-2550
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt 10 / 31 / 2016
Transaction ID : SA11A.458128
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 75.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1969 OF 4311
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. KIRCOS, ELIZABETH, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1104 WILLOW GROVE COURT
 City ROCHESTER HILLS State MI Zip Code 48307-2550
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt 11 / 04 / 2016
Transaction ID : SA11A.473999
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

B. KIRK, JOHN, , MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 16BODDINGTON CT
 City ASHEVILLE State NC Zip Code 28803-3149
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 10 / 29 / 2016
Transaction ID : SA11A.460583
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

C. KIRK, JOHN, , MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 16BODDINGTON CT
 City ASHEVILLE State NC Zip Code 28803-3149
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 11 / 02 / 2016
Transaction ID : SA11A.469762
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	250.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 1970 OF 4311
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. KIRK, JOHN, , MR.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 16BODDINGTON CT

City ASHEVILLE	State NC	Zip Code 28803-3149
-------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	06	/	2016

Transaction ID : SA11A.476968

Amount of Each Receipt this Period
100.00

Memo Item CONTRIBUTION

B. KIRK, RUSSELL, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 151 4TH ST. W
5644

City KETCHUM	State ID	Zip Code 83340-7200
-----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
325.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	25	/	2016

Transaction ID : SA11A.448984

Amount of Each Receipt this Period
100.00

Memo Item CONTRIBUTION

C. KIRKLAND, RICHARD, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 2525 WARWICK ROAD

City WINSTON SALEM	State NC	Zip Code 27104-1943
-----------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	26	/	2016

Transaction ID : SA11A.450381

Amount of Each Receipt this Period
50.00

Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	250.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1971 OF 4311
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. KIRKPATRICK, DAVID, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1527 FOREST BAY CT
 City WIXOM State MI Zip Code 48393-1637
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SUPERIOR SPINDLE Occupation (for Individual) SALES
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 279.00

Date of Receipt **10 / 27 / 2016**
Transaction ID : SA11A.453933
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

B. KIRKPATRICK, DAVID, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1527 FOREST BAY CT
 City WIXOM State MI Zip Code 48393-1637
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SUPERIOR SPINDLE Occupation (for Individual) SALES
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 279.00

Date of Receipt **11 / 04 / 2016**
Transaction ID : SA11A.471385
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

C. KIRKPATRICK, DAVID, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1527 FOREST BAY CT
 City WIXOM State MI Zip Code 48393-1637
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SUPERIOR SPINDLE Occupation (for Individual) SALES
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 279.00

Date of Receipt **11 / 05 / 2016**
Transaction ID : SA11A.478566
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 75.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 1972 OF 4311
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. KIRKPATRICK, KENNETH, A., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3804 PRINCE ANDREW LANE
 City VIRGINIA BEACH State VA Zip Code 23452-3925
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 10 / 31 / 2016
Transaction ID : SA11A.457263
 Amount of Each Receipt this Period 500.00
 Memo Item CONTRIBUTION

B. KIRSCHKE, RICHARD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 175 CIDER MILL ROAD
 City RINGOES State NJ Zip Code 08551-1710
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) CONSULTANT
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 225.00

Date of Receipt 10 / 24 / 2016
Transaction ID : SA11A.445845
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

C. KIRSCHKE, RICHARD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 175 CIDER MILL ROAD
 City RINGOES State NJ Zip Code 08551-1710
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) CONSULTANT
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 225.00

Date of Receipt 10 / 24 / 2016
Transaction ID : SA11A.445855
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶ 600.00
TOTAL This Period (last page this line number only).....▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1973 OF 4311
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
KIRSCHKE, RICHARD, , ,

Mailing Address 175 CIDER MILL ROAD

City RINGOES State NJ Zip Code 08551-1710

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) CONSULTANT

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
225.00

Date of Receipt
11 / 04 / 2016
Transaction ID : SA11A.473987

Amount of Each Receipt this Period
25.00

Memo Item CONTRIBUTION

B. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
KIRSCHKE, RICHARD, , ,

Mailing Address 175 CIDER MILL ROAD

City RINGOES State NJ Zip Code 08551-1710

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) CONSULTANT

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
225.00

Date of Receipt
11 / 06 / 2016
Transaction ID : SA11A.477008

Amount of Each Receipt this Period
25.00

Memo Item CONTRIBUTION

C. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
KIRSCHKE, RICHARD, , ,

Mailing Address 175 CIDER MILL ROAD

City RINGOES State NJ Zip Code 08551-1710

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) CONSULTANT

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
225.00

Date of Receipt
11 / 06 / 2016
Transaction ID : SA11A.477009

Amount of Each Receipt this Period
25.00

Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 75.00

TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1974 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
Team Ryan

A. KIRSCH, ROBERT, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3250 STEIN STREET
 City MOBILE State AL Zip Code 36608-5815
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) TECHANAX Occupation (for Individual) PROGRAM MANAGER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 585.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 24 / 2016
Transaction ID : SA11A.446144
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION

B. KIRSCHNER, VICKI, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 11602 BIG TRAIL
 City AUSTIN State TX Zip Code 78759-4150
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 225.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 04 / 2016
Transaction ID : SA11A.473242
 Amount of Each Receipt this Period
 25.00
 Memo Item
 CONTRIBUTION

C. KIRSTEN, REINER, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 995 PARK VIEW DRIVE
 City TALLAHASSEE State FL Zip Code 32311-1245
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1773.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 30 / 2016
Transaction ID : SA11A.460086
 Amount of Each Receipt this Period
 131.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	256.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1975 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. KIRSTEN, REINER, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 995 PARK VIEW DRIVE
 City TALLAHASSEE State FL Zip Code 32311-1245
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1773.00

Date of Receipt **11 / 04 / 2016**
Transaction ID : SA11A.472241
 Amount of Each Receipt this Period 131.00
 Memo Item CONTRIBUTION

B. KIRSTEN, REINER, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 995 PARK VIEW DRIVE
 City TALLAHASSEE State FL Zip Code 32311-1245
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1773.00

Date of Receipt **11 / 07 / 2016**
Transaction ID : SA11A.480333
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

C. KISTNER, JOHN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 14300 TRILLIUM BLVD SE UNIT 12
 City MILL CREEK State WA Zip Code 98012-1300
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt **10 / 22 / 2016**
Transaction ID : SA11A.446870
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	181.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1976 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. KISTNER, JOHN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 14300 TRILLIUM BLVD SE
 UNIT 12
 City MILL CREEK State WA Zip Code 98012-1300
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 04 / 2016
Transaction ID : SA11A.471325
 Amount of Each Receipt this Period
 25.00
 Memo Item
 CONTRIBUTION

B. KITA, BARBARA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3107 RAVENWOOD DRIVE
 City GREENSBURG State PA Zip Code 15601-1110
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 280.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 31 / 2016
Transaction ID : SA11A.458467
 Amount of Each Receipt this Period
 50.00
 Memo Item
 CONTRIBUTION

C. KITA, BARBARA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3107 RAVENWOOD DRIVE
 City GREENSBURG State PA Zip Code 15601-1110
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 280.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 31 / 2016
Transaction ID : SA11A.458472
 Amount of Each Receipt this Period
 50.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	125.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1977 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. KITRINOS, LORENE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 700 CAROLINA MEADOWS 333
 City CHAPEL HILL State NC Zip Code 27517-7548
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt **10 / 20 / 2016**
Transaction ID : SA11A.442506
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

B. KITRINOS, LORENE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 700 CAROLINA MEADOWS 333
 City CHAPEL HILL State NC Zip Code 27517-7548
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt **11 / 07 / 2016**
Transaction ID : SA11A.475806
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

C. KLARSFELD, RHODA, T., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 129 , NOD HILL RD
 City RIDGEFIELD State CT Zip Code 06877-6010
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt **10 / 28 / 2016**
Transaction ID : SA11A.455442
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	250.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1978 OF 4311
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. KLARSFELD, RHODA, T., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 129 , NOD HILL RD
 City RIDGEFIELD State CT Zip Code 06877-6010
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 10 / 28 / 2016
Transaction ID : SA11A.455450
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

B. KLARSFELD, RHODA, T., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 129 , NOD HILL RD
 City RIDGEFIELD State CT Zip Code 06877-6010
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 10 / 28 / 2016
Transaction ID : SA11A.455451
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

C. KLARSFELD, RHODA, T., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 129 , NOD HILL RD
 City RIDGEFIELD State CT Zip Code 06877-6010
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 11 / 01 / 2016
Transaction ID : SA11A.462286
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶ 150.00
TOTAL This Period (last page this line number only).....▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1979 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. KLARSFELD, RHODA, T., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 129 , NOD HILL RD
 City RIDGEFIELD State CT Zip Code 06877-6010
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 10 / 31 / 2016
Transaction ID : SA11A.463818
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

B. KLAUDER, JOHN, , MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO BOX 476
 City BOYERTOWN State PA Zip Code 19512-0476
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 219.00

Date of Receipt 11 / 01 / 2016
Transaction ID : SA11A.457209
 Amount of Each Receipt this Period 2.00
 Memo Item CONTRIBUTION

C. KLAUS, KENNETH, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 138 S. DEVON AVE.
 City DEVON State PA Zip Code 19333-1842
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 10 / 29 / 2016
Transaction ID : SA11A.461047
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶ 152.00
TOTAL This Period (last page this line number only).....▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1980 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
Team Ryan

A. KLAUS, KENNETH, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 138 S. DEVON AVE.
 City DEVON State PA Zip Code 19333-1842
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 11 / 04 / 2016
Transaction ID : SA11A.472072
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

B. KLEBBA, CHRIS, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5457 RIVER RIDGE DR
 City BRIGHTON State MI Zip Code 48116-7791
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) INFORMATION REQUESTED PER BEST EFFORTS Occupation (for Individual) INFORMATION REQUESTED PER BE
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 450.00

Date of Receipt 11 / 02 / 2016
Transaction ID : SA11A.466961
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

C. KLEBBA, CHRIS, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5457 RIVER RIDGE DR
 City BRIGHTON State MI Zip Code 48116-7791
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) INFORMATION REQUESTED PER BEST EFFORTS Occupation (for Individual) INFORMATION REQUESTED PER BE
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 450.00

Date of Receipt 11 / 02 / 2016
Transaction ID : SA11A.466964
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	200.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1981 OF 4311
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. KLEBER, RAYMOND, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 695 E. NEW HOPE RD
 City GOLDSBORO State NC Zip Code 27534-7005
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 639.00

Date of Receipt **10 / 28 / 2016**
Transaction ID : SA11A.455538
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

B. KLEBER, RAYMOND, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 695 E. NEW HOPE RD
 City GOLDSBORO State NC Zip Code 27534-7005
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 639.00

Date of Receipt **11 / 02 / 2016**
Transaction ID : SA11A.466047
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

C. KLEBER, RAYMOND, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 695 E. NEW HOPE RD
 City GOLDSBORO State NC Zip Code 27534-7005
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 639.00

Date of Receipt **11 / 03 / 2016**
Transaction ID : SA11A.468735
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 150.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1982 OF 4311
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. KLEBER, RAYMOND, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 695 E. NEW HOPE RD
 City GOLDSBORO State NC Zip Code 27534-7005
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 639.00

Date of Receipt
 11 / 07 / 2016
Transaction ID : SA11A.475771
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

B. KLEBER, RAYMOND, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 695 E. NEW HOPE RD
 City GOLDSBORO State NC Zip Code 27534-7005
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 639.00

Date of Receipt
 11 / 05 / 2016
Transaction ID : SA11A.478362
 Amount of Each Receipt this Period 30.00
 Memo Item CONTRIBUTION

C. KLECKNER, JAMES, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO BOX 711
 660 MAIN ST
 City MINTURN State CO Zip Code 81645-0711
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt
 11 / 04 / 2016
Transaction ID : SA11A.473611
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 155.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1983 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. KLECKNER, JAMES, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO BOX 711
 660 MAIN ST
 City MINTURN State CO Zip Code 81645-0711
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 05 / 2016
Transaction ID : SA11A.478754
 Amount of Each Receipt this Period
 50.00
 Memo Item
 CONTRIBUTION

B. KLECKNER, JAMES, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO BOX 711
 660 MAIN ST
 City MINTURN State CO Zip Code 81645-0711
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 05 / 2016
Transaction ID : SA11A.478771
 Amount of Each Receipt this Period
 50.00
 Memo Item
 CONTRIBUTION

C. KLEIER, CHARLES, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 127 OLD MILL RD
 City GREENVILLE State SC Zip Code 29607-5315
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SPECTRUM INTERIORS OF SC INC Occupation (for Individual) CONSTRUCTION
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 06 / 2016
Transaction ID : SA11A.477573
 Amount of Each Receipt this Period
 1000.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	1100.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1984 OF 4311
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. KLEIN, ALICE, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 303 TROENDLE STREET SW
APT 159

City MAPLETON State MN Zip Code 56065-9701

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
435.00

Date of Receipt
11 / 01 / 2016
Transaction ID : SA11A.461730

Amount of Each Receipt this Period
100.00

Memo Item CONTRIBUTION

B. KLEIN, ROBERT, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 2023 BROADVIEW CT

City GRAND JUNCTION State CO Zip Code 81507-9552

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) KLEIN ASSOCIATES, INC. Occupation (for Individual) BUSINESS APPRAISER

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
450.00

Date of Receipt
10 / 28 / 2016
Transaction ID : SA11A.455585

Amount of Each Receipt this Period
100.00

Memo Item CONTRIBUTION

C. KLEIN, ROBERT, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 2023 BROADVIEW CT

City GRAND JUNCTION State CO Zip Code 81507-9552

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) KLEIN ASSOCIATES, INC. Occupation (for Individual) BUSINESS APPRAISER

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
450.00

Date of Receipt
11 / 02 / 2016
Transaction ID : SA11A.466700

Amount of Each Receipt this Period
100.00

Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶ 300.00

TOTAL This Period (last page this line number only).....▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 1985 OF 4311
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. KLEIN, ROBERT, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 2023 BROADVIEW CT

City GRAND JUNCTION	State CO	Zip Code 81507-9552
------------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) KLEIN ASSOCIATES, INC.	Occupation (for Individual) BUSINESS APPRAISER
---	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
450.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	04	/	2016

Transaction ID : SA11A.471256

Amount of Each Receipt this Period
100.00

Memo Item
CONTRIBUTION

B. KLEIN, ROBERT, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 2023 BROADVIEW CT

City GRAND JUNCTION	State CO	Zip Code 81507-9552
------------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) KLEIN ASSOCIATES, INC.	Occupation (for Individual) BUSINESS APPRAISER
---	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
450.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	04	/	2016

Transaction ID : SA11A.474056

Amount of Each Receipt this Period
50.00

Memo Item
CONTRIBUTION

C. KLEIN, STEVEN, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 4207 PALOMINO COURT

City MIDDLETOWN	State MD	Zip Code 21769-6639
--------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) KLAS	Occupation (for Individual) EMPLOYEE
---	---

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
1125.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	25	/	2016

Transaction ID : SA11A.448855

Amount of Each Receipt this Period
100.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	250.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1986 OF 4311
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. KLEIN, STEVEN, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 4207 PALOMINO COURT

City MIDDLETOWN	State MD	Zip Code 21769-6639
--------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) KLAS	Occupation (for Individual) EMPLOYEE
---	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1125.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11		04		2016

Transaction ID : SA11A.470988

Amount of Each Receipt this Period
100.00

Memo Item CONTRIBUTION

B. KLEIN, SUSAN, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 9 WATCHWATER WAY

City ROCKVILLE	State MD	Zip Code 20850-2742
-------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) MID-ATLANTIC EPILEPSY AND SLEEP	Occupation (for Individual) 4006791202
--	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
387.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		24		2016

Transaction ID : SA11A.445669

Amount of Each Receipt this Period
50.00

Memo Item CONTRIBUTION

C. KLEIN, SUSAN, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 9 WATCHWATER WAY

City ROCKVILLE	State MD	Zip Code 20850-2742
-------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) MID-ATLANTIC EPILEPSY AND SLEEP	Occupation (for Individual) 4006791202
--	---

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
387.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		29		2016

Transaction ID : SA11A.460385

Amount of Each Receipt this Period
50.00

Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	200.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1987 OF 4311
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. KLEIN, SUSAN, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 9 WATCHWATER WAY

City ROCKVILLE	State MD	Zip Code 20850-2742
-------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) MID-ATLANTIC EPILEPSY AND SLEEP	Occupation (for Individual) 4006791202
--	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
387.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	01	/	2016

Transaction ID : SA11A.462267

Amount of Each Receipt this Period
25.00

Memo Item
CONTRIBUTION

B. KLEIN, SUSAN, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 9 WATCHWATER WAY

City ROCKVILLE	State MD	Zip Code 20850-2742
-------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) MID-ATLANTIC EPILEPSY AND SLEEP	Occupation (for Individual) 4006791202
--	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
387.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	08	/	2016

Transaction ID : SA11A.479852

Amount of Each Receipt this Period
25.00

Memo Item
CONTRIBUTION

C. KLEIN, SYLVIA, K., MS.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 21139 ARBOR COURT

City LEONARDTOWN	State MD	Zip Code 20650-3616
---------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
530.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	21	/	2016

Transaction ID : SA11A.443569

Amount of Each Receipt this Period
35.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	85.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1988 OF 4311
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. KLEIN, SYLVIA, K., MS.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 21139 ARBOR COURT

City LEONARDTOWN State MD Zip Code 20650-3616

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
530.00

Date of Receipt
10 / 24 / 2016
Transaction ID : SA11A.443857

Amount of Each Receipt this Period
50.00

Memo Item CONTRIBUTION

B. KLEIN, SYLVIA, K., MS.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 21139 ARBOR COURT

City LEONARDTOWN State MD Zip Code 20650-3616

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
530.00

Date of Receipt
10 / 27 / 2016
Transaction ID : SA11A.452305

Amount of Each Receipt this Period
200.00

Memo Item CONTRIBUTION

C. KLEISER, JAMES, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1855 CENTER RD

City NOVATO State CA Zip Code 94947-2976

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
925.00

Date of Receipt
10 / 27 / 2016
Transaction ID : SA11A.453304

Amount of Each Receipt this Period
100.00

Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 350.00

TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1989 OF 4311
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. KLEISER, JAMES, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1855 CENTER RD

City NOVATO	State CA	Zip Code 94947-2976
----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
925.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		30		2016

Transaction ID : SA11A.459981

Amount of Each Receipt this Period
150.00

Memo Item CONTRIBUTION

B. KLINE, WILLIAM, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 726 HEDGEROW DR

City BROOMALL	State PA	Zip Code 19008-2730
------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
700.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		24		2016

Transaction ID : SA11A.445816

Amount of Each Receipt this Period
50.00

Memo Item CONTRIBUTION

C. KLINE, WILLIAM, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 726 HEDGEROW DR

City BROOMALL	State PA	Zip Code 19008-2730
------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
700.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11		01		2016

Transaction ID : SA11A.462353

Amount of Each Receipt this Period
100.00

Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	300.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1990 OF 4311
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. KLINE, WILLIAM, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 726 HEDGEROW DR

City BROOMALL	State PA	Zip Code 19008-2730
------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
700.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
11		02		2016

Transaction ID : SA11A.466242

Amount of Each Receipt this Period
100.00

Memo Item
CONTRIBUTION

B. KLINGER, RICHARD, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 4006 COLFAX AVENUE NORTH

City MINNEAPOLIS	State MN	Zip Code 55412-1730
---------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) MN DEPT OF HUMAN SERVICES	Occupation (for Individual) TECHNOLOGY SPECIALIST
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
300.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
10		26		2016

Transaction ID : SA11A.454348

Amount of Each Receipt this Period
100.00

Memo Item
CONTRIBUTION

C. KLOENNE, BERNARD, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 2704 E LARKHILL DRIVE

City WEST COVINA	State CA	Zip Code 91791-3424
---------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) INFORMATION REQUESTED PER BEST EFFORTS	Occupation (for Individual) INFORMATION REQUESTED PER BES
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
250.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
10		27		2016

Transaction ID : SA11A.456710

Amount of Each Receipt this Period
250.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	450.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1991 OF 4311
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. KLOPFER, TERESA, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 3121 NORTHDAL ST, NW

City UNIONTOWN	State OH	Zip Code 44685-8409
-------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) TEAMHEALTH	Occupation (for Individual) CRNA
---	-------------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	04	/	2016

Transaction ID : SA11A.472993

Amount of Each Receipt this Period
50.00

Memo Item
CONTRIBUTION

B. KLOSS, WILLIAM, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 4200 BURTONWOOD DRIVE

City PENSACOLA	State FL	Zip Code 32514-8013
-------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) PRES	Occupation (for Individual) OWNER
---	--------------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	24	/	2016

Transaction ID : SA11A.443726

Amount of Each Receipt this Period
125.00

Memo Item
CONTRIBUTION

C. KLUCK, GARY, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 8650 INDIAN HILL COURT

City ORANGEVALE	State CA	Zip Code 95662-2138
--------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) QUALITY FIRST HOME IMPROVEMENT	Occupation (for Individual) CEO
---	------------------------------------

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
2250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	27	/	2016

Transaction ID : SA11A.453888

Amount of Each Receipt this Period
250.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	425.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1992 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
Team Ryan

A. KLUCK, GARY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 8650 INDIAN HILL COURT
 City ORANGEVALE State CA Zip Code 95662-2138
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) QUALITY FIRST HOME IMPROVEMENT Occupation (for Individual) CEO
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 2250.00

Date of Receipt
 11 / 04 / 2016
Transaction ID : SA11A.472261
 Amount of Each Receipt this Period
 250.00
 Memo Item
 CONTRIBUTION

B. KLUESENDORF, BOB, R., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address N6112 LYONS RD
 City BURLINGTON State WI Zip Code 53105-2716
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 460.00

Date of Receipt
 10 / 25 / 2016
Transaction ID : SA11A.448112
 Amount of Each Receipt this Period
 50.00
 Memo Item
 CONTRIBUTION

C. KLUMP, ROBERT, A., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 158 RANCH TRAIL
 City WILLIAMSVILLE State NY Zip Code 14221-2439
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) CANISIUS COLLEGE Occupation (for Individual) PROFESSOR
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 350.00

Date of Receipt
 10 / 20 / 2016
Transaction ID : SA11A.433513
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	400.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1993 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name A. KMETZ, ROBERT, , ,			Date of Receipt M M M / D D D / Y Y Y Y Y Y 10 / 26 / 2016
Mailing Address 32 TOWNE LANE			Transaction ID : SA11A.450918
City TOPSFIELD	State MA	Zip Code 01983-	Amount of Each Receipt this Period 25.16
FEC ID number of contributing federal political committee. C			<input type="checkbox"/> Memo Item CONTRIBUTION
Name of Employer (for Individual) KMETZ MANAGEMENT CONSULTING LLC		Occupation (for Individual) CONSULTANT	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 372.64	

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name B. KMETZ, ROBERT, , ,			Date of Receipt M M M / D D D / Y Y Y Y Y Y 11 / 05 / 2016
Mailing Address 32 TOWNE LANE			Transaction ID : SA11A.479257
City TOPSFIELD	State MA	Zip Code 01983-	Amount of Each Receipt this Period 25.16
FEC ID number of contributing federal political committee. C			<input type="checkbox"/> Memo Item CONTRIBUTION
Name of Employer (for Individual) KMETZ MANAGEMENT CONSULTING LLC		Occupation (for Individual) CONSULTANT	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 372.64	

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name C. KNIEVEL, RON, , ,			Date of Receipt M M M / D D D / Y Y Y Y Y Y 10 / 26 / 2016
Mailing Address 2322 SAGEWOOD			Transaction ID : SA11A.454286
City CASPER	State WY	Zip Code 82601-5018	Amount of Each Receipt this Period 30.00
FEC ID number of contributing federal political committee. C			<input type="checkbox"/> Memo Item CONTRIBUTION
Name of Employer (for Individual) NONE		Occupation (for Individual) RETIRED	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		Aggregate Year-to-Date ▼ 215.00	

SUBTOTAL of Receipts This Page (optional).....▶	80.32
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1994 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. KNEIVEL, RON, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2322 SAGEWOOD
 City CASPER State WY Zip Code 82601-5018
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 215.00

Date of Receipt
 11 / 05 / 2016
Transaction ID : SA11A.478942
 Amount of Each Receipt this Period 30.00
 Memo Item CONTRIBUTION

B. KNIFFIN, RICHARD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 9118 BAY BURY LANE
 City WEST PALM BEACH State FL Zip Code 33411-1890
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) THE VIKING AGENCY Occupation (for Individual) INSURANCE
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt
 10 / 31 / 2016
Transaction ID : SA11A.459160
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

C. KNIFFIN, RICHARD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 9118 BAY BURY LANE
 City WEST PALM BEACH State FL Zip Code 33411-1890
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) THE VIKING AGENCY Occupation (for Individual) INSURANCE
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt
 11 / 04 / 2016
Transaction ID : SA11A.471511
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	130.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1995 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. KNIGHT, MARGARET, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO BOX337
 City ROSICLARE State IL Zip Code 62982-0337
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 900.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 26 / 2016
Transaction ID : SA11A.451033
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION

B. KNIGHT, MARGARET, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO BOX337
 City ROSICLARE State IL Zip Code 62982-0337
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 900.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 04 / 2016
Transaction ID : SA11A.471887
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION

C. KNIGHT, MARGARET, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO BOX337
 City ROSICLARE State IL Zip Code 62982-0337
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 900.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 04 / 2016
Transaction ID : SA11A.474202
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	300.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1996 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. KNIGHT, MITZI, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO BOX 337
 City ROSICLARE State IL Zip Code 62982-0337
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 2275.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 21 / 2016
Transaction ID : SA11A.444515
 Amount of Each Receipt this Period
 50.00
 Memo Item
 CONTRIBUTION

B. KNIGHT, MITZI, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO BOX 337
 City ROSICLARE State IL Zip Code 62982-0337
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 2275.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 25 / 2016
Transaction ID : SA11A.448422
 Amount of Each Receipt this Period
 50.00
 Memo Item
 CONTRIBUTION

C. KNIGHT, MITZI, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO BOX 337
 City ROSICLARE State IL Zip Code 62982-0337
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 2275.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 25 / 2016
Transaction ID : SA11A.448549
 Amount of Each Receipt this Period
 50.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	150.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1997 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13 <input type="checkbox"/> 11b <input type="checkbox"/> 14 <input type="checkbox"/> 11c <input type="checkbox"/> 15 <input type="checkbox"/> 12 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. KNIGHT, MITZI, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO BOX 337
 City ROSICLARE State IL Zip Code 62982-0337
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 2275.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 25 / 2016
Transaction ID : SA11A.448553
 Amount of Each Receipt this Period
 50.00
 Memo Item
 CONTRIBUTION

B. KNIGHT, MITZI, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO BOX 337
 City ROSICLARE State IL Zip Code 62982-0337
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 2275.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 01 / 2016
Transaction ID : SA11A.462370
 Amount of Each Receipt this Period
 50.00
 Memo Item
 CONTRIBUTION

C. KNIGHT, MITZI, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO BOX 337
 City ROSICLARE State IL Zip Code 62982-0337
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 2275.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 01 / 2016
Transaction ID : SA11A.462371
 Amount of Each Receipt this Period
 50.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	150.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1998 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. KNIGHT, MITZI, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO BOX 337
 City ROSICLARE State IL Zip Code 62982-0337
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 2275.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 04 / 2016
Transaction ID : SA11A.471826
 Amount of Each Receipt this Period
 50.00
 Memo Item
 CONTRIBUTION

B. KNIGHT, MITZI, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO BOX 337
 City ROSICLARE State IL Zip Code 62982-0337
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 2275.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 06 / 2016
Transaction ID : SA11A.477953
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION

C. KNITTLE, F JAMES, , , JR
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 151 NAOMI DRIVE
 City OCEAN VIEW State DE Zip Code 19970-9786
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 750.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 31 / 2016
Transaction ID : SA11A.457289
 Amount of Each Receipt this Period
 750.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	900.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1999 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. KNOCHE, JOHN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 25232 GALASHIELDS CIR
 City BONITA SPRINGS State FL Zip Code 34134-1964
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 11 / 03 / 2016
Transaction ID : SA11A.469072
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

B. KNOEBEL, CONSTANCE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 120 6TH AVENUE
 City NYACK State NY Zip Code 10960-1625
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 575.00

Date of Receipt 10 / 27 / 2016
Transaction ID : SA11A.454156
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

C. KNOEBEL, CONSTANCE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 120 6TH AVENUE
 City NYACK State NY Zip Code 10960-1625
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 575.00

Date of Receipt 10 / 27 / 2016
Transaction ID : SA11A.454157
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	200.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2000 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. KNOEBEL, CONSTANCE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 120 6TH AVENUE
 City NYACK State NY Zip Code 10960-1625
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 575.00

Date of Receipt 10 / 27 / 2016
Transaction ID : SA11A.454158
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

B. KNOFF, DANIEL, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1 MEUDON DR
 City LOCUST VALLEY State NY Zip Code 11560-1014
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) CBRE Occupation (for Individual) REAL ESTATE
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 10 / 20 / 2016
Transaction ID : SA11A.442260
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

C. KNOX, DORIS, M., MRS.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 23144 S SHORE DRIVE
 City EDWARDSBURG State MI Zip Code 49112-8502
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1450.00

Date of Receipt 11 / 03 / 2016
Transaction ID : SA11A.465326
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶ 400.00
TOTAL This Period (last page this line number only).....▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2001 OF 4311
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. KNUDSEN, ROBERT, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1570 WINDSWEPT DR
 City SAINT GEORGE State UT Zip Code 84790-4483
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 276.00

Date of Receipt 10 / 31 / 2016
Transaction ID : SA11A.463202
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

B. KNUST, GARY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5773 WOODWAY NO. 450
 City HOUSTON State TX Zip Code 77057-1501
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) PROMACHINE Occupation (for Individual) OWNER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 800.00

Date of Receipt 10 / 26 / 2016
Transaction ID : SA11A.450890
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

C. KNUST, GARY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5773 WOODWAY NO. 450
 City HOUSTON State TX Zip Code 77057-1501
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) PROMACHINE Occupation (for Individual) OWNER
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 800.00

Date of Receipt 10 / 26 / 2016
Transaction ID : SA11A.450903
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶ 225.00
TOTAL This Period (last page this line number only).....▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2002 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. KOCUR, FRANK, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5156 E OTERO CIR
 City CENTENNIAL State CO Zip Code 80122-3880
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) CHS-DENVER Occupation (for Individual) REAL ESTATE
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 900.00

Date of Receipt 11 / 01 / 2016
Transaction ID : SA11A.463120
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

B. KOCUR, FRANK, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5156 E OTERO CIR
 City CENTENNIAL State CO Zip Code 80122-3880
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) CHS-DENVER Occupation (for Individual) REAL ESTATE
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 900.00

Date of Receipt 11 / 04 / 2016
Transaction ID : SA11A.471715
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

C. KOEHEL, DEBRA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2311 BAYVIEW LANE
 City MIAMI State FL Zip Code 33181-2433
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SFADA Occupation (for Individual) COMPTROLLER
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 5000.00

Date of Receipt 10 / 24 / 2016
Transaction ID : SA11A.444068
 Amount of Each Receipt this Period 5000.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	5300.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 2003 OF 4311
	(check only one)
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
<input type="checkbox"/> 13	<input type="checkbox"/> 14
<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/>	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. KOEHLER, JOHN, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 3012 WOODSONG LANE

City CLEARWATER	State FL	Zip Code 33761-2021
--------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) VITAL NETWORK SERVICES, INC.	Occupation (for Individual) EXECUTIVE
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
800.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		21		2016

Transaction ID : SA11A.444600

Amount of Each Receipt this Period
50.00

Memo Item
CONTRIBUTION

B. KOEHLER, JOHN, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 3012 WOODSONG LANE

City CLEARWATER	State FL	Zip Code 33761-2021
--------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) VITAL NETWORK SERVICES, INC.	Occupation (for Individual) EXECUTIVE
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
800.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11		04		2016

Transaction ID : SA11A.473525

Amount of Each Receipt this Period
50.00

Memo Item
CONTRIBUTION

C. KOENIG, KARL, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 20595 MILTON COURT

City BROOKFIELD	State WI	Zip Code 53045-4050
--------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) PENTA TECHNOLOGIES INC	Occupation (for Individual) EXECUTIVE
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
300.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		31		2016

Transaction ID : SA11A.458819

Amount of Each Receipt this Period
100.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	200.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2004 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
-----------------------------	-----------------------------	-----------------------------

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
Team Ryan

A. KOESTER, JANET, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1349 CAVE SPRINGS ESTATE DR
 City ST PETERS State MO Zip Code 63376-6532
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) THE BOEING COMPANY Occupation (for Individual) COMPUTER PROGRAMMER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 10 / 30 / 2016
Transaction ID : SA11A.459462
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

B. KOESTER, JANET, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1349 CAVE SPRINGS ESTATE DR
 City ST PETERS State MO Zip Code 63376-6532
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) THE BOEING COMPANY Occupation (for Individual) COMPUTER PROGRAMMER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 10 / 30 / 2016
Transaction ID : SA11A.459465
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

C. KOESTER, JANET, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1349 CAVE SPRINGS ESTATE DR
 City ST PETERS State MO Zip Code 63376-6532
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) THE BOEING COMPANY Occupation (for Individual) COMPUTER PROGRAMMER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 11 / 04 / 2016
Transaction ID : SA11A.479626
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 250.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2005 OF 4311
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. KOETHER, BERNARD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 757 SE 17TH STREET
 STE 1074
 City FORT LAUDERDALE State FL Zip Code 33316-2960
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 875.00

Date of Receipt 10 / 27 / 2016
Transaction ID : SA11A.453142
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

B. KOETHER, BERNARD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 757 SE 17TH STREET
 STE 1074
 City FORT LAUDERDALE State FL Zip Code 33316-2960
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 875.00

Date of Receipt 10 / 27 / 2016
Transaction ID : SA11A.453143
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

C. KOHLBERGER, RICHARD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 121 CAT ROCK RD
 City COS COB State CT Zip Code 06807-1305
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 10 / 25 / 2016
Transaction ID : SA11A.452151
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 600.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2006 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. KOHLER, PATRICIA, J., MRS.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 9501 PRAIRIE CROSSING DR.
 City FRANKSVILLE State WI Zip Code 53126-9378
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 225.00

Date of Receipt 10 / 31 / 2016
Transaction ID : SA11A.457931
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

B. KOHLER, PATRICIA, J., MRS.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 9501 PRAIRIE CROSSING DR.
 City FRANKSVILLE State WI Zip Code 53126-9378
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 225.00

Date of Receipt 11 / 07 / 2016
Transaction ID : SA11A.475688
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

C. KOHLMAN, ROSS, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 22795 FOREST RIDGE DRIVE
 City LAKEVILLE State MN Zip Code 55044-8004
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 444.00

Date of Receipt 10 / 21 / 2016
Transaction ID : SA11A.444149
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	75.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2007 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. KOHLMAN, ROSS, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 22795 FOREST RIDGE DRIVE
 City LAKEVILLE State MN Zip Code 55044-8004
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 444.00

Date of Receipt 10 / 24 / 2016
Transaction ID : SA11A.445958
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

B. KOHLMAN, ROSS, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 22795 FOREST RIDGE DRIVE
 City LAKEVILLE State MN Zip Code 55044-8004
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 444.00

Date of Receipt 10 / 24 / 2016
Transaction ID : SA11A.445959
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

C. KOHLMAN, ROSS, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 22795 FOREST RIDGE DRIVE
 City LAKEVILLE State MN Zip Code 55044-8004
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 444.00

Date of Receipt 10 / 26 / 2016
Transaction ID : SA11A.450305
 Amount of Each Receipt this Period 30.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶ 80.00
TOTAL This Period (last page this line number only).....▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2008 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
Team Ryan

A. KOHLMAN, ROSS, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 22795 FOREST RIDGE DRIVE
 City LAKEVILLE State MN Zip Code 55044-8004
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 444.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 26 / 2016
Transaction ID : SA11A.450310
 Amount of Each Receipt this Period
 25.00
 Memo Item
 CONTRIBUTION

B. KOHLMAN, ROSS, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 22795 FOREST RIDGE DRIVE
 City LAKEVILLE State MN Zip Code 55044-8004
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 444.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 26 / 2016
Transaction ID : SA11A.450311
 Amount of Each Receipt this Period
 25.00
 Memo Item
 CONTRIBUTION

C. KOHLMAN, ROSS, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 22795 FOREST RIDGE DRIVE
 City LAKEVILLE State MN Zip Code 55044-8004
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 444.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 31 / 2016
Transaction ID : SA11A.457874
 Amount of Each Receipt this Period
 25.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	75.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2009 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
Team Ryan

A. KOHLMAN, ROSS, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 22795 FOREST RIDGE DRIVE
 City LAKEVILLE State MN Zip Code 55044-8004
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 444.00

Date of Receipt 11 / 04 / 2016
Transaction ID : SA11A.474035
 Amount of Each Receipt this Period 30.00
 Memo Item CONTRIBUTION

B. KOHTZ, DELBERT, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1135 VALLEY RD. SO.
 City EDEN State ID Zip Code 83325-5245
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) FARMER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 10 / 26 / 2016
Transaction ID : SA11A.449880
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

C. KOLARIK, DENNIS, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4573 LISMORE AVE. N.W.
 City CANTON State OH Zip Code 44718-4410
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 10 / 31 / 2016
Transaction ID : SA11A.459072
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	530.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2010 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
A. KOLVET, ANDREW, , ,

Mailing Address 641 WESTMINSTER AVE
4

City VENICE State CA Zip Code 90291-6007

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) PRODUCER

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
350.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 27 / 2016
Transaction ID : SA11A.456713

Amount of Each Receipt this Period
50.00

Memo Item CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
B. KOLVET, ANDREW, , ,

Mailing Address 641 WESTMINSTER AVE
4

City VENICE State CA Zip Code 90291-6007

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) PRODUCER

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
350.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 01 / 2016
Transaction ID : SA11A.463029

Amount of Each Receipt this Period
50.00

Memo Item CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
C. KOLVET, ANDREW, , ,

Mailing Address 641 WESTMINSTER AVE
4

City VENICE State CA Zip Code 90291-6007

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) PRODUCER

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
350.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 02 / 2016
Transaction ID : SA11A.465885

Amount of Each Receipt this Period
50.00

Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 150.00

TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2011 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. KOMETER, CLYDE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 639 PINE TREE RD
 City KOHLER State WI Zip Code 53044-1423
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 225.00

Date of Receipt 10 / 21 / 2016
Transaction ID : SA11A.444460
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

B. KONRAD, LESLIE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 601 WARWICK ROAD
 City HADDONFIELD State NJ Zip Code 08033-3926
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) HOMEMAKER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt 10 / 27 / 2016
Transaction ID : SA11A.452262
 Amount of Each Receipt this Period 200.00
 Memo Item CONTRIBUTION

C. KOONCE, JOHNNY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO BOX 1882
 City ALVIN State TX Zip Code 77512-1882
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) ASCEND Occupation (for Individual) ANALYZER TECHNICIAN
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 375.00

Date of Receipt 10 / 25 / 2016
Transaction ID : SA11A.451787
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 250.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2012 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
Team Ryan

A. KOONCE, JOHNNY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO BOX 1882
 City ALVIN State TX Zip Code 77512-1882
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) ASCEND Occupation (for Individual) ANALYZER TECHNICIAN
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 375.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 25 / 2016
Transaction ID : SA11A.451788
 Amount of Each Receipt this Period
 25.00
 Memo Item
 CONTRIBUTION

B. KOONCE, JOHNNY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO BOX 1882
 City ALVIN State TX Zip Code 77512-1882
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) ASCEND Occupation (for Individual) ANALYZER TECHNICIAN
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 375.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 26 / 2016
Transaction ID : SA11A.454389
 Amount of Each Receipt this Period
 25.00
 Memo Item
 CONTRIBUTION

C. KOONCE, JOHNNY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO BOX 1882
 City ALVIN State TX Zip Code 77512-1882
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) ASCEND Occupation (for Individual) ANALYZER TECHNICIAN
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 375.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 02 / 2016
Transaction ID : SA11A.469625
 Amount of Each Receipt this Period
 25.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	75.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2013 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
A. KOONCE, JOHNNY, , ,

Mailing Address **PO BOX 1882**

City ALVIN	State TX	Zip Code 77512-1882
----------------------	--------------------	-------------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) ASCEND	Occupation (for Individual) ANALYZER TECHNICIAN
--	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
375.00

Date of Receipt
11 / 04 / 2016

Transaction ID : SA11A.472684

Amount of Each Receipt this Period
25.00

Memo Item
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
B. KOONCE, JOHNNY, , ,

Mailing Address **PO BOX 1882**

City ALVIN	State TX	Zip Code 77512-1882
----------------------	--------------------	-------------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) ASCEND	Occupation (for Individual) ANALYZER TECHNICIAN
--	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
375.00

Date of Receipt
11 / 04 / 2016

Transaction ID : SA11A.474051

Amount of Each Receipt this Period
25.00

Memo Item
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
C. KOONCE, JOHNNY, , ,

Mailing Address **PO BOX 1882**

City ALVIN	State TX	Zip Code 77512-1882
----------------------	--------------------	-------------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) ASCEND	Occupation (for Individual) ANALYZER TECHNICIAN
--	---

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
375.00

Date of Receipt
11 / 07 / 2016

Transaction ID : SA11A.476671

Amount of Each Receipt this Period
25.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	75.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2014 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
Team Ryan

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
A. KOONCE, JOHNNY, , ,

Mailing Address **PO BOX 1882**

City ALVIN	State TX	Zip Code 77512-1882
----------------------	--------------------	-------------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) ASCEND	Occupation (for Individual) ANALYZER TECHNICIAN
--	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
375.00

Date of Receipt
11 / 07 / 2016

Transaction ID : SA11A.480029

Amount of Each Receipt this Period
25.00

Memo Item CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
B. KOONS, CHARLES, A., ,

Mailing Address **75 MAYWOOD ROAD**

City DARIEN	State CT	Zip Code 06820-2625
-----------------------	--------------------	-------------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) MAYWOOD ADVISORS LLC	Occupation (for Individual) FINANCIAL CONSULTANT
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
750.00

Date of Receipt
10 / 25 / 2016

Transaction ID : SA11A.447273

Amount of Each Receipt this Period
750.00

Memo Item CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
C. KOREGELOS, MARILYN, , ,

Mailing Address **501 STILLWATER CT**

City LINCOLN	State CA	Zip Code 95648-8618
------------------------	--------------------	-------------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
--	---

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
400.00

Date of Receipt
10 / 27 / 2016

Transaction ID : SA11A.456902

Amount of Each Receipt this Period
100.00

Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	875.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2015 OF 4311
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. KOREGELOS, MARILYN, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 501 STILLWATER CT

City LINCOLN	State CA	Zip Code 95648-8618
-----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
400.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	27	/	2016

Transaction ID : SA11A.456907

Amount of Each Receipt this Period
100.00

Memo Item
CONTRIBUTION

B. KOREGELOS, MARILYN, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 501 STILLWATER CT

City LINCOLN	State CA	Zip Code 95648-8618
-----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
400.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	27	/	2016

Transaction ID : SA11A.456909

Amount of Each Receipt this Period
100.00

Memo Item
CONTRIBUTION

C. KOREGELOS, MARILYN, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 501 STILLWATER CT

City LINCOLN	State CA	Zip Code 95648-8618
-----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
400.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	06	/	2016

Transaction ID : SA11A.477749

Amount of Each Receipt this Period
25.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	225.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2016 OF 4311
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. KORELITZ, KAREN, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 2186 VIZCAYA CIR.

City CAMPBELL	State CA	Zip Code 95008-5646
------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
550.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		31		2016

Transaction ID : SA11A.457970

Amount of Each Receipt this Period
50.00

Memo Item
CONTRIBUTION

B. KORNIETZ, WILLIAM, J., MR.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 400 W 49TH TERRACE

City KANSAS CITY	State MO	Zip Code 64112-2407
---------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
300.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		24		2016

Transaction ID : SA11A.443890

Amount of Each Receipt this Period
200.00

Memo Item
CONTRIBUTION

C. KOSANN, STEVEN, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 425 EAST 58TH STREET
34H

City NEW YORK	State NY	Zip Code 10022-2300
------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) BARNET PRODUCTS CORP.	Occupation (for Individual) EXECUTIVE
--	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
2750.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		20		2016

Transaction ID : SA11A.444697

Amount of Each Receipt this Period
250.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	500.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2017 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. KOSANN, STEVEN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 425 EAST 58TH STREET
 34H
 City NEW YORK State NY Zip Code 10022-2300
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) BARNET PRODUCTS CORP. Occupation (for Individual) EXECUTIVE
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 2750.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 20 / 2016
Transaction ID : SA11A.444700
 Amount of Each Receipt this Period
 250.00
 Memo Item
 CONTRIBUTION

B. KOSS, EDWARD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2125 BLANCHE LANE
 City MERRICK State NY Zip Code 11566-5500
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SHERALVEN ENTERPRISES Occupation (for Individual) EXECUTIVE
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1200.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 27 / 2016
Transaction ID : SA11A.456447
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION

C. KOSS, EDWARD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2125 BLANCHE LANE
 City MERRICK State NY Zip Code 11566-5500
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SHERALVEN ENTERPRISES Occupation (for Individual) EXECUTIVE
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1200.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 27 / 2016
Transaction ID : SA11A.456448
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	450.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2018 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. KOTCH, ANDREW, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2373 LAKE AVENUE
 City ALLISON PARK State PA Zip Code 15101-3466
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) KUHN'S QUALITY FOODS Occupation (for Individual) BAKER'S ASSISTANT
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 410.00

Date of Receipt 10 / 24 / 2016
Transaction ID : SA11A.449397
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

B. KOTCH, ANDREW, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2373 LAKE AVENUE
 City ALLISON PARK State PA Zip Code 15101-3466
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) KUHN'S QUALITY FOODS Occupation (for Individual) BAKER'S ASSISTANT
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 410.00

Date of Receipt 10 / 24 / 2016
Transaction ID : SA11A.449399
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

C. KOTCH, ANDREW, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2373 LAKE AVENUE
 City ALLISON PARK State PA Zip Code 15101-3466
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) KUHN'S QUALITY FOODS Occupation (for Individual) BAKER'S ASSISTANT
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 410.00

Date of Receipt 10 / 26 / 2016
Transaction ID : SA11A.451186
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	75.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2019 OF 4311
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	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. KOTCH, ANDREW, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 2373 LAKE AVENUE

City ALLISON PARK	State PA	Zip Code 15101-3466
----------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) KUHNS QUALITY FOODS	Occupation (for Individual) BAKER'S ASSISTANT
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
410.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	02	/	2016

Transaction ID : SA11A.466698

Amount of Each Receipt this Period
25.00

Memo Item
CONTRIBUTION

B. KOTCH, ANDREW, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 2373 LAKE AVENUE

City ALLISON PARK	State PA	Zip Code 15101-3466
----------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) KUHNS QUALITY FOODS	Occupation (for Individual) BAKER'S ASSISTANT
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
410.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	02	/	2016

Transaction ID : SA11A.469819

Amount of Each Receipt this Period
25.00

Memo Item
CONTRIBUTION

C. KOTCH, ANDREW, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 2373 LAKE AVENUE

City ALLISON PARK	State PA	Zip Code 15101-3466
----------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) KUHNS QUALITY FOODS	Occupation (for Individual) BAKER'S ASSISTANT
--	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
410.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	04	/	2016

Transaction ID : SA11A.472238

Amount of Each Receipt this Period
25.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	75.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2020 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. KOTCH, ANDREW, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2373 LAKE AVENUE
 City ALLISON PARK State PA Zip Code 15101-3466
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) KUHN'S QUALITY FOODS Occupation (for Individual) BAKER'S ASSISTANT
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 410.00

Date of Receipt 11 / 06 / 2016
Transaction ID : SA11A.476967
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

B. KOTCH, ANDREW, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2373 LAKE AVENUE
 City ALLISON PARK State PA Zip Code 15101-3466
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) KUHN'S QUALITY FOODS Occupation (for Individual) BAKER'S ASSISTANT
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 410.00

Date of Receipt 11 / 07 / 2016
Transaction ID : SA11A.479952
 Amount of Each Receipt this Period 10.00
 Memo Item CONTRIBUTION

C. KOTLOFF, RONALD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 26600 OSO PKWY 436
 City MISSION VIEJO State CA Zip Code 92691-5652
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 464.00

Date of Receipt 10 / 23 / 2016
Transaction ID : SA11A.446394
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 85.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2021 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13 <input type="checkbox"/> 11b <input type="checkbox"/> 14 <input type="checkbox"/> 11c <input type="checkbox"/> 15 <input type="checkbox"/> 12 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
Team Ryan

A. KOTRBA, DOUGLAS, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO BOX 44932
 City TACOMA State WA Zip Code 98448-0932
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 10 / 31 / 2016
Transaction ID : SA11A.464356
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

B. KOTRBA, DOUGLAS, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO BOX 44932
 City TACOMA State WA Zip Code 98448-0932
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 10 / 31 / 2016
Transaction ID : SA11A.464371
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

C. KOVACICH, DAVID, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5251 CHEYENNE MOON
 City CARMEL State IN Zip Code 46033-8897
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) IHP Occupation (for Individual) PLUMBER
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 10 / 23 / 2016
Transaction ID : SA11A.446280
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 450.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2022 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. KOVAL, JOANNE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 11910 OXFORD AVENUE
 City HAWTHORNE State CA Zip Code 90250-3122
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 225.00

Date of Receipt 11 / 01 / 2016
Transaction ID : SA11A.463075
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

B. KOWALSKI, KARREN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2172 SENEICIO DR.
 City LARKSPUR State CO Zip Code 80118-9401
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) COLORADO CENTER FOR NURSING EXCELLENCE Occupation (for Individual) NURSE ADMINISTRATOR
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 525.00

Date of Receipt 10 / 26 / 2016
Transaction ID : SA11A.451132
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

C. KOWALSKI, KARREN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2172 SENEICIO DR.
 City LARKSPUR State CO Zip Code 80118-9401
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) COLORADO CENTER FOR NURSING EXCELLENCE Occupation (for Individual) NURSE ADMINISTRATOR
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 525.00

Date of Receipt 10 / 26 / 2016
Transaction ID : SA11A.451133
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	300.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2023 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. KOWALSKI, KARREN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2172 SENECIO DR.
 City LARKSPUR State CO Zip Code 80118-9401
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) COLORADO CENTER FOR NURSING EXCELLENCE Occupation (for Individual) NURSE ADMINISTRATOR
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 525.00

Date of Receipt 11 / 07 / 2016
Transaction ID : SA11A.475935
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

B. KOWALSKI, KARREN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2172 SENECIO DR.
 City LARKSPUR State CO Zip Code 80118-9401
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) COLORADO CENTER FOR NURSING EXCELLENCE Occupation (for Individual) NURSE ADMINISTRATOR
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 525.00

Date of Receipt 11 / 07 / 2016
Transaction ID : SA11A.475947
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

C. KOWALSKI, KARREN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2172 SENECIO DR.
 City LARKSPUR State CO Zip Code 80118-9401
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) COLORADO CENTER FOR NURSING EXCELLENCE Occupation (for Individual) NURSE ADMINISTRATOR
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 525.00

Date of Receipt 11 / 07 / 2016
Transaction ID : SA11A.476575
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	125.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2024 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. KRAEMER, CHARLES, W., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 335 PARK LANE
 City LAKE BLUFF State IL Zip Code 60044-2320
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 04 / 2016
Transaction ID : SA11A.472932
 Amount of Each Receipt this Period
 50.00
 Memo Item
 CONTRIBUTION

B. KRAGOVICH, NICK, , MR., III
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 132 BELLVIEW DRIVE
 City ROCK SPRINGS State WY Zip Code 82901-4504
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 355.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 24 / 2016
Transaction ID : SA11A.443797
 Amount of Each Receipt this Period
 40.00
 Memo Item
 CONTRIBUTION

C. KRAGOVICH, NICK, , MR., III
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 132 BELLVIEW DRIVE
 City ROCK SPRINGS State WY Zip Code 82901-4504
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 355.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 04 / 2016
Transaction ID : SA11A.467604
 Amount of Each Receipt this Period
 75.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	165.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2025 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
Team Ryan

A. KRAMER, JOHN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 43 GRAHAMPTON LANE
 City GREENWICH State CT Zip Code 06830-3861
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) ICON INTERNATIONAL Occupation (for Individual) CEO
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 10 / 25 / 2016
Transaction ID : SA11A.448702
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

B. KRAMER, RICHARD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 22536 W 112TH TER
 City OLATHE State KS Zip Code 66061-7142
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 775.00

Date of Receipt 10 / 25 / 2016
Transaction ID : SA11A.447780
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

C. KRAMER, RICHARD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 22536 W 112TH TER
 City OLATHE State KS Zip Code 66061-7142
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 775.00

Date of Receipt 10 / 28 / 2016
Transaction ID : SA11A.456052
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	400.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2026 OF 4311
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. KRAMER, RICHARD, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 22536 W 112TH TER

City OLATHE State KS Zip Code 66061-7142

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 775.00

Date of Receipt 10 / 31 / 2016
Transaction ID : SA11A.457652

Amount of Each Receipt this Period 25.00

Memo Item CONTRIBUTION

B. KRAMER, RICHARD, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 22536 W 112TH TER

City OLATHE State KS Zip Code 66061-7142

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 775.00

Date of Receipt 11 / 04 / 2016
Transaction ID : SA11A.473341

Amount of Each Receipt this Period 50.00

Memo Item CONTRIBUTION

C. KRAUEL, ARNOLD, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 507 SOUTH DIVISION ST

City AUDUBON State IA Zip Code 50025-1336

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED

Receipt For: Primary General Other (specify)

Aggregate Year-to-Date ▼ 475.00

Date of Receipt 10 / 20 / 2016
Transaction ID : SA11A.442620

Amount of Each Receipt this Period 50.00

Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 125.00

TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2027 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. KRAUEL, ARNOLD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 507 SOUTH DIVISION ST
 City AUDUBON State IA Zip Code 50025-1336
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 475.00

Date of Receipt 10 / 20 / 2016
Transaction ID : SA11A.442623
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

B. KRAUEL, ARNOLD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 507 SOUTH DIVISION ST
 City AUDUBON State IA Zip Code 50025-1336
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 475.00

Date of Receipt 10 / 25 / 2016
Transaction ID : SA11A.451579
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

C. KRAUEL, ARNOLD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 507 SOUTH DIVISION ST
 City AUDUBON State IA Zip Code 50025-1336
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 475.00

Date of Receipt 10 / 25 / 2016
Transaction ID : SA11A.451586
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶ 150.00
TOTAL This Period (last page this line number only).....▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2028 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. KRAUEL, ARNOLD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 507 SOUTH DIVISION ST
 City AUDUBON State IA Zip Code 50025-1336
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 475.00

Date of Receipt 10 / 31 / 2016
Transaction ID : SA11A.464277
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

B. KRAUSE, JOSEPH, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address BOX 189
 City WILLCOX State AZ Zip Code 85644-0189
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 225.00

Date of Receipt 10 / 25 / 2016
Transaction ID : SA11A.452092
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

C. KRAUSE, PAUL, , MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1301 N HERKIMER ST
 City JOLIET State IL Zip Code 60432-1057
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) AUTO DISMANTLER/REESTATE
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 1835.00

Date of Receipt 10 / 20 / 2016
Transaction ID : SA11A.442611
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	225.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2029 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
Team Ryan

A. KRAUSE, PAUL, , MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1301 N HERKIMER ST
 City JOLIET State IL Zip Code 60432-1057
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) AUTO DISMANTLER/REESTATE
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1835.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 20 / 2016
Transaction ID : SA11A.442614
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION

B. KRAUSE, PAUL, , MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1301 N HERKIMER ST
 City JOLIET State IL Zip Code 60432-1057
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) AUTO DISMANTLER/REESTATE
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1835.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 21 / 2016
Transaction ID : SA11A.444563
 Amount of Each Receipt this Period
 50.00
 Memo Item
 CONTRIBUTION

C. KRAUSE, PAUL, , MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1301 N HERKIMER ST
 City JOLIET State IL Zip Code 60432-1057
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) AUTO DISMANTLER/REESTATE
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1835.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 26 / 2016
Transaction ID : SA11A.451329
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	250.00
TOTAL This Period (last page this line number only).....	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2030 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. KRAUSE, PAUL, , MR.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1301 N HERKIMER ST

City JOLIET	State IL	Zip Code 60432-1057
----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) SELF EMPLOYED	Occupation (for Individual) AUTO DISMANTLER/REESTATE
--	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1835.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		26		2016

Transaction ID : SA11A.451330

Amount of Each Receipt this Period
100.00

Memo Item
CONTRIBUTION

B. KRAUSE, PAUL, , MR.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1301 N HERKIMER ST

City JOLIET	State IL	Zip Code 60432-1057
----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) SELF EMPLOYED	Occupation (for Individual) AUTO DISMANTLER/REESTATE
--	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1835.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		26		2016

Transaction ID : SA11A.451332

Amount of Each Receipt this Period
100.00

Memo Item
CONTRIBUTION

C. KRAUSE, PAUL, , MR.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1301 N HERKIMER ST

City JOLIET	State IL	Zip Code 60432-1057
----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) SELF EMPLOYED	Occupation (for Individual) AUTO DISMANTLER/REESTATE
--	---

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
1835.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		26		2016

Transaction ID : SA11A.451333

Amount of Each Receipt this Period
100.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	300.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2031 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. KRAUSE, PAUL, , MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1301 N HERKIMER ST
 City JOLIET State IL Zip Code 60432-1057
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) AUTO DISMANTLER/REESTATE
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1835.00

Date of Receipt 11 / 03 / 2016
Transaction ID : SA11A.468479
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

B. KRAUSE, PAUL, , MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1301 N HERKIMER ST
 City JOLIET State IL Zip Code 60432-1057
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) AUTO DISMANTLER/REESTATE
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1835.00

Date of Receipt 11 / 03 / 2016
Transaction ID : SA11A.468481
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

C. KRAUSE, PAUL, , MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1301 N HERKIMER ST
 City JOLIET State IL Zip Code 60432-1057
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) AUTO DISMANTLER/REESTATE
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1835.00

Date of Receipt 11 / 03 / 2016
Transaction ID : SA11A.469230
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 200.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2032 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. KRAUSE, PAUL, , MR.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1301 N HERKIMER ST

City JOLIET	State IL	Zip Code 60432-1057
----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) SELF EMPLOYED	Occupation (for Individual) AUTO DISMANTLER/REESTATE
--	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1835.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	03	/	2016

Transaction ID : SA11A.469231

Amount of Each Receipt this Period
100.00

Memo Item
CONTRIBUTION

B. KRAUSE, PAUL, , MR.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1301 N HERKIMER ST

City JOLIET	State IL	Zip Code 60432-1057
----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) SELF EMPLOYED	Occupation (for Individual) AUTO DISMANTLER/REESTATE
--	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1835.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	04	/	2016

Transaction ID : SA11A.470886

Amount of Each Receipt this Period
100.00

Memo Item
CONTRIBUTION

C. KRAUSE, PAUL, , MR.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1301 N HERKIMER ST

City JOLIET	State IL	Zip Code 60432-1057
----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) SELF EMPLOYED	Occupation (for Individual) AUTO DISMANTLER/REESTATE
--	---

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
1835.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	04	/	2016

Transaction ID : SA11A.472844

Amount of Each Receipt this Period
50.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	250.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2033 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. KRAUSE, PAUL, , MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1301 N HERKIMER ST
 City JOLIET State IL Zip Code 60432-1057
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) AUTO DISMANTLER/REESTATE
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1835.00

Date of Receipt 11 / 04 / 2016
Transaction ID : SA11A.473903
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

B. KRAVITZ, JAMES, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2201 BARREN HILL ROAD
 City CONSHOHOCKEN State PA Zip Code 19428-2426
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) JBK DEVELOPMENT Occupation (for Individual) BUILDER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt 11 / 07 / 2016
Transaction ID : SA11A.467824
 Amount of Each Receipt this Period 1000.00
 Memo Item CONTRIBUTION

C. KREITLER, BONNIE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 229 MILE COMMON
 City EASTON State CT Zip Code 06612-1547
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RAMBLING DOG PUBLISHING Occupation (for Individual) AUTHOR
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 10 / 20 / 2016
Transaction ID : SA11A.433380
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	1350.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2034 OF 4311
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. KRENNING, RICHARD, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 13750 CR 4930

City ROLLA	State MO	Zip Code 65401-
---------------	-------------	--------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) BOND CLINIC	Occupation (for Individual) BOND CLINIC
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		25		2016

Transaction ID : SA11A.452249

Amount of Each Receipt this Period
50.00

Memo Item CONTRIBUTION

B. KRENNING, RICHARD, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 13750 CR 4930

City ROLLA	State MO	Zip Code 65401-
---------------	-------------	--------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) BOND CLINIC	Occupation (for Individual) BOND CLINIC
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		31		2016

Transaction ID : SA11A.458040

Amount of Each Receipt this Period
25.00

Memo Item CONTRIBUTION

C. KRENNING, RICHARD, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 13750 CR 4930

City ROLLA	State MO	Zip Code 65401-
---------------	-------------	--------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) BOND CLINIC	Occupation (for Individual) BOND CLINIC
--	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		31		2016

Transaction ID : SA11A.458042

Amount of Each Receipt this Period
25.00

Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	100.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2035 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. KRENNING, RICHARD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 13750 CR 4930
 City ROLLA State MO Zip Code 65401-
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) BOND CLINIC Occupation (for Individual) BOND CLINIC
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 04 / 2016
Transaction ID : SA11A.472498
 Amount of Each Receipt this Period
 50.00
 Memo Item
 CONTRIBUTION

B. KRENNING, RICHARD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 13750 CR 4930
 City ROLLA State MO Zip Code 65401-
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) BOND CLINIC Occupation (for Individual) BOND CLINIC
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 04 / 2016
Transaction ID : SA11A.479597
 Amount of Each Receipt this Period
 25.00
 Memo Item
 CONTRIBUTION

C. KRENNING, RICHARD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 13750 CR 4930
 City ROLLA State MO Zip Code 65401-
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) BOND CLINIC Occupation (for Individual) BOND CLINIC
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 04 / 2016
Transaction ID : SA11A.479600
 Amount of Each Receipt this Period
 25.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	100.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2036 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. KRENNING, RICHARD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 13750 CR 4930
 City ROLLA State MO Zip Code 65401-
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) BOND CLINIC Occupation (for Individual) BOND CLINIC
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 11 / 07 / 2016
Transaction ID : SA11A.480030
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

B. KRICK, EDWIN, H., DR., MD
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO BOX 2113
 City REDLANDS State CA Zip Code 92373-0681
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 525.00

Date of Receipt 11 / 01 / 2016
Transaction ID : SA11A.462274
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

C. KRICK, EDWIN, H., DR., MD
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO BOX 2113
 City REDLANDS State CA Zip Code 92373-0681
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 525.00

Date of Receipt 11 / 01 / 2016
Transaction ID : SA11A.462277
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	100.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2037 OF 4311
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. KRIEDER, SUE, M., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3402 PARK PLACE
 City BETHLEHEM State PA Zip Code 18017-2467
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) BOSCH REXROTH CORP Occupation (for Individual) DIRECTOR
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 10 / 21 / 2016
Transaction ID : SA11A.443520
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

B. KRINGEL, ANGELINE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 932 SOUTH PINE CREEK TD
 City FAIRFIELD State CT Zip Code 06824-6348
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 302.00

Date of Receipt 11 / 07 / 2016
Transaction ID : SA11A.476036
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

C. KRISHNAN, SUREKHA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 10112 PARKWOOD TER
 City BETHESDA State MD Zip Code 20814-4036
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) MEDIMMUNE, LLC Occupation (for Individual) SCIENTIST
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 275.00

Date of Receipt 10 / 21 / 2016
Transaction ID : SA11A.444516
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 325.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2038 OF 4311
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. KRISHNAN, SUREKHA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 10112 PARKWOOD TER
 City BETHESDA State MD Zip Code 20814-4036
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) MEDIMMUNE, LLC Occupation (for Individual) SCIENTIST
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 275.00

Date of Receipt 11 / 04 / 2016
Transaction ID : SA11A.472326
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

B. KRISKEY, RICHARD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 11 RIVER RD 101
 City COS COB State CT Zip Code 06807-2754
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 350.00

Date of Receipt 10 / 24 / 2016
Transaction ID : SA11A.445931
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

C. KRISKEY, RICHARD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 11 RIVER RD 101
 City COS COB State CT Zip Code 06807-2754
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 350.00

Date of Receipt 10 / 31 / 2016
Transaction ID : SA11A.458032
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 75.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2039 OF 4311
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. KRISKEY, RICHARD, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 11 RIVER RD
101

City COS COB State CT Zip Code 06807-2754

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
350.00

Date of Receipt
10 / 31 / 2016
Transaction ID : SA11A.458035

Amount of Each Receipt this Period
25.00

Memo Item CONTRIBUTION

B. KRISKEY, RICHARD, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 11 RIVER RD
101

City COS COB State CT Zip Code 06807-2754

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
350.00

Date of Receipt
10 / 30 / 2016
Transaction ID : SA11A.460288

Amount of Each Receipt this Period
50.00

Memo Item CONTRIBUTION

C. KRISKEY, RICHARD, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 11 RIVER RD
101

City COS COB State CT Zip Code 06807-2754

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
350.00

Date of Receipt
11 / 04 / 2016
Transaction ID : SA11A.472647

Amount of Each Receipt this Period
50.00

Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶ 125.00

TOTAL This Period (last page this line number only).....▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2040 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. KRISKEY, RICHARD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 11 RIVER RD
 101
 City COS COB State CT Zip Code 06807-2754
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 350.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 04 / 2016
Transaction ID : SA11A.474327
 Amount of Each Receipt this Period
 25.00
 Memo Item
 CONTRIBUTION

B. KROEKER, MARGARET, A., MS.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 200 W CEDAR ST
 City HESSTON State KS Zip Code 67062-8100
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 325.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 04 / 2016
Transaction ID : SA11A.467510
 Amount of Each Receipt this Period
 35.00
 Memo Item
 CONTRIBUTION

C. KROEKER, MARGARET, A., MS.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 200 W CEDAR ST
 City HESSTON State KS Zip Code 67062-8100
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 325.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 10 / 2016
Transaction ID : SA11A.468238
 Amount of Each Receipt this Period
 20.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	80.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2041 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
Team Ryan

A. KROL, JOHN, A., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4851 BONITA BAY BLVD PH101
 PH101
 City BONITA SPRINGS State FL Zip Code 34134-3618
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1450.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 23 / 2016
Transaction ID : SA11A.446521
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION

B. KROL, JOHN, A., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4851 BONITA BAY BLVD PH101
 PH101
 City BONITA SPRINGS State FL Zip Code 34134-3618
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1450.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 30 / 2016
Transaction ID : SA11A.459933
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION

C. KROL, JOHN, A., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4851 BONITA BAY BLVD PH101
 PH101
 City BONITA SPRINGS State FL Zip Code 34134-3618
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1450.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 30 / 2016
Transaction ID : SA11A.459935
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	300.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2042 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. KROL, JOHN, A., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4851 BONITA BAY BLVD PH101
 PH101
 City BONITA SPRINGS State FL Zip Code 34134-3618
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1450.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 04 / 2016
Transaction ID : SA11A.474274
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION

B. KROME, DAVID, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO BOX 1489
 City RANCHO SANTA FE State CA Zip Code 92067-1489
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) TRANSCHEM, INC. Occupation (for Individual) CEO
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 04 / 2016
Transaction ID : SA11A.472252
 Amount of Each Receipt this Period
 50.00
 Memo Item
 CONTRIBUTION

C. KROME, DAVID, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO BOX 1489
 City RANCHO SANTA FE State CA Zip Code 92067-1489
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) TRANSCHEM, INC. Occupation (for Individual) CEO
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 04 / 2016
Transaction ID : SA11A.473361
 Amount of Each Receipt this Period
 250.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	400.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2043 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. KROMMENHOEK, WILLIAM, C., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1435 VUE DU BAY COURT
 City SAN DIEGO State CA Zip Code 92109-1931
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 285.00

Date of Receipt **11 / 03 / 2016**
Transaction ID : SA11A.465334
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

B. KRON, KIM, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 21115 BEGONIA CREEK CT
 City CYPRESS State TX Zip Code 77433-4619
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 280.00

Date of Receipt **10 / 23 / 2016**
Transaction ID : SA11A.446466
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

C. KRON, KIM, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 21115 BEGONIA CREEK CT
 City CYPRESS State TX Zip Code 77433-4619
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 280.00

Date of Receipt **11 / 02 / 2016**
Transaction ID : SA11A.469435
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	125.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2044 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
Team Ryan

A. KRON, KIM, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 21115 BEGONIA CREEK CT
 City CYPRESS State TX Zip Code 77433-4619
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 280.00

Date of Receipt 11 / 08 / 2016
Transaction ID : SA11A.479728
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

B. KRONER, JEANNE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address W278 N2999 ROCKY PT RD
 City PEWAUKEE State WI Zip Code 53072-4338
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 10 / 25 / 2016
Transaction ID : SA11A.448412
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

C. KRONER, JEANNE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address W278 N2999 ROCKY PT RD
 City PEWAUKEE State WI Zip Code 53072-4338
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 10 / 26 / 2016
Transaction ID : SA11A.449709
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	175.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2045 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
Team Ryan

A. KRONER, JEANNE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address W278 N2999 ROCKY PT RD
 City PEWAUKEE State WI Zip Code 53072-4338
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 10 / 26 / 2016
Transaction ID : SA11A.449710
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

B. KRONER, JEANNE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address W278 N2999 ROCKY PT RD
 City PEWAUKEE State WI Zip Code 53072-4338
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 11 / 07 / 2016
Transaction ID : SA11A.480564
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

C. KRONER, JEANNE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address W278 N2999 ROCKY PT RD
 City PEWAUKEE State WI Zip Code 53072-4338
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 11 / 07 / 2016
Transaction ID : SA11A.480567
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	150.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2046 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
Team Ryan

A. KROPP, TIM, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2733 MASTERS DRIVE
 City LEAGUE CITY State TX Zip Code 77573-4404
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) MRI TECHNOLOGIES Occupation (for Individual) VICE PRESIDENT
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 450.00

Date of Receipt 11 / 04 / 2016
Transaction ID : SA11A.473741
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

B. KRUEGER, JOHN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 565 BONITA AVE
 City SAN MARINO State CA Zip Code 91108-1304
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 310.00

Date of Receipt 10 / 25 / 2016
Transaction ID : SA11A.452154
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

C. KRUEGER, JOHN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 565 BONITA AVE
 City SAN MARINO State CA Zip Code 91108-1304
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 310.00

Date of Receipt 11 / 07 / 2016
Transaction ID : SA11A.474940
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	200.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2047 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
Team Ryan

A. KRUG, KATHLEEN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1201 EDGECLIFF PLACE, APT 1083
 City CINCINNATI State OH Zip Code 45206-2853
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 11 / 07 / 2016
Transaction ID : SA11A.467840
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

B. KRUGER, EVELYN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1611 MINUTEMEN CSWY UNIT 208
 City COCOA BEACH State FL Zip Code 32931-2041
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 405.00

Date of Receipt 10 / 29 / 2016
Transaction ID : SA11A.460910
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

C. KRUGER, EVELYN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1611 MINUTEMEN CSWY UNIT 208
 City COCOA BEACH State FL Zip Code 32931-2041
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 405.00

Date of Receipt 11 / 04 / 2016
Transaction ID : SA11A.473085
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	350.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2048 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. KUBINSKI, LARRY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 43 FOREST GATE CIRCLE
 City OAK BROOK State IL Zip Code 60523-2129
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) INFORMATION REQUESTED PER BEST EFFORTS Occupation (for Individual) INFORMATION REQUESTED PER BE
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 400.00

Date of Receipt 11 / 01 / 2016
Transaction ID : SA11A.461725
 Amount of Each Receipt this Period 200.00
 Memo Item CONTRIBUTION

B. KUBLIN, JOHN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 419 CEDAR
 City MARQUETTE State MI Zip Code 49855-3812
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) PHYSICIAN
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 290.00

Date of Receipt 10 / 25 / 2016
Transaction ID : SA11A.448298
 Amount of Each Receipt this Period 30.00
 Memo Item CONTRIBUTION

C. KUBLIN, JOHN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 419 CEDAR
 City MARQUETTE State MI Zip Code 49855-3812
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) PHYSICIAN
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 290.00

Date of Receipt 10 / 26 / 2016
Transaction ID : SA11A.449869
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	255.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2049 OF 4311
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. KUBLIN, JOHN, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 419 CEDAR

City MARQUETTE	State MI	Zip Code 49855-3812
-------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) SELF EMPLOYED	Occupation (for Individual) PHYSICIAN
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
290.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		27		2016

Transaction ID : SA11A.453609

Amount of Each Receipt this Period
25.00

Memo Item
CONTRIBUTION

B. KUBLIN, JOHN, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 419 CEDAR

City MARQUETTE	State MI	Zip Code 49855-3812
-------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) SELF EMPLOYED	Occupation (for Individual) PHYSICIAN
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
290.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		31		2016

Transaction ID : SA11A.464653

Amount of Each Receipt this Period
30.00

Memo Item
CONTRIBUTION

C. KUDLA, MITCHELL, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 8044 ARBOR VLG

City BOERNE	State TX	Zip Code 78015-4997
----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
400.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		24		2016

Transaction ID : SA11A.449447

Amount of Each Receipt this Period
100.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	155.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2050 OF 4311
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. KUDLA, MITCHELL, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 8044 ARBOR VLG

City BOERNE	State TX	Zip Code 78015-4997
----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
400.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		30		2016

Transaction ID : SA11A.460271

Amount of Each Receipt this Period
100.00

Memo Item CONTRIBUTION

B. KUDLA, MITCHELL, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 8044 ARBOR VLG

City BOERNE	State TX	Zip Code 78015-4997
----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
400.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11		04		2016

Transaction ID : SA11A.471471

Amount of Each Receipt this Period
100.00

Memo Item CONTRIBUTION

C. KUEBLER, JOHN, F., ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 15814 E MAJESTIC STREET

City WICHITA	State KS	Zip Code 67230-6607
-----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) FLINT HILLS RESOURCES	Occupation (for Individual) ATTORNEY
--	---

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
300.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		25		2016

Transaction ID : SA11A.447255

Amount of Each Receipt this Period
200.00

Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	400.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2051 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. KUESTER, DENNIS, J., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 10 SEAGATE DR. UNIT 35
 City NAPLES State FL Zip Code 34103-2419
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 2500.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 03 / 2016
Transaction ID : SA11A.465180
 Amount of Each Receipt this Period
 2500.00
 Memo Item
 CONTRIBUTION

B. KUGLER, MITCH, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 10701 FOURNIER DRIVE
 City FAIRFAX STATION State VA Zip Code 22039-6803
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RAYTHEON Occupation (for Individual) AEROSPACE EXECUTIVE
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 26 / 2016
Transaction ID : SA11A.451234
 Amount of Each Receipt this Period
 1000.00
 Memo Item
 CONTRIBUTION

C. KULJU, KENNETH, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 280 PARK AVE S # 25E
 City NEW YORK State NY Zip Code 10010-6135
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) LIVINGSTON Occupation (for Individual) BANKER
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 25 / 2016
Transaction ID : SA11A.448956
 Amount of Each Receipt this Period
 50.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	3550.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2052 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
Team Ryan

A. KULJU, KENNETH, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 280 PARK AVE S # 25E
 City NEW YORK State NY Zip Code 10010-6135
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) LIVINGSTON Occupation (for Individual) BANKER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 10 / 25 / 2016
Transaction ID : SA11A.448963
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

B. KUNZE, RICHARD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 38008 GARRETTS LAKE ROAD
 City SHAWNEE State OK Zip Code 74804-9474
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) FARMER/RANCHER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 225.00

Date of Receipt 10 / 24 / 2016
Transaction ID : SA11A.445696
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

C. KUNZE, RICHARD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 38008 GARRETTS LAKE ROAD
 City SHAWNEE State OK Zip Code 74804-9474
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) FARMER/RANCHER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 225.00

Date of Receipt 11 / 06 / 2016
Transaction ID : SA11A.478078
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	125.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2053 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
Team Ryan

A. KUNZE, RICHARD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 38008 GARRETT'S LAKE ROAD
 City SHAWNEE State OK Zip Code 74804-9474
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) FARMER/RANCHER
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 225.00

Date of Receipt **11 / 06 / 2016**
Transaction ID : SA11A.478080
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

B. KURLAN, NORMAN, J., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 14 COOPER ROAD
 City SCARSDALE State NY Zip Code 10583-2802
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF Occupation (for Individual) SALES EXEC
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 430.00

Date of Receipt **10 / 26 / 2016**
Transaction ID : SA11A.447669
 Amount of Each Receipt this Period 10.00
 Memo Item CONTRIBUTION

C. KURLAN, NORMAN, J., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 14 COOPER ROAD
 City SCARSDALE State NY Zip Code 10583-2802
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF Occupation (for Individual) SALES EXEC
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 430.00

Date of Receipt **11 / 07 / 2016**
Transaction ID : SA11A.467887
 Amount of Each Receipt this Period 200.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	235.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2054 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
Team Ryan

A. KURTTI, CHARLES, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 964 EVERGREEN LANE
 City NEENAH State WI Zip Code 54956-4968
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 350.00

Date of Receipt 10 / 26 / 2016
Transaction ID : SA11A.450481
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

B. KURTTI, CHARLES, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 964 EVERGREEN LANE
 City NEENAH State WI Zip Code 54956-4968
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 350.00

Date of Receipt 10 / 26 / 2016
Transaction ID : SA11A.450488
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

C. KUSHNER, MICHAEL, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1110 SALEM STREET NW
 City WILSON State NC Zip Code 27893-2137
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) INFORMATION REQUESTED PER BEST EFFORTS Occupation (for Individual) INFORMATION REQUESTED PER BEST EFFORTS
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 235.00

Date of Receipt 11 / 04 / 2016
Transaction ID : SA11A.467654
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	200.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2055 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. KUSUMONEGORO, SUKARNO, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 25269 GOLD HILLS DR
 City CASTRO VALLEY State CA Zip Code 94552-5460
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) UCSF Occupation (for Individual) APPLICATION PROGRAMMER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 955.00

Date of Receipt 10 / 24 / 2016
Transaction ID : SA11A.449291
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

B. KUSUMONEGORO, SUKARNO, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 25269 GOLD HILLS DR
 City CASTRO VALLEY State CA Zip Code 94552-5460
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) UCSF Occupation (for Individual) APPLICATION PROGRAMMER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 955.00

Date of Receipt 10 / 31 / 2016
Transaction ID : SA11A.459201
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

C. KUSUMONEGORO, SUKARNO, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 25269 GOLD HILLS DR
 City CASTRO VALLEY State CA Zip Code 94552-5460
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) UCSF Occupation (for Individual) APPLICATION PROGRAMMER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 955.00

Date of Receipt 11 / 04 / 2016
Transaction ID : SA11A.471870
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	125.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2056 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. KUZLOSKI, ROBERT, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO BOX 512
 City MOUNT SINAI State NY Zip Code 11766-0512
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) VALIDUS Occupation (for Individual) ATTORNEY
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 25 / 2016
Transaction ID : SA11A.448598
 Amount of Each Receipt this Period
 250.00
 Memo Item
CONTRIBUTION

B. KUZMANIC, JOSEPH, J., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 17 PRINCETON DR
 City RANCHO MIRAGE State CA Zip Code 92270-3158
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) BUSINESS
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1500.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 31 / 2016
Transaction ID : SA11A.459002
 Amount of Each Receipt this Period
 200.00
 Memo Item
CONTRIBUTION

C. KYLE, FRANK, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 6728 SAINT ANDREWS ROAD
 City FORT WORTH State TX Zip Code 76132-4585
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) TEXLAND PETROLEUM Occupation (for Individual) CFO
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 2250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 24 / 2016
Transaction ID : SA11A.446162
 Amount of Each Receipt this Period
 1000.00
 Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	1450.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2057 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
Team Ryan

A. KYLE, FRANK, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 6728 SAINT ANDREWS ROAD
 City FORT WORTH State TX Zip Code 76132-4585
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) TEXLAND PETROLEUM Occupation (for Individual) CFO
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 2250.00

Date of Receipt 11 / 02 / 2016
Transaction ID : SA11A.466117
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

B. LABACH, PARKER, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 10002 W 121ST ST
 City OVERLAND PARK State KS Zip Code 66213-1638
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 205.00

Date of Receipt 10 / 27 / 2016
Transaction ID : SA11A.456956
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

C. LABACH, PARKER, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 10002 W 121ST ST
 City OVERLAND PARK State KS Zip Code 66213-1638
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 205.00

Date of Receipt 11 / 03 / 2016
Transaction ID : SA11A.468839
 Amount of Each Receipt this Period 30.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	330.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2058 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. LABACH, PARKER, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 10002 W 121ST ST
 City OVERLAND PARK State KS Zip Code 66213-1638
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 205.00

Date of Receipt
 11 / 03 / 2016
Transaction ID : SA11A.468842
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

B. LABACH, PARKER, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 10002 W 121ST ST
 City OVERLAND PARK State KS Zip Code 66213-1638
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 205.00

Date of Receipt
 11 / 08 / 2016
Transaction ID : SA11A.479838
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

C. LABACH, PARKER, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 10002 W 121ST ST
 City OVERLAND PARK State KS Zip Code 66213-1638
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 205.00

Date of Receipt
 11 / 08 / 2016
Transaction ID : SA11A.479841
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 125.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2059 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. LABARGE, LAURA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1480 RUTHERFORD DRIVE
 City PASADENA State CA Zip Code 91103-2774
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) MARGE CARSON, INC Occupation (for Individual) OWNER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 10 / 31 / 2016
Transaction ID : SA11A.457721
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

B. LABELLE, GUY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5721 EAST MOUNTAINVEW RD
 City PARADISE VALLEY State AZ Zip Code 85253-
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 350.00

Date of Receipt 10 / 25 / 2016
Transaction ID : SA11A.448348
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

C. LABELLE, GUY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5721 EAST MOUNTAINVEW RD
 City PARADISE VALLEY State AZ Zip Code 85253-
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 350.00

Date of Receipt 11 / 01 / 2016
Transaction ID : SA11A.467397
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	450.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2060 OF 4311
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. LABRIOLA, FRANCIS, J., MR.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 12013 S HONAH LEE COURT

City PHOENIX	State AZ	Zip Code 85044-3452
-----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
10000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		21		2016

Transaction ID : SA11A.443655

Amount of Each Receipt this Period
5000.00

Memo Item
CONTRIBUTION

B. LACHEMANN, MARCEL, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1805 NORTHWOOD ROAD

City NIPOMO	State CA	Zip Code 93444-6612
----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) LOS ANGELES ANGELS OF ANAHEIM	Occupation (for Individual) SPEC ASST TO GM
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		27		2016

Transaction ID : SA11A.456559

Amount of Each Receipt this Period
25.00

Memo Item
CONTRIBUTION

C. LACHEMANN, MARCEL, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1805 NORTHWOOD ROAD

City NIPOMO	State CA	Zip Code 93444-6612
----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) LOS ANGELES ANGELS OF ANAHEIM	Occupation (for Individual) SPEC ASST TO GM
--	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		27		2016

Transaction ID : SA11A.456568

Amount of Each Receipt this Period
25.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	5050.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2061 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. LACLAIRES, PAULA, W., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 6400 N SWEDE RD
 City NORTHPORT State MI Zip Code 49670-9595
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1100.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 27 / 2016
Transaction ID : SA11A.454200
 Amount of Each Receipt this Period
 100.00
 Memo Item CONTRIBUTION

B. LACLAIRES, PAULA, W., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 6400 N SWEDE RD
 City NORTHPORT State MI Zip Code 49670-9595
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1100.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 27 / 2016
Transaction ID : SA11A.454201
 Amount of Each Receipt this Period
 100.00
 Memo Item CONTRIBUTION

C. LACLAIRES, PAULA, W., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 6400 N SWEDE RD
 City NORTHPORT State MI Zip Code 49670-9595
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1100.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 31 / 2016
Transaction ID : SA11A.458761
 Amount of Each Receipt this Period
 100.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	300.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2062 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. LACLARE, PAULA, W., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 6400 N SWEDE RD
 City NORTHPORT State MI Zip Code 49670-9595
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1100.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 04 / 2016
Transaction ID : SA11A.473573
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION

B. LACLARE, PAULA, W., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 6400 N SWEDE RD
 City NORTHPORT State MI Zip Code 49670-9595
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1100.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 07 / 2016
Transaction ID : SA11A.475030
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION

C. LADD, DEBBIE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1411 160TH ST
 City BOONE State IA Zip Code 50036-7334
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) UNITY POINT Occupation (for Individual) NURSE PRACTITIONER
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 22 / 2016
Transaction ID : SA11A.446723
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	300.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2063 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
-----------------------------	-----------------------------	-----------------------------

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
Team Ryan

A. LADD, DEBBIE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1411 160TH ST
 City BOONE State IA Zip Code 50036-7334
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) UNITY POINT Occupation (for Individual) NURSE PRACTITIONER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 04 / 2016
Transaction ID : SA11A.471328
 Amount of Each Receipt this Period
 100.00
 Memo Item CONTRIBUTION

B. LAGALY, THOMAS, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 829 TERRACE PARK 308
 City ROCK HILL State SC Zip Code 29730-4222
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 21 / 2016
Transaction ID : SA11A.444493
 Amount of Each Receipt this Period
 50.00
 Memo Item CONTRIBUTION

C. LAGALY, THOMAS, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 829 TERRACE PARK 308
 City ROCK HILL State SC Zip Code 29730-4222
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 04 / 2016
Transaction ID : SA11A.472883
 Amount of Each Receipt this Period
 50.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	200.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2064 OF 4311
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
Team Ryan

A. LAIB, GREGORY, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address **775 OAKWOOD DRIVE**
RD 3

City **KINGSTON** State **NY** Zip Code **12401-7818**

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) **NONE** Occupation (for Individual) **RETIRED**

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **850.00**

Date of Receipt **10 / 20 / 2016**
Transaction ID : SA11A.444686

Amount of Each Receipt this Period **50.00**

Memo Item CONTRIBUTION

B. LAIB, GREGORY, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address **775 OAKWOOD DRIVE**
RD 3

City **KINGSTON** State **NY** Zip Code **12401-7818**

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) **NONE** Occupation (for Individual) **RETIRED**

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **850.00**

Date of Receipt **10 / 25 / 2016**
Transaction ID : SA11A.448915

Amount of Each Receipt this Period **50.00**

Memo Item CONTRIBUTION

C. LAIB, GREGORY, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address **775 OAKWOOD DRIVE**
RD 3

City **KINGSTON** State **NY** Zip Code **12401-7818**

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) **NONE** Occupation (for Individual) **RETIRED**

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼ **850.00**

Date of Receipt **10 / 31 / 2016**
Transaction ID : SA11A.464810

Amount of Each Receipt this Period **25.00**

Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶ **125.00**

TOTAL This Period (last page this line number only).....▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2065 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. LAIB, GREGORY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 775 OAKWOOD DRIVE
 RD 3
 City KINGSTON State NY Zip Code 12401-7818
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 850.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 31 / 2016
Transaction ID : SA11A.464813
 Amount of Each Receipt this Period
 25.00
 Memo Item
 CONTRIBUTION

B. LAIB, GREGORY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 775 OAKWOOD DRIVE
 RD 3
 City KINGSTON State NY Zip Code 12401-7818
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 850.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 04 / 2016
Transaction ID : SA11A.474174
 Amount of Each Receipt this Period
 50.00
 Memo Item
 CONTRIBUTION

C. LAIB, GREGORY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 775 OAKWOOD DRIVE
 RD 3
 City KINGSTON State NY Zip Code 12401-7818
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 850.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 06 / 2016
Transaction ID : SA11A.478262
 Amount of Each Receipt this Period
 25.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	100.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2066 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. LAIB, GREGORY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 775 OAKWOOD DRIVE
 RD 3
 City KINGSTON State NY Zip Code 12401-7818
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 850.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 07 / 2016
Transaction ID : SA11A.480071
 Amount of Each Receipt this Period
 25.00
 Memo Item
 CONTRIBUTION

B. LAKEY, AMY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 61702 WILLIAMSBURG DR.
 UNIT #1
 City SOUTH LYON State MI Zip Code 48178-1760
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 679.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 25 / 2016
Transaction ID : SA11A.448858
 Amount of Each Receipt this Period
 25.00
 Memo Item
 CONTRIBUTION

C. LAKEY, AMY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 61702 WILLIAMSBURG DR.
 UNIT #1
 City SOUTH LYON State MI Zip Code 48178-1760
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 679.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 07 / 2016
Transaction ID : SA11A.474621
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	150.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2067 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
Team Ryan

A. LAKIN, DAVID, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2011 CREST DR
 City ENCINITAS State CA Zip Code 92024-5219
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 315.00

Date of Receipt
 11 / 02 / 2016
Transaction ID : SA11A.466606
 Amount of Each Receipt this Period
 100.00
 Memo Item CONTRIBUTION

B. LAKIN, DAVID, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2011 CREST DR
 City ENCINITAS State CA Zip Code 92024-5219
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 315.00

Date of Receipt
 11 / 04 / 2016
Transaction ID : SA11A.471899
 Amount of Each Receipt this Period
 20.00
 Memo Item CONTRIBUTION

C. LAKIN, DAVID, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2011 CREST DR
 City ENCINITAS State CA Zip Code 92024-5219
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 315.00

Date of Receipt
 11 / 06 / 2016
Transaction ID : SA11A.477291
 Amount of Each Receipt this Period
 25.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	145.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2068 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. LAKIN, DAVID, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 2011 CREST DR

City ENCINITAS	State CA	Zip Code 92024-5219
-------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
315.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	05	/	2016

Transaction ID : SA11A.478733

Amount of Each Receipt this Period
25.00

Memo Item CONTRIBUTION

B. LAKIN, DAVID, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 2011 CREST DR

City ENCINITAS	State CA	Zip Code 92024-5219
-------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
315.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	07	/	2016

Transaction ID : SA11A.480587

Amount of Each Receipt this Period
25.00

Memo Item CONTRIBUTION

C. LAMASTRO, ANTHONY, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 110 EXECUTIVE DRIVE

City NEW HYDE PARK	State NY	Zip Code 11040-1016
-----------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) INFORMATION REQUESTED PER BEST EFFORTS	Occupation (for Individual) INFORMATION REQUESTED PER BES
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	25	/	2016

Transaction ID : SA11A.447564

Amount of Each Receipt this Period
500.00

Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	550.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2069 OF 4311
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. LAMB, LOIS, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1587 SOUTH SHORE DRIVE
 City HOLLAND State MI Zip Code 49423-4436
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 700.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 26 / 2016
Transaction ID : SA11A.450731
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION

B. LAMBERT JR, SANDERS, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1525 WEST 31
 City KANSAS CITY State MO Zip Code 64108-3601
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) PMD Occupation (for Individual) EXECUTIVE
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 26 / 2016
Transaction ID : SA11A.450168
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION

C. LAMBERT JR, SANDERS, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1525 WEST 31
 City KANSAS CITY State MO Zip Code 64108-3601
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) PMD Occupation (for Individual) EXECUTIVE
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 26 / 2016
Transaction ID : SA11A.450185
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	300.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2070 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. LAMBERT JR, SANDERS, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1525 WEST 31
 City KANSAS CITY State MO Zip Code 64108-3601
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) PMD Occupation (for Individual) EXECUTIVE
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt 10 / 26 / 2016
Transaction ID : SA11A.450189
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

B. LAMBERT, STEPHEN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3138 SHAWNEE DR
 City SUGAR LAND State TX Zip Code 77479-1648
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1850.00

Date of Receipt 11 / 02 / 2016
Transaction ID : SA11A.469498
 Amount of Each Receipt this Period 400.00
 Memo Item CONTRIBUTION

C. LAMBERT, STEPHEN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3138 SHAWNEE DR
 City SUGAR LAND State TX Zip Code 77479-1648
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1850.00

Date of Receipt 11 / 02 / 2016
Transaction ID : SA11A.469499
 Amount of Each Receipt this Period 400.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 900.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2071 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. LAMBERT, STEPHEN, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 3138 SHAWNEE DR

City SUGAR LAND	State TX	Zip Code 77479-1648
--------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1850.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
11		04		2016

Transaction ID : SA11A.471445

Amount of Each Receipt this Period
50.00

Memo Item
CONTRIBUTION

B. LAMBERT, STEPHEN, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 3138 SHAWNEE DR

City SUGAR LAND	State TX	Zip Code 77479-1648
--------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1850.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
11		07		2016

Transaction ID : SA11A.475489

Amount of Each Receipt this Period
200.00

Memo Item
CONTRIBUTION

C. LAMBERT, STEPHEN, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 3138 SHAWNEE DR

City SUGAR LAND	State TX	Zip Code 77479-1648
--------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
1850.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
11		07		2016

Transaction ID : SA11A.475490

Amount of Each Receipt this Period
200.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	450.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2072 OF 4311
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
Team Ryan

A. LAMDIN, DAVID, A., MR.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1515 N KIRKWOOD RD

City ARLINGTON	State VA	Zip Code 22201-5233
-------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
400.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		28		2016

Transaction ID : SA11A.456246

Amount of Each Receipt this Period
50.00

Memo Item CONTRIBUTION

B. LAMPROS, JOHN, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 13542 NW COUNTRYVIEW WAY

City PORTLAND	State OR	Zip Code 97229-4468
------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
350.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11		02		2016

Transaction ID : SA11A.469909

Amount of Each Receipt this Period
100.00

Memo Item CONTRIBUTION

C. LAMPROS, JOHN, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 13542 NW COUNTRYVIEW WAY

City PORTLAND	State OR	Zip Code 97229-4468
------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
350.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11		07		2016

Transaction ID : SA11A.476695

Amount of Each Receipt this Period
250.00

Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	400.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2073 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. LAMPSON, MARY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2030 WESTERN AVE #711
 City SEATTLE State WA Zip Code 98121-2124
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 11 / 06 / 2016
Transaction ID : SA11A.476761
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

B. LAMPSON, MARY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2030 WESTERN AVE #711
 City SEATTLE State WA Zip Code 98121-2124
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 11 / 06 / 2016
Transaction ID : SA11A.476765
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

C. LAMPSON, MARY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2030 WESTERN AVE #711
 City SEATTLE State WA Zip Code 98121-2124
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 11 / 06 / 2016
Transaction ID : SA11A.476766
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	300.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2074 OF 4311
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. LAMSON, STEPHEN, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 432 MATTHEW CT.
City PLEASANTON State CA Zip Code 94566-7787
FEC ID number of contributing federal political committee. **C**
Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 250.00

Date of Receipt 10 / 26 / 2016
Transaction ID : SA11A.450370
Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

B. LAMUNYON, BLAKE, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 10043 KEENAN STREET
City HIGHLANDS RANCH State CO Zip Code 80130-8012
FEC ID number of contributing federal political committee. **C**
Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) PASTOR
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 250.00

Date of Receipt 10 / 25 / 2016
Transaction ID : SA11A.451880
Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

C. LANCASTER, THOMAS, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 605 SAN ELIJO ST.
City SAN DIEGO State CA Zip Code 92106-3413
FEC ID number of contributing federal political committee. **C**
Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 400.00

Date of Receipt 10 / 30 / 2016
Transaction ID : SA11A.459511
Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	600.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2075 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
Team Ryan

A. LANCE, LISA, L., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2603 DOMINECO LANE
 City KATY State TX Zip Code 77450-5373
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) HOMEMAKER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 25000.00

Date of Receipt 10 / 24 / 2016
Transaction ID : SA11A.443502
 Amount of Each Receipt this Period 25000.00
 Memo Item CONTRIBUTION

B. LANDGRAF, ALANE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 60 E. SCOTT 304
 City CHICAGO State IL Zip Code 60610-2345
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RADI LLC Occupation (for Individual) IT BUS. ANALYST
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1200.00

Date of Receipt 10 / 27 / 2016
Transaction ID : SA11A.456949
 Amount of Each Receipt this Period 200.00
 Memo Item CONTRIBUTION

C. LANDGRAF, ALANE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 60 E. SCOTT 304
 City CHICAGO State IL Zip Code 60610-2345
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RADI LLC Occupation (for Individual) IT BUS. ANALYST
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1200.00

Date of Receipt 10 / 31 / 2016
Transaction ID : SA11A.463994
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	25300.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2076 OF 4311
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. LANDGRAF, ALANE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 60 E. SCOTT 304
 City CHICAGO State IL Zip Code 60610-2345
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RADI LLC Occupation (for Individual) IT BUS. ANALYST
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1200.00

Date of Receipt 10 / 31 / 2016
Transaction ID : SA11A.464073
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

B. LANE, J, L., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 217 BALL DRIVE S
 City KERRVILLE State TX Zip Code 78028-7026
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) INFORMATION REQUESTED PER BEST EFFORTS Occupation (for Individual) INFORMATION REQUESTED PER BE
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 10 / 25 / 2016
Transaction ID : SA11A.447582
 Amount of Each Receipt this Period 500.00
 Memo Item CONTRIBUTION

C. LANE, JAN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2204 TREETOP CIRCLE
 City STATESBORO State GA Zip Code 30461-4422
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 10 / 28 / 2016
Transaction ID : SA11A.454715
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶ 800.00
TOTAL This Period (last page this line number only).....▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2077 OF 4311
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Team Ryan

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name A. LANE, RICKY, , ,		Date of Receipt MM / DD / YYYY 10 / 28 / 2016
Mailing Address 3414 HANCOCK BRIDGE PARKWAY 504		Transaction ID : SA11A.456334
City NORTH FORT MYERS	State FL	Zip Code 33903-7070
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 25.00
Name of Employer (for Individual) BUILD LLV	Occupation (for Individual) CONSTRUCTION SUPERINTENDENT	<input type="checkbox"/> Memo Item CONTRIBUTION
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name B. LANE, RICKY, , ,		Date of Receipt MM / DD / YYYY 10 / 28 / 2016
Mailing Address 3414 HANCOCK BRIDGE PARKWAY 504		Transaction ID : SA11A.456337
City NORTH FORT MYERS	State FL	Zip Code 33903-7070
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 25.00
Name of Employer (for Individual) BUILD LLV	Occupation (for Individual) CONSTRUCTION SUPERINTENDENT	<input type="checkbox"/> Memo Item CONTRIBUTION
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name C. LANE, SEAN, P., ,		Date of Receipt MM / DD / YYYY 11 / 01 / 2016
Mailing Address 6 MEAD POINT DRIVE		Transaction ID : SA11A.462187
City GREENWICH	State CT	Zip Code 06830-7225
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 50.00
Name of Employer (for Individual) KINSALE ADVISORS	Occupation (for Individual) EXECUTIVE	<input type="checkbox"/> Memo Item CONTRIBUTION
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Aggregate Year-to-Date ▼ 418.00	

SUBTOTAL of Receipts This Page (optional).....	100.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2078 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. LANE, SEAN, P., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 6 MEAD POINT DRIVE
 City GREENWICH State CT Zip Code 06830-7225
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) KINSALE ADVISORS Occupation (for Individual) EXECUTIVE
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 418.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 11 / 04 / 2016
Transaction ID : SA11A.470311
 Amount of Each Receipt this Period
 50.00
 Memo Item
 CONTRIBUTION

B. LANG, ALBERT, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1370 TIDAL CREEK COVE
 City CHARLESTON State SC Zip Code 29412-8245
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NAVY Occupation (for Individual) LOGISTICS
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 10 / 20 / 2016
Transaction ID : SA11A.444783
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION

C. LANG, ALBERT, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1370 TIDAL CREEK COVE
 City CHARLESTON State SC Zip Code 29412-8245
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NAVY Occupation (for Individual) LOGISTICS
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 10 / 20 / 2016
Transaction ID : SA11A.444784
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	250.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2079 OF 4311
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. LANG, EVAN, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address **W641 STATE HWY 29**

City EDGAR	State WI	Zip Code 54426-9165
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) E.L.M. REPAIR	Occupation (for Individual) PRESIDENT/OWNER
---	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
500.00

Date of Receipt
10 / 31 / 2016

Transaction ID : SA11A.459000

Amount of Each Receipt this Period
500.00

Memo Item
CONTRIBUTION

B. LANG, MAHLON, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address **335 WEST WAY**

City MONUMENT	State CO	Zip Code 80132-8704
-------------------------	--------------------	-------------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) INTERNATIONAL SCHOOL OF ISLAMABAD	Occupation (for Individual) TEACHER
---	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
300.00

Date of Receipt
11 / 06 / 2016

Transaction ID : SA11A.478295

Amount of Each Receipt this Period
50.00

Memo Item
CONTRIBUTION

C. LANG, MAHLON, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address **335 WEST WAY**

City MONUMENT	State CO	Zip Code 80132-8704
-------------------------	--------------------	-------------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) INTERNATIONAL SCHOOL OF ISLAMABAD	Occupation (for Individual) TEACHER
---	---

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
300.00

Date of Receipt
11 / 06 / 2016

Transaction ID : SA11A.478296

Amount of Each Receipt this Period
50.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	600.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2080 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. LANG, MAHLON, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 335 WEST WAY
 City MONUMENT State CO Zip Code 80132-8704
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) INTERNATIONAL SCHOOL OF ISLAMABAD Occupation (for Individual) TEACHER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 11 / 06 / 2016
Transaction ID : SA11A.478297
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

B. LANG, SANDRA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 190 BOOTLEGGERS LANE
 City KERRVILLE State TX Zip Code 78028-7597
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1200.00

Date of Receipt 10 / 28 / 2016
Transaction ID : SA11A.456083
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

C. LANG, SANDRA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 190 BOOTLEGGERS LANE
 City KERRVILLE State TX Zip Code 78028-7597
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1200.00

Date of Receipt 10 / 29 / 2016
Transaction ID : SA11A.461006
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	250.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 2081 OF 4311
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. LANG, SANDRA, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 190 BOOTLEGGERS LANE

City KERRVILLE	State TX	Zip Code 78028-7597
-------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1200.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	04	/	2016

Transaction ID : SA11A.471720

Amount of Each Receipt this Period
100.00

Memo Item CONTRIBUTION

B. LANG, SANDRA, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 190 BOOTLEGGERS LANE

City KERRVILLE	State TX	Zip Code 78028-7597
-------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1200.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	04	/	2016

Transaction ID : SA11A.473171

Amount of Each Receipt this Period
100.00

Memo Item CONTRIBUTION

C. LANGE, FRED, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 3777 E MILLCREEK CANYON ROAD

City SALT LAKE CITY	State UT	Zip Code 84109-3826
------------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) INFORMATION REQUESTED PER BEST EFFORTS	Occupation (for Individual) INFORMATION REQUESTED PER BEST EFFORTS
---	---

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
225.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	31	/	2016

Transaction ID : SA11A.459196

Amount of Each Receipt this Period
50.00

Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	250.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2082 OF 4311
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. LANGE, FRED, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 3777 E MILLCREEK CANYON ROAD

City SALT LAKE CITY	State UT	Zip Code 84109-3826
------------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) INFORMATION REQUESTED PER BEST EFFORTS	Occupation (for Individual) INFORMATION REQUESTED PER BE
---	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
225.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	04	/	2016

Transaction ID : SA11A.473706

Amount of Each Receipt this Period
50.00

Memo Item
CONTRIBUTION

B. LANGENDORF, PATRICIA, M., ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 2101 S GARFIELD AVE
319

City LOVELAND	State CO	Zip Code 80537-7377
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
700.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	23	/	2016

Transaction ID : SA11A.446551

Amount of Each Receipt this Period
50.00

Memo Item
CONTRIBUTION

C. LANGENDORF, PATRICIA, M., ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 2101 S GARFIELD AVE
319

City LOVELAND	State CO	Zip Code 80537-7377
------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
700.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	04	/	2016

Transaction ID : SA11A.471233

Amount of Each Receipt this Period
50.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	150.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2083 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. LANGELIUS, ROBERT, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 32 CLINTON STREET
 City WHITE PLAINS State NY Zip Code 10603-3604
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 575.00

Date of Receipt 10 / 24 / 2016
Transaction ID : SA11A.445905
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

B. LANGELIUS, ROBERT, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 32 CLINTON STREET
 City WHITE PLAINS State NY Zip Code 10603-3604
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 575.00

Date of Receipt 11 / 02 / 2016
Transaction ID : SA11A.466072
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

C. LANGELIUS, ROBERT, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 32 CLINTON STREET
 City WHITE PLAINS State NY Zip Code 10603-3604
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 575.00

Date of Receipt 11 / 02 / 2016
Transaction ID : SA11A.466084
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	200.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2084 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. LANGELIUS, ROBERT, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 32 CLINTON STREET
 City WHITE PLAINS State NY Zip Code 10603-3604
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 575.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 04 / 2016
Transaction ID : SA11A.471214
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION

B. LANIER, AMY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1415 DIXIE TRL
 City RALEIGH State NC Zip Code 27607-6732
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) AMY LANIER Occupation (for Individual) RETAIL
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 24 / 2016
Transaction ID : SA11A.445718
 Amount of Each Receipt this Period
 250.00
 Memo Item
 CONTRIBUTION

C. LANIER, AMY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1415 DIXIE TRL
 City RALEIGH State NC Zip Code 27607-6732
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) AMY LANIER Occupation (for Individual) RETAIL
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 05 / 2016
Transaction ID : SA11A.478663
 Amount of Each Receipt this Period
 50.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	400.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2085 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. LANOUE, LEONARD, F., MR.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 150. GESSNER
6B

City HOUSTON State TX Zip Code 77024-6137

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
300.00

Date of Receipt
11 / 01 / 2016
Transaction ID : SA11A.462655

Amount of Each Receipt this Period
100.00

Memo Item CONTRIBUTION

B. LANOUE, LEONARD, F., MR.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 150. GESSNER
6B

City HOUSTON State TX Zip Code 77024-6137

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
300.00

Date of Receipt
11 / 04 / 2016
Transaction ID : SA11A.472823

Amount of Each Receipt this Period
100.00

Memo Item CONTRIBUTION

C. LANTZY, RONALD, P., MR.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1569 HADDON DR

City BIRMINGHAM State AL Zip Code 35226-6298

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
325.00

Date of Receipt
10 / 27 / 2016
Transaction ID : SA11A.454064

Amount of Each Receipt this Period
25.00

Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 225.00

TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2086 OF 4311
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. LANTZY, RONALD, P., MR.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 1569 HADDON DR
City BIRMINGHAM State AL Zip Code 35226-6298
FEC ID number of contributing federal political committee. **C**
Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 325.00

Date of Receipt 10 / 27 / 2016
Transaction ID : SA11A.454065
Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

B. LANZA, FRANK, L., MR.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 111 9TH AVENUE APT 202
City SAN MATEO State CA Zip Code 94401-4238
FEC ID number of contributing federal political committee. **C**
Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) GRAPHIC DESIGN
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 425.00

Date of Receipt 11 / 04 / 2016
Transaction ID : SA11A.467448
Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

C. LAPATTA, SHIRLIE, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address P. O. BOX 5332
City NORTH BRANCH State NJ Zip Code 08876-1303
FEC ID number of contributing federal political committee. **C**
Name of Employer (for Individual) BHHSNJ PROP. Occupation (for Individual) REALTOR
Receipt For: Primary General Other (specify)
Aggregate Year-to-Date ▼ 242.00

Date of Receipt 11 / 01 / 2016
Transaction ID : SA11A.462841
Amount of Each Receipt this Period 32.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... 157.00
TOTAL This Period (last page this line number only).....

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2087 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. LAPATTA, SHIRLIE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address P. O. BOX 5332
 City NORTH BRANCH State NJ Zip Code 08876-1303
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) BHHSNJ PROP. Occupation (for Individual) REALTOR
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 242.00

Date of Receipt 11 / 07 / 2016
Transaction ID : SA11A.476534
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

B. LAPATTA, SHIRLIE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address P. O. BOX 5332
 City NORTH BRANCH State NJ Zip Code 08876-1303
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) BHHSNJ PROP. Occupation (for Individual) REALTOR
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 242.00

Date of Receipt 11 / 04 / 2016
Transaction ID : SA11A.479550
 Amount of Each Receipt this Period 32.00
 Memo Item CONTRIBUTION

C. LAPES, GEORGE, A., , M.D.
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 950 SUMMIT CIRCLE SOUTH
 City YORK State PA Zip Code 17403-4479
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 11 / 03 / 2016
Transaction ID : SA11A.468769
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	107.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2088 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
Team Ryan

A. LAPLANTE, JOHN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5 SEA ROSE LANE
 City SCARBOROUGH State ME Zip Code 04074-8811
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 275.00

Date of Receipt **10 / 21 / 2016**
Transaction ID : SA11A.444098
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

B. LAPLANTE, JOHN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5 SEA ROSE LANE
 City SCARBOROUGH State ME Zip Code 04074-8811
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 275.00

Date of Receipt **11 / 01 / 2016**
Transaction ID : SA11A.467196
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

C. LAPLANTE, JOHN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5 SEA ROSE LANE
 City SCARBOROUGH State ME Zip Code 04074-8811
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 275.00

Date of Receipt **11 / 03 / 2016**
Transaction ID : SA11A.468775
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	75.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2089 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. LAPLANTE, JOHN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5 SEA ROSE LANE
 City SCARBOROUGH State ME Zip Code 04074-8811
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 275.00

Date of Receipt 11 / 07 / 2016
Transaction ID : SA11A.480298
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

B. LAPPIN, ANDY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 630 LINCOLN AVE
 City GLENCOE State IL Zip Code 60022-1421
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 11 / 02 / 2016
Transaction ID : SA11A.465793
 Amount of Each Receipt this Period 500.00
 Memo Item CONTRIBUTION

C. LARSEN, HUGH, W., MRS.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 730 BELLEVUE
 City MILFORD State MI Zip Code 48381-2209
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) MICHIGAN SCIENTIFIC CORPORATION Occupation (for Individual) ENGINEER
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 350.00

Date of Receipt 10 / 25 / 2016
Transaction ID : SA11A.448560
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	625.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2090 OF 4311
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. LARSEN, HUGH, W., MRS.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 730 BELLEVUE

City MILFORD	State MI	Zip Code 48381-2209
-----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) MICHIGAN SCIENTIFIC CORPORATION	Occupation (for Individual) ENGINEER
--	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
350.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		30		2016

Transaction ID : SA11A.459818

Amount of Each Receipt this Period
250.00

Memo Item CONTRIBUTION

B. LARSON, JANET, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 1458 W MATTIE RD.

City CLEARVILLE	State PA	Zip Code 15535-7546
--------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
550.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11		07		2016

Transaction ID : SA11A.476308

Amount of Each Receipt this Period
50.00

Memo Item CONTRIBUTION

C. LARSON, JANET, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 1458 W MATTIE RD.

City CLEARVILLE	State PA	Zip Code 15535-7546
--------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
550.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11		07		2016

Transaction ID : SA11A.476327

Amount of Each Receipt this Period
25.00

Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	325.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2091 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. LARSON, JANET, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1458 W MATTIE RD.
 City CLEARVILLE State PA Zip Code 15535-7546
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 550.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 04 / 2016
Transaction ID : SA11A.479411
 Amount of Each Receipt this Period
 50.00
 Memo Item
 CONTRIBUTION

B. LARSON, MADELEINE, , MS.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address P. O. BOX 8207
 City ASPEN State CO Zip Code 81612-8207
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 450.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 25 / 2016
Transaction ID : SA11A.448864
 Amount of Each Receipt this Period
 50.00
 Memo Item
 CONTRIBUTION

C. LARSON, MADELEINE, , MS.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address P. O. BOX 8207
 City ASPEN State CO Zip Code 81612-8207
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 450.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 04 / 2016
Transaction ID : SA11A.472976
 Amount of Each Receipt this Period
 50.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	150.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2092 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. LARSON, MADELEINE, , MS.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address P. O. BOX 8207

City ASPEN	State CO	Zip Code 81612-8207
---------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
450.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 04 / 2016
Transaction ID : SA11A.473189

Amount of Each Receipt this Period
25.00

Memo Item CONTRIBUTION

B. LARSON, WILFRED, JOSEPH, MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 200 BAHIA POINT

City NAPLES	State FL	Zip Code 34103-3511
----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
750.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 27 / 2016
Transaction ID : SA11A.452284

Amount of Each Receipt this Period
300.00

Memo Item CONTRIBUTION

C. LASERSOHN, THOMAS, D., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 304 NORTH AVENUE

City WESTPORT	State CT	Zip Code 06880-1328
------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
3000.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 28 / 2016
Transaction ID : SA11A.454735

Amount of Each Receipt this Period
3000.00

Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	3325.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2093 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. LASICH, POLLY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3800 DUPONT CIRCLE #306
 City VIRGINIA BEACH State VA Zip Code 23455-2983
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1350.00

Date of Receipt 11 / 04 / 2016
Transaction ID : SA11A.474217
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

B. LASSETTER, TERRELL, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 20426 N 100TH PL
 City SCOTTSDALE State AZ Zip Code 85255-3360
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 11 / 01 / 2016
Transaction ID : SA11A.462438
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

C. LASSETTER, TERRELL, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 20426 N 100TH PL
 City SCOTTSDALE State AZ Zip Code 85255-3360
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 11 / 07 / 2016
Transaction ID : SA11A.475379
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	325.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2094 OF 4311
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. LASSETTER, TERRELL, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 20426 N 100TH PL
 City SCOTTSDALE State AZ Zip Code 85255-3360
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt **11 / 07 / 2016**
Transaction ID : SA11A.475382
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

B. LATHAM, DELLA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1201 WEST DONNA DR
 City MERCED State CA Zip Code 95348-1857
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 380.00

Date of Receipt **10 / 27 / 2016**
Transaction ID : SA11A.453003
 Amount of Each Receipt this Period 30.00
 Memo Item CONTRIBUTION

C. LATHAM, DELLA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1201 WEST DONNA DR
 City MERCED State CA Zip Code 95348-1857
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 380.00

Date of Receipt **10 / 31 / 2016**
Transaction ID : SA11A.464698
 Amount of Each Receipt this Period 75.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶ 130.00
TOTAL This Period (last page this line number only).....▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2095 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
LATHAM, DELLA, , ,

Mailing Address **1201 WEST DONNA DR**

City MERCED	State CA	Zip Code 95348-1857
-----------------------	--------------------	-------------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
--	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **380.00**

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		31		2016

Transaction ID : SA11A.464701

Amount of Each Receipt this Period

75.00

Memo Item
CONTRIBUTION

B. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
LATHAM, DELLA, , ,

Mailing Address **1201 WEST DONNA DR**

City MERCED	State CA	Zip Code 95348-1857
-----------------------	--------------------	-------------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
--	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **380.00**

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11		06		2016

Transaction ID : SA11A.477047

Amount of Each Receipt this Period

50.00

Memo Item
CONTRIBUTION

C. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
LATHAM, DELLA, , ,

Mailing Address **1201 WEST DONNA DR**

City MERCED	State CA	Zip Code 95348-1857
-----------------------	--------------------	-------------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
--	---

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼ **380.00**

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11		06		2016

Transaction ID : SA11A.477054

Amount of Each Receipt this Period

50.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	175.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2096 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. LATHAM, REX, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4711 RIPPLING POND DRIVE

City FAIRFAX	State VA	Zip Code 22033-5078
-----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
300.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 25 / 2016
Transaction ID : SA11A.448453

Amount of Each Receipt this Period
50.00

Memo Item CONTRIBUTION

B. LATIMER, CHARLES, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 38W668 EVANSWOOD LANE

City SAINT CHARLES	State IL	Zip Code 60175-6043
-----------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 04 / 2016
Transaction ID : SA11A.473946

Amount of Each Receipt this Period
250.00

Memo Item CONTRIBUTION

C. LAU, ELIZABETH, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 11201 SECRETARIAT DRIVE

City WALTON	State NE	Zip Code 68461-9750
----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) ASSOCIATED ANESTHESIOLOGISTS PC	Occupation (for Individual) ANESTHESIOLOGISTS
--	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
700.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 01 / 2016
Transaction ID : SA11A.467381

Amount of Each Receipt this Period
100.00

Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	400.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2097 OF 4311
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. LAUGHLIN, CELA, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 269 N EAST TORCH LAKE DRIVE

City CENTRAL LAKE	State MI	Zip Code 49622-9706
----------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) INFORMATION REQUESTED PER BEST EFFORTS	Occupation (for Individual) INFORMATION REQUESTED PER BE
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Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		26		2016

Transaction ID : SA11A.447661

Amount of Each Receipt this Period
500.00

Memo Item
CONTRIBUTION

B. LAUGHLIN, HAROLD, J., MR.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1088 CHRISTI CIRCLE

City BEAVERCREEK	State OH	Zip Code 45434-6374
---------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
350.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		27		2016

Transaction ID : SA11A.453781

Amount of Each Receipt this Period
50.00

Memo Item
CONTRIBUTION

C. LAUGHLIN, HAROLD, J., MR.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1088 CHRISTI CIRCLE

City BEAVERCREEK	State OH	Zip Code 45434-6374
---------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
350.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		27		2016

Transaction ID : SA11A.453786

Amount of Each Receipt this Period
50.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	600.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2098 OF 4311
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. LAUGHLIN, HAROLD, J., MR.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1088 CHRISTI CIRCLE

City BEAVERCREEK	State OH	Zip Code 45434-6374
---------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
350.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		31		2016

Transaction ID : SA11A.458428

Amount of Each Receipt this Period
100.00

Memo Item CONTRIBUTION

B. LAUGHLIN, HAROLD, J., MR.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1088 CHRISTI CIRCLE

City BEAVERCREEK	State OH	Zip Code 45434-6374
---------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
350.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11		03		2016

Transaction ID : SA11A.468959

Amount of Each Receipt this Period
50.00

Memo Item CONTRIBUTION

C. LAUINGER, FRANK, T., ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 3510 TURTLE CREEK BOULEVARD, #6-C
APT 6C

City DALLAS	State TX	Zip Code 75219-5543
----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) SELF EMPLOYED	Occupation (for Individual) INVESTMENTS
--	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
2000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		21		2016

Transaction ID : SA11A.443527

Amount of Each Receipt this Period
1000.00

Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	1150.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2099 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. LAURANCE, GEORGE, E., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 12500 MARION LANE W
 4119
 City MINNETONKA State MN Zip Code 55305-1377
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 235.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 04 / 2016
Transaction ID : SA11A.473651
 Amount of Each Receipt this Period
 25.00
 Memo Item CONTRIBUTION

B. LAURENT, FRANK, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 903 BLUE JAY DRIVE
 City MURPHY State TX Zip Code 75094-3830
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 350.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 07 / 2016
Transaction ID : SA11A.475937
 Amount of Each Receipt this Period
 50.00
 Memo Item CONTRIBUTION

C. LAURENT, FRANK, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 903 BLUE JAY DRIVE
 City MURPHY State TX Zip Code 75094-3830
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 350.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 06 / 2016
Transaction ID : SA11A.478069
 Amount of Each Receipt this Period
 50.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	125.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2100 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. LAURENT, FRANK, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 903 BLUE JAY DRIVE
 City MURPHY State TX Zip Code 75094-3830
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 350.00

Date of Receipt 11 / 06 / 2016
Transaction ID : SA11A.478071
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

B. LAURENO, LAURENCE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 8 SADDLE DRIVE
 City EAST GRANBY State CT Zip Code 06026-9562
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 425.00

Date of Receipt 11 / 03 / 2016
Transaction ID : SA11A.468766
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

C. LAUTERSZTAIN, JULIO, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 30 LADOGA AVE
 City TAMPA State FL Zip Code 33606-3804
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) FLORIDA CANCER SPECIALISTS Occupation (for Individual) PHYSICIAN
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 1500.00

Date of Receipt 10 / 25 / 2016
Transaction ID : SA11A.451791
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	350.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2101 OF 4311
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. LAUTERSZTAIN, JULIO, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 30 LADOGA AVE
 City TAMPA State FL Zip Code 33606-3804
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) FLORIDA CANCER SPECIALISTS Occupation (for Individual) PHYSICIAN
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1500.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 04 / 2016
Transaction ID : SA11A.470795
 Amount of Each Receipt this Period
 250.00
 Memo Item
 CONTRIBUTION

B. LAUTENBACH, NED, C., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1801 GALLEON DR
 City NAPLES State FL Zip Code 34102-7761
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) FIDELITY INVESTMENTS, EATON CORP Occupation (for Individual) BOARD OF DIRECTORS
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 7700.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 24 / 2016
Transaction ID : SA11A.443444
 Amount of Each Receipt this Period
 2700.00
 Memo Item
 CONTRIBUTION

C. LAVENDER, RON, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address AV LOS DEPORTES 13
 City ACAPULCO State IA Zip Code 50325-
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 385.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 27 / 2016
Transaction ID : SA11A.453763
 Amount of Each Receipt this Period
 25.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 2975.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2102 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. LAVENDER, RON, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address AV LOS DEPORTES 13

City ACAPULCO	State IA	Zip Code 50325-
------------------	-------------	--------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
385.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	01	/	2016

Transaction ID : SA11A.462622

Amount of Each Receipt this Period
30.00

Memo Item
CONTRIBUTION

B. LAVENDER, RON, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address AV LOS DEPORTES 13

City ACAPULCO	State IA	Zip Code 50325-
------------------	-------------	--------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
385.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	31	/	2016

Transaction ID : SA11A.464742

Amount of Each Receipt this Period
30.00

Memo Item
CONTRIBUTION

C. LAVENDER, RON, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address AV LOS DEPORTES 13

City ACAPULCO	State IA	Zip Code 50325-
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
385.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	04	/	2016

Transaction ID : SA11A.473421

Amount of Each Receipt this Period
25.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	85.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2103 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. LAVOIE, RICHARD, , MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1541 LUCY ST.
 City REDLANDS State CA Zip Code 92374-2672
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 209.00

Date of Receipt 10 / 25 / 2016
Transaction ID : SA11A.449111
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

B. LAVOIE, RICHARD, , MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1541 LUCY ST.
 City REDLANDS State CA Zip Code 92374-2672
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 209.00

Date of Receipt 10 / 25 / 2016
Transaction ID : SA11A.449112
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

C. LAWLER, JAMES, D., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3 ROCKLEDGE ROAD
 City LAGUNA BEACH State CA Zip Code 92651-3944
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 750.00

Date of Receipt 10 / 26 / 2016
Transaction ID : SA11A.447691
 Amount of Each Receipt this Period 450.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 550.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2104 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
Team Ryan

A. LAWLOR, JOHN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 172 ADAMS STREET
 City MILTON State MA Zip Code 02186-3427
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) INFORMATION REQUESTED PER BEST EFFORTS Occupation (for Individual) INFORMATION REQUESTED PER BE
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 300.00

Date of Receipt 10 / 25 / 2016
Transaction ID : SA11A.447463
 Amount of Each Receipt this Period 200.00
 Memo Item CONTRIBUTION

B. LAWRENCE, DAVID, M., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2227 E VISTA ROYALE DRIVE
 City ORANGE State CA Zip Code 92867-1730
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 440.00

Date of Receipt 10 / 20 / 2016
Transaction ID : SA11A.444820
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

C. LAWRENCE, DAVID, M., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2227 E VISTA ROYALE DRIVE
 City ORANGE State CA Zip Code 92867-1730
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 440.00

Date of Receipt 11 / 01 / 2016
Transaction ID : SA11A.462405
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 350.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2105 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. LAWSON-JOHNSTON, PETER, O., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 134 S BEACH ROAD
 City HOBE SOUND State FL Zip Code 33455-2435
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) GUGGENHEIM PARTNERS Occupation (for Individual) MANAGING PARTNER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 11 / 08 / 2016
Transaction ID : SA11A.468097
 Amount of Each Receipt this Period 500.00
 Memo Item CONTRIBUTION

B. LAWSON, RODNEY, K., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 14965 ANNILO WAY
 City RANCHO MURIETA State CA Zip Code 95683-9420
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt 10 / 31 / 2016
Transaction ID : SA11A.457275
 Amount of Each Receipt this Period 1000.00
 Memo Item CONTRIBUTION

C. LAWSON, RONALD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 121 FREEDOM DRIVE
 City MONTPELIER State VT Zip Code 05602-3356
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 260.00

Date of Receipt 11 / 02 / 2016
Transaction ID : SA11A.467078
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	1600.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2106 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. LAYNE, HAROLD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO BOX 216

City CAROLINA BEACH	State NC	Zip Code 28428-0216
------------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
320.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 26 / 2016

Transaction ID : SA11A.450288

Amount of Each Receipt this Period
30.00

Memo Item
CONTRIBUTION

B. LAYNE, HAROLD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO BOX 216

City CAROLINA BEACH	State NC	Zip Code 28428-0216
------------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
320.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 27 / 2016

Transaction ID : SA11A.453121

Amount of Each Receipt this Period
30.00

Memo Item
CONTRIBUTION

C. LAYNE, HAROLD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO BOX 216

City CAROLINA BEACH	State NC	Zip Code 28428-0216
------------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
320.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 31 / 2016

Transaction ID : SA11A.458365

Amount of Each Receipt this Period
25.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	85.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2107 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. LAYNE, SYLVIA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 262 HADDON PL
 City ADDISON State IL Zip Code 60101-2145
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 28 / 2016
Transaction ID : SA11A.455805
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION

B. LAYNE, SYLVIA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 262 HADDON PL
 City ADDISON State IL Zip Code 60101-2145
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 28 / 2016
Transaction ID : SA11A.455826
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION

C. LAYNE, THOMAS, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address P.O. BOX 746
 City RIPLEY State WV Zip Code 25271-0746
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) CAROLINA OAKS Occupation (for Individual) DENTIST
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 460.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 29 / 2016
Transaction ID : SA11A.460471
 Amount of Each Receipt this Period
 230.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	430.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2108 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. LAYNE, THOMAS, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address P.O. BOX 746
 City RIPLEY State WV Zip Code 25271-0746
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) CAROLINA OAKS Occupation (for Individual) DENTIST
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 460.00

Date of Receipt 11 / 04 / 2016
Transaction ID : SA11A.471207
 Amount of Each Receipt this Period 230.00
 Memo Item CONTRIBUTION

B. LAZARUS, ARTHUR, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 48 TILLOU RD WEST
 City SOUTH ORANGE State NJ Zip Code 07079-1357
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 450.00

Date of Receipt 11 / 06 / 2016
Transaction ID : SA11A.478159
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

C. LE BOEUF, EUGENE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 12455 OAKWOOD SHORES
 City WAYLAND State MI Zip Code 49348-9056
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 330.00

Date of Receipt 10 / 25 / 2016
Transaction ID : SA11A.452016
 Amount of Each Receipt this Period 30.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	510.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2109 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. LE BOEUF, EUGENE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 12455 OAKWOOD SHORES
 City WAYLAND State MI Zip Code 49348-9056
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 330.00

Date of Receipt 10 / 28 / 2016
Transaction ID : SA11A.456106
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

B. LE BOEUF, EUGENE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 12455 OAKWOOD SHORES
 City WAYLAND State MI Zip Code 49348-9056
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 330.00

Date of Receipt 10 / 28 / 2016
Transaction ID : SA11A.456247
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

C. LE BOEUF, EUGENE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 12455 OAKWOOD SHORES
 City WAYLAND State MI Zip Code 49348-9056
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 330.00

Date of Receipt 11 / 04 / 2016
Transaction ID : SA11A.470774
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 75.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2110 OF 4311
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. LE BOEUF, EUGENE, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 12455 OAKWOOD SHORES

City WAYLAND	State MI	Zip Code 49348-9056
-----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
330.00

Date of Receipt
11 / 06 / 2016
Transaction ID : SA11A.478298

Amount of Each Receipt this Period
25.00

Memo Item
CONTRIBUTION

B. LEAFSTEDT, DOUGLAS, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 5430 E EL PARQUE

City LONG BEACH	State CA	Zip Code 90815-4125
--------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
3248.00

Date of Receipt
11 / 03 / 2016
Transaction ID : SA11A.469265

Amount of Each Receipt this Period
1000.00

Memo Item
CONTRIBUTION

C. LEAHEY, WILLIAM, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 150 COLUMBUS AVENUE, APARTMENT 25D
25D

City NEW YORK	State NY	Zip Code 10023-5971
------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
300.00

Date of Receipt
10 / 22 / 2016
Transaction ID : SA11A.446810

Amount of Each Receipt this Period
100.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	1125.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 2111 OF 4311
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. LEAHEY, WILLIAM, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 150 COLUMBUS AVENUE, APARTMENT 25D

City NEW YORK State NY Zip Code 10023-5971

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt 10 / 22 / 2016
Transaction ID : SA11A.446811

Amount of Each Receipt this Period 100.00

Memo Item CONTRIBUTION

B. LEAVITT, DEBBIE, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 25982 SAND CANYON RD

City SANTA CLARITA State CA Zip Code 91387-5004

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) VARIOUS Occupation (for Individual) STUNT PERFORMER

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 400.00

Date of Receipt 10 / 25 / 2016
Transaction ID : SA11A.451439

Amount of Each Receipt this Period 200.00

Memo Item CONTRIBUTION

C. LEAVITT, DEBBIE, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 25982 SAND CANYON RD

City SANTA CLARITA State CA Zip Code 91387-5004

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) VARIOUS Occupation (for Individual) STUNT PERFORMER

Receipt For: Primary General Other (specify)

Aggregate Year-to-Date ▼ 400.00

Date of Receipt 10 / 29 / 2016
Transaction ID : SA11A.460672

Amount of Each Receipt this Period 200.00

Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 500.00

TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2112 OF 4311
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. LECLERC, RENE, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 157 HEALEY RD.
City CANDIA State NH Zip Code 03034-2709
FEC ID number of contributing federal political committee. **C**
Name of Employer (for Individual) RENE C LECLERC INSURANCE AGENCY INC. Occupation (for Individual) AGENT
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 450.00

Date of Receipt 10 / 28 / 2016
Transaction ID : SA11A.456086
Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

B. LECLERC, RENE, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 157 HEALEY RD.
City CANDIA State NH Zip Code 03034-2709
FEC ID number of contributing federal political committee. **C**
Name of Employer (for Individual) RENE C LECLERC INSURANCE AGENCY INC. Occupation (for Individual) AGENT
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 450.00

Date of Receipt 11 / 04 / 2016
Transaction ID : SA11A.472080
Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

C. LEDERER, HOWARD, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 3713 JARDIN
City HOUSTON State TX Zip Code 77005-3648
FEC ID number of contributing federal political committee. **C**
Name of Employer (for Individual) ATEC Occupation (for Individual) MANAGER
Receipt For: Primary General Other (specify)
Aggregate Year-to-Date ▼ 250.00

Date of Receipt 10 / 26 / 2016
Transaction ID : SA11A.454643
Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 450.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2113 OF 4311
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. LEDIEU, SUSAN, D., MRS.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 806 WHISPERING BROOKE DRIVE

City NEWTOWN SQUARE	State PA	Zip Code 19073-2751
------------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
235.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		25		2016

Transaction ID : SA11A.447351

Amount of Each Receipt this Period
100.00

Memo Item CONTRIBUTION

B. LEDONNE, ROBERT, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 40 WOODLAND DRIVE

City WOODCLIFF LAKE	State NJ	Zip Code 07677-7843
------------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		27		2016

Transaction ID : SA11A.453518

Amount of Each Receipt this Period
50.00

Memo Item CONTRIBUTION

C. LEDONNE, ROBERT, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 40 WOODLAND DRIVE

City WOODCLIFF LAKE	State NJ	Zip Code 07677-7843
------------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		27		2016

Transaction ID : SA11A.453519

Amount of Each Receipt this Period
50.00

Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	200.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2114 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. LEDWELL, STEVE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3300 WACO ST
 City TEXARKANA State TX Zip Code 75501-6645
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) LEDWELL Occupation (for Individual) EXECUTIVE
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 10000.00

Date of Receipt 10 / 24 / 2016
Transaction ID : SA11A.443500
 Amount of Each Receipt this Period 10000.00
 Memo Item CONTRIBUTION

B. LEE, BETTY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 214 VIA LIDO NOTD
 City NEWPORT BEACH State CA Zip Code 92663-4608
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 10 / 27 / 2016
Transaction ID : SA11A.456497
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

C. LEE, CAROLYN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2167 W 5600 SO
 City ROY State UT Zip Code 84067-2113
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 531.00

Date of Receipt 10 / 24 / 2016
Transaction ID : SA11A.445611
 Amount of Each Receipt this Period 23.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	10123.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2115 OF 4311
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. LEE, CAROLYN, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 2167 W 5600 SO

City ROY	State UT	Zip Code 84067-2113
-------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
531.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		25		2016

Transaction ID : SA11A.448444

Amount of Each Receipt this Period
25.00

Memo Item
CONTRIBUTION

B. LEE, CAROLYN, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 2167 W 5600 SO

City ROY	State UT	Zip Code 84067-2113
-------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
531.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		24		2016

Transaction ID : SA11A.449443

Amount of Each Receipt this Period
23.00

Memo Item
CONTRIBUTION

C. LEE, CAROLYN, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 2167 W 5600 SO

City ROY	State UT	Zip Code 84067-2113
-------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
531.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11		01		2016

Transaction ID : SA11A.462804

Amount of Each Receipt this Period
10.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	58.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2116 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. LEE, CAROLYN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2167 W 5600 SO
 City ROY State UT Zip Code 84067-2113
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 531.00

Date of Receipt
 11 / 02 / 2016
Transaction ID : SA11A.465906
 Amount of Each Receipt this Period 20.00
 Memo Item CONTRIBUTION

B. LEE, CAROLYN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2167 W 5600 SO
 City ROY State UT Zip Code 84067-2113
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 531.00

Date of Receipt
 11 / 02 / 2016
Transaction ID : SA11A.466216
 Amount of Each Receipt this Period 20.00
 Memo Item CONTRIBUTION

C. LEE, CAROLYN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2167 W 5600 SO
 City ROY State UT Zip Code 84067-2113
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 531.00

Date of Receipt
 11 / 05 / 2016
Transaction ID : SA11A.478760
 Amount of Each Receipt this Period 20.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	60.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2117 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
Team Ryan

A. LEE, CAROLYN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2167 W 5600 SO
 City ROY State UT Zip Code 84067-2113
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 531.00

Date of Receipt
 11 / 05 / 2016
Transaction ID : SA11A.479165
 Amount of Each Receipt this Period
 20.00
 Memo Item
 CONTRIBUTION

B. LEE, CAROLYN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2167 W 5600 SO
 City ROY State UT Zip Code 84067-2113
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 531.00

Date of Receipt
 11 / 04 / 2016
Transaction ID : SA11A.479499
 Amount of Each Receipt this Period
 20.00
 Memo Item
 CONTRIBUTION

C. LEE, CAROLYN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2167 W 5600 SO
 City ROY State UT Zip Code 84067-2113
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 531.00

Date of Receipt
 11 / 07 / 2016
Transaction ID : SA11A.480113
 Amount of Each Receipt this Period
 20.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	60.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2118 OF 4311
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. LEE, CAROLYN, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 2167 W 5600 SO

City ROY	State UT	Zip Code 84067-2113
-------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
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Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
531.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	07	/	2016

Transaction ID : SA11A.480657

Amount of Each Receipt this Period
20.00

Memo Item
CONTRIBUTION

B. LEE, DORIS, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1 HUGHES CENTER DRIVE, UNIT 804

City LAS VEGAS	State NV	Zip Code 89169-6715
-------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) INFORMATION REQUESTED PER BEST EFFORTS	Occupation (for Individual) INFORMATION REQUESTED PER BE
---	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	03	/	2016

Transaction ID : SA11A.465606

Amount of Each Receipt this Period
1500.00

Memo Item
CONTRIBUTION

C. LEE, ELEANOR, D., MS.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1930 W. RIVER BEND CT.

City MEQUON	State WI	Zip Code 53092-2925
----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
1600.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	26	/	2016

Transaction ID : SA11A.450844

Amount of Each Receipt this Period
150.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	1670.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2119 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. LEE, ELEANOR, D., MS.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1930 W. RIVER BEND CT.
 City MEQUON State WI Zip Code 53092-2925
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1600.00

Date of Receipt 11 / 06 / 2016
Transaction ID : SA11A.477475
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

B. LEE, JAMES, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 230 RIVEREDGE COVE
 City CORDOVA State TN Zip Code 38018-7735
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 11 / 02 / 2016
Transaction ID : SA11A.466311
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

C. LEE, PAUL, G., DR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1038 MEREDITH DR
 City FLORENCE State SC Zip Code 29505-3221
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) MEDNAX Occupation (for Individual) PHYSICIAN
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 350.00

Date of Receipt 10 / 30 / 2016
Transaction ID : SA11A.459344
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	600.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2120 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. LEE, TSAIFENG, , MS.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 722 E 2620 N
 City PROVO State UT Zip Code 84604-4056
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1135.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 27 / 2016
Transaction ID : SA11A.452428
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION

B. LEE, TSAIFENG, , MS.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 722 E 2620 N
 City PROVO State UT Zip Code 84604-4056
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1135.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 28 / 2016
Transaction ID : SA11A.454800
 Amount of Each Receipt this Period
 200.00
 Memo Item
 CONTRIBUTION

C. LEE, TSAIFENG, , MS.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 722 E 2620 N
 City PROVO State UT Zip Code 84604-4056
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1135.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 01 / 2016
Transaction ID : SA11A.461769
 Amount of Each Receipt this Period
 500.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	800.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2121 OF 4311
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. LEE, WILLIAM, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 128 MAPLE STREET

City DANVERS	State MA	Zip Code 01923-2061
-----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) HOTWATT INC	Occupation (for Individual) PRESIDENT
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
300.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		25		2016

Transaction ID : SA11A.447290

Amount of Each Receipt this Period
200.00

Memo Item CONTRIBUTION

B. LEE, WILLIAM, G., MR.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 3665 OVERBROOK LANE

City HOUSTON	State TX	Zip Code 77027-4127
-----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) VINSON & ELKINS L.L.P.	Occupation (for Individual) ATTORNEY
---	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		27		2016

Transaction ID : SA11A.456587

Amount of Each Receipt this Period
100.00

Memo Item CONTRIBUTION

C. LEE, WILLIAM, G., MR.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 3665 OVERBROOK LANE

City HOUSTON	State TX	Zip Code 77027-4127
-----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) VINSON & ELKINS L.L.P.	Occupation (for Individual) ATTORNEY
---	---

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
1250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11		07		2016

Transaction ID : SA11A.480198

Amount of Each Receipt this Period
250.00

Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	550.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2122 OF 4311
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. LEEPER, SAM, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 36567 S OCOTILLO CANYON DRIVE

City TUCSON	State AZ	Zip Code 85739-2287
----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) INFORMATION REQUESTED PER BEST EFFORTS	Occupation (for Individual) INFORMATION REQUESTED PER BE
---	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
2000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	02	/	2016

Transaction ID : SA11A.465089

Amount of Each Receipt this Period
1000.00

Memo Item CONTRIBUTION

B. LEGLER, MITCHELL, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1431 RIVERPLACE BLVD. #910
910

City JACKSONVILLE	State FL	Zip Code 32207-9103
----------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) KIRSCHNER & LEGLER	Occupation (for Individual) ATTORNEY
---	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
800.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	28	/	2016

Transaction ID : SA11A.456144

Amount of Each Receipt this Period
100.00

Memo Item CONTRIBUTION

C. LEGLER, MITCHELL, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1431 RIVERPLACE BLVD. #910
910

City JACKSONVILLE	State FL	Zip Code 32207-9103
----------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) KIRSCHNER & LEGLER	Occupation (for Individual) ATTORNEY
---	---

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
800.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	04	/	2016

Transaction ID : SA11A.471330

Amount of Each Receipt this Period
100.00

Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	1200.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2123 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. LEGOY, LEO, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3310 MARTHIAM AVE
 City RENO State NV Zip Code 89509-5062
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) MAUPIN, COX & LEGOY Occupation (for Individual) ATTORNEY
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 600.00

Date of Receipt 10 / 30 / 2016
Transaction ID : SA11A.460085
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

B. LEGOY, LEO, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3310 MARTHIAM AVE
 City RENO State NV Zip Code 89509-5062
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) MAUPIN, COX & LEGOY Occupation (for Individual) ATTORNEY
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 600.00

Date of Receipt 11 / 04 / 2016
Transaction ID : SA11A.471827
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

C. LEHIGH, KARLA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 6109 SUMMERWOOD LANE
 City TEXARKANA State AR Zip Code 71854-9455
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 275.00

Date of Receipt 10 / 28 / 2016
Transaction ID : SA11A.455652
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	250.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2124 OF 4311
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. LEHMANN, WOLFGANG, J., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 701 KING FARM BLVD
 144
 City ROCKVILLE State MD Zip Code 20850-6165
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 740.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 21 / 2016
Transaction ID : SA11A.443568
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION

B. LEHMANN, WOLFGANG, J., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 701 KING FARM BLVD
 144
 City ROCKVILLE State MD Zip Code 20850-6165
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 740.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 26 / 2016
Transaction ID : SA11A.450746
 Amount of Each Receipt this Period
 25.00
 Memo Item
 CONTRIBUTION

C. LEHMANN, WOLFGANG, J., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 701 KING FARM BLVD
 144
 City ROCKVILLE State MD Zip Code 20850-6165
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 740.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 31 / 2016
Transaction ID : SA11A.457800
 Amount of Each Receipt this Period
 25.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	150.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2125 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. LEHNARDT, SEILA, H., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 636 BUTTERNUT LANE
 City LIBERTY State MO Zip Code 64068-8429
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) INFORMATION REQUESTED PER BEST EFFORTS Occupation (for Individual) INFORMATION REQUESTED PER BE
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 500.00

Date of Receipt 10 / 21 / 2016
Transaction ID : SA11A.443684
 Amount of Each Receipt this Period 500.00
 Memo Item CONTRIBUTION

B. LEHNEIS, KIRK, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3058 HIGHLANDER DR
 City BEAVERCREEK State OH Zip Code 45432-2475
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) US AIR FORCE Occupation (for Individual) METEOROLOGIST
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 403.00

Date of Receipt 10 / 28 / 2016
Transaction ID : SA11A.455586
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

C. LEIB, ISABEL, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1281 WOLVER HOLLOW ROAD
 City OYSTER BAY State NY Zip Code 11771-4303
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 1000.00

Date of Receipt 10 / 26 / 2016
Transaction ID : SA11A.447631
 Amount of Each Receipt this Period 1000.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 1525.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2126 OF 4311
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. LEIBUNDGUTH, MARY, C., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address P.O. BOX 220
 City WICOMICO CHURCH State VA Zip Code 22579-0220
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 925.00

Date of Receipt 10 / 31 / 2016
Transaction ID : SA11A.463716
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

B. LEIGH, JOHN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2926 LAUREL PARK HWY.
 City HENDERSONVILLE State NC Zip Code 28739-8980
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1609.00

Date of Receipt 10 / 24 / 2016
Transaction ID : SA11A.449233
 Amount of Each Receipt this Period 200.00
 Memo Item CONTRIBUTION

C. LEIGH, JOHN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2926 LAUREL PARK HWY.
 City HENDERSONVILLE State NC Zip Code 28739-8980
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1609.00

Date of Receipt 10 / 26 / 2016
Transaction ID : SA11A.450596
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶ 350.00
TOTAL This Period (last page this line number only).....▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2127 OF 4311		
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14	<input type="checkbox"/> 11c <input type="checkbox"/> 15	<input type="checkbox"/> 12 <input type="checkbox"/> 16

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NAME OF COMMITTEE (In Full)
Team Ryan

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
A. LEIGH, JOHN, , ,

Mailing Address 2926 LAUREL PARK HWY.

City HENDERSONVILLE	State NC	Zip Code 28739-8980
------------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1609.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 26 / 2016

Transaction ID : SA11A.450613

Amount of Each Receipt this Period
100.00

Memo Item CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
B. LEIGH, JOHN, , ,

Mailing Address 2926 LAUREL PARK HWY.

City HENDERSONVILLE	State NC	Zip Code 28739-8980
------------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1609.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 31 / 2016

Transaction ID : SA11A.463180

Amount of Each Receipt this Period
100.00

Memo Item CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
C. LEIN, DANIEL, , ,

Mailing Address 508 MAIN STREET
PO BOX 57

City MADISON LAKE	State MN	Zip Code 56063-2027
----------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) LATITUDE 44, INC.	Occupation (for Individual) PRESIDENT
--	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
413.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 30 / 2016

Transaction ID : SA11A.460144

Amount of Each Receipt this Period
59.00

Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	259.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2128 OF 4311
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. LEIN, DANIEL, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 508 MAIN STREET
 PO BOX 57
 City MADISON LAKE State MN Zip Code 56063-2027
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) LATITUDE 44, INC. Occupation (for Individual) PRESIDENT
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 413.00

Date of Receipt 11 / 04 / 2016
Transaction ID : SA11A.473660
 Amount of Each Receipt this Period 59.00
 Memo Item CONTRIBUTION

B. LEMBO, LORETTA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2121 ESCOBAR AVE.
 City LADY LAKE State FL Zip Code 32159-9524
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 435.00

Date of Receipt 11 / 04 / 2016
Transaction ID : SA11A.472875
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

C. LEMIEUX, JEFFREY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 25101 BUCKSKIN
 City LAGUNA HILLS State CA Zip Code 92653-5738
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) ISLES RANCH PARTNERS Occupation (for Individual) FINANCE
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 600.00

Date of Receipt 10 / 21 / 2016
Transaction ID : SA11A.444603
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	209.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2129 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
-----------------------------	-----------------------------	-----------------------------

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NAME OF COMMITTEE (In Full)
Team Ryan

A. LEMIEUX, JEFFREY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 25101 BUCKSKIN
 City LAGUNA HILLS State CA Zip Code 92653-5738
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) ISLES RANCH PARTNERS Occupation (for Individual) FINANCE
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 600.00

Date of Receipt 11 / 04 / 2016
Transaction ID : SA11A.472191
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

B. LEMKE, RICHARD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 403 COLLEY LANE
 City ST. SIMONS ISLAND State GA Zip Code 31522-9778
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 275.00

Date of Receipt 11 / 04 / 2016
Transaction ID : SA11A.470463
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

C. LENT, JOSEPH, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 28 DALEVILLE RD
 City SYORRS State CT Zip Code 06268-1324
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 700.00

Date of Receipt 10 / 31 / 2016
Transaction ID : SA11A.459112
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	300.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2130 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. LENT, JOSEPH, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 28 DALEVILLE RD
 City SYORRS State CT Zip Code 06268-1324
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 700.00

Date of Receipt 11 / 04 / 2016
Transaction ID : SA11A.471882
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

B. LENZ, CORDELIA, S., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3261 FOSTERS BRANCH ROAD
 City CHARLOTTESVILLE State VA Zip Code 22911-6205
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 600.00

Date of Receipt 11 / 08 / 2016
Transaction ID : SA11A.467956
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

C. LENZ, DOROTHY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 96 VALLEY RD
 City INDIANA State PA Zip Code 15701-3624
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 580.00

Date of Receipt 10 / 26 / 2016
Transaction ID : SA11A.454545
 Amount of Each Receipt this Period 30.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	380.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2131 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. LENZ, DOROTHY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 96 VALLEY RD
 City INDIANA State PA Zip Code 15701-3624
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 580.00

Date of Receipt 10 / 26 / 2016
Transaction ID : SA11A.454548
 Amount of Each Receipt this Period 30.00
 Memo Item CONTRIBUTION

B. LENZ, DOROTHY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 96 VALLEY RD
 City INDIANA State PA Zip Code 15701-3624
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 580.00

Date of Receipt 10 / 26 / 2016
Transaction ID : SA11A.454549
 Amount of Each Receipt this Period 30.00
 Memo Item CONTRIBUTION

C. LENZ, DOROTHY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 96 VALLEY RD
 City INDIANA State PA Zip Code 15701-3624
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 580.00

Date of Receipt 11 / 01 / 2016
Transaction ID : SA11A.462528
 Amount of Each Receipt this Period 30.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	90.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2132 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. LENZ, DOROTHY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 96 VALLEY RD
 City INDIANA State PA Zip Code 15701-3624
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 580.00

Date of Receipt
 11 / 01 / 2016
Transaction ID : SA11A.462529
 Amount of Each Receipt this Period 30.00
 Memo Item CONTRIBUTION

B. LENZ, DOROTHY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 96 VALLEY RD
 City INDIANA State PA Zip Code 15701-3624
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 580.00

Date of Receipt
 11 / 04 / 2016
Transaction ID : SA11A.473945
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

C. LENZ, DOROTHY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 96 VALLEY RD
 City INDIANA State PA Zip Code 15701-3624
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 580.00

Date of Receipt
 11 / 06 / 2016
Transaction ID : SA11A.477039
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	130.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2133 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. LENZ, DOROTHY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 96 VALLEY RD
 City INDIANA State PA Zip Code 15701-3624
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 580.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 06 / 2016
Transaction ID : SA11A.477059
 Amount of Each Receipt this Period
 25.00
 Memo Item
 CONTRIBUTION

B. LENZ, DOROTHY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 96 VALLEY RD
 City INDIANA State PA Zip Code 15701-3624
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 580.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 05 / 2016
Transaction ID : SA11A.478835
 Amount of Each Receipt this Period
 30.00
 Memo Item
 CONTRIBUTION

C. LENZ, DOROTHY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 96 VALLEY RD
 City INDIANA State PA Zip Code 15701-3624
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 580.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 05 / 2016
Transaction ID : SA11A.478839
 Amount of Each Receipt this Period
 25.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	80.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2134 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. LEONARD, DAN, M., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO BOX 3422

City MIDLAND	State TX	Zip Code 79702-3422
-----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) JTD RESOURCES LLC	Occupation (for Individual) OIL & GAS EXPLORATION
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 01 / 2016
Transaction ID : SA11A.461828

Amount of Each Receipt this Period
250.00

Memo Item
CONTRIBUTION

B. LEONARD, STEPHEN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3704 E ALTA RIDGE CT

City BOISE	State ID	Zip Code 83716-7122
---------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) SELF EMPLOYED	Occupation (for Individual) SURGEON
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
750.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 26 / 2016
Transaction ID : SA11A.450535

Amount of Each Receipt this Period
250.00

Memo Item
CONTRIBUTION

C. LEONARD, STEPHEN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3704 E ALTA RIDGE CT

City BOISE	State ID	Zip Code 83716-7122
---------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) SELF EMPLOYED	Occupation (for Individual) SURGEON
--	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
750.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 26 / 2016
Transaction ID : SA11A.450543

Amount of Each Receipt this Period
250.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	750.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2135 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
Team Ryan

A. LEOPOLD, GERALD, R., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2507 AMHERST DR
 City WICHITA FALLS State TX Zip Code 76308-5327
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) UNITED SUPERMARKETS Occupation (for Individual) REGISTERED PHARMACIST
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 330.00

Date of Receipt 10 / 25 / 2016
Transaction ID : SA11A.452206
 Amount of Each Receipt this Period 30.00
 Memo Item CONTRIBUTION

B. LEOPOLD, GERALD, R., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2507 AMHERST DR
 City WICHITA FALLS State TX Zip Code 76308-5327
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) UNITED SUPERMARKETS Occupation (for Individual) REGISTERED PHARMACIST
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 330.00

Date of Receipt 10 / 28 / 2016
Transaction ID : SA11A.455860
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

C. LEPRINO, JAMES, G., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1830 W 38TH AVE
 City DENVER State CO Zip Code 80211-2225
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) LEPRINO FOODS Occupation (for Individual) EXECUTIVE
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 2700.00

Date of Receipt 10 / 28 / 2016
Transaction ID : SA11A.449687
 Amount of Each Receipt this Period 2700.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 2755.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2136 OF 4311
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. LEPRINO, TERRY, LYNN, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2000 LITTLE RAVEN ST UNIT 6A
 City DENVER State CO Zip Code 80202-6101
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) LEPRINO FOODS Occupation (for Individual) EXECUTIVE
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 36100.00

Date of Receipt 10 / 28 / 2016
Transaction ID : SA11A.449690
 Amount of Each Receipt this Period 36100.00
 Memo Item CONTRIBUTION

B. LERNER, SSTEPHEN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 720 EAST PALISADE AVENU
 City ENGLEWOOD CLIFFS State NJ Zip Code 07632-3053
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) LERNER PROPERTIES Occupation (for Individual) REAL ESTATE
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 10 / 29 / 2016
Transaction ID : SA11A.461227
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

C. LERNER, STEPHEN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 720 EAST PALISADE AVENUE 203
 City ENGLEWOOD CLIFFS State NJ Zip Code 07632-3053
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) LERNER PROPERTIES Occupation (for Individual) REAL ESTATE
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 10 / 31 / 2016
Transaction ID : SA11A.464713
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 36450.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2137 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. LERNER, STEPHEN, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 720 EAST PALISADE AVENUE
203

City ENGLEWOOD CLIFFS	State NJ	Zip Code 07632-3053
--------------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) LERNER PROPERTIES	Occupation (for Individual) REAL ESTATE
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
300.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
11		04		2016

Transaction ID : SA11A.471774

Amount of Each Receipt this Period
25.00

Memo Item
CONTRIBUTION

B. LEROY, JAMES, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 4031 E WINSLOW AVE

City PHOENIX	State AZ	Zip Code 85040-1739
-----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) AUTO REPAIR	Occupation (for Individual) FLEET SERVICES
--	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
350.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
11		04		2016

Transaction ID : SA11A.470317

Amount of Each Receipt this Period
50.00

Memo Item
CONTRIBUTION

C. LEROY, JAMES, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 4031 E WINSLOW AVE

City PHOENIX	State AZ	Zip Code 85040-1739
-----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) AUTO REPAIR	Occupation (for Individual) FLEET SERVICES
--	---

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
350.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
11		04		2016

Transaction ID : SA11A.470318

Amount of Each Receipt this Period
50.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	125.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2138 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. LEROY, JAMES, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4031 E WINSLOW AVE
 City PHOENIX State AZ Zip Code 85040-1739
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) AUTO REPAIR Occupation (for Individual) FLEET SERVICES
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 350.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 04 / 2016
Transaction ID : SA11A.472558
 Amount of Each Receipt this Period
 50.00
 Memo Item
 CONTRIBUTION

B. LESH, RYAN, E., DR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 7423 S BROADWAY
 City RED HOOK State NY Zip Code 12571-1747
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NAPA Occupation (for Individual) PHYSICIAN
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 04 / 2016
Transaction ID : SA11A.473994
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION

C. LESKO, WILLIAM, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1100 MAXWELL LN 420
 City HOBOKEN State NJ Zip Code 07030-6882
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 01 / 2016
Transaction ID : SA11A.462292
 Amount of Each Receipt this Period
 250.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	400.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2139 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
Team Ryan

A. LESLIE, TERESA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 488 WALKER ROAD
 City CARROLLTON State GA Zip Code 30117-5864
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) EGGTRONICS LLC Occupation (for Individual) CO-OWNER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 350.00

Date of Receipt **10 / 20 / 2016**
Transaction ID : SA11A.433393
 Amount of Each Receipt this Period 100.00
 Memo Item
 CONTRIBUTION

B. LESTER, STEVEN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 19011 N 94TH PLACE
 City SCOTTSDALE State AZ Zip Code 85255-5533
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) LESTER, NORTON, AND BROZINAC PC Occupation (for Individual) ATTORNEY
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt **11 / 01 / 2016**
Transaction ID : SA11A.461554
 Amount of Each Receipt this Period 500.00
 Memo Item
 CONTRIBUTION

C. LEUENBERGER, CATHERINE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3537 YELLOW CREEK RD.
 City AKRON State OH Zip Code 44333-2221
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 850.00

Date of Receipt **11 / 01 / 2016**
Transaction ID : SA11A.467238
 Amount of Each Receipt this Period 100.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	700.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2140 OF 4311
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. LEUNG, PATRICK, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 2102 W MICHIGAN AVENUE

City MIDLAND	State TX	Zip Code 79701-5928
-----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) SELF EMPLOYED	Occupation (for Individual) PHYSICIAN
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
700.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	02	/	2016

Transaction ID : SA11A.465087

Amount of Each Receipt this Period
500.00

Memo Item
CONTRIBUTION

B. LEVENGOOD, PAUL, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 168 WHISPERING PINES LANE

City BIRDSBORO	State PA	Zip Code 19508-7934
-------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) C J'S TIRE & AUTO REPAIR	Occupation (for Individual) TIRE DEALER
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
660.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	20	/	2016

Transaction ID : SA11A.442423

Amount of Each Receipt this Period
50.00

Memo Item
CONTRIBUTION

C. LEVENGOOD, PAUL, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 168 WHISPERING PINES LANE

City BIRDSBORO	State PA	Zip Code 19508-7934
-------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) C J'S TIRE & AUTO REPAIR	Occupation (for Individual) TIRE DEALER
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
660.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	04	/	2016

Transaction ID : SA11A.472948

Amount of Each Receipt this Period
50.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	600.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2141 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. LEVINE, ALICIA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3507 BAYSHORE BLVD
 603
 City TAMPA State FL Zip Code 33629-8969
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 27 / 2016
Transaction ID : SA11A.453757
 Amount of Each Receipt this Period
 100.00
 Memo Item CONTRIBUTION

B. LEVINE, JUDY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO817
 City RANCHO SANTA FE State CA Zip Code 92067-
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 971.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 30 / 2016
Transaction ID : SA11A.460168
 Amount of Each Receipt this Period
 131.00
 Memo Item CONTRIBUTION

C. LEVINE, JUDY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO817
 City RANCHO SANTA FE State CA Zip Code 92067-
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 971.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 04 / 2016
Transaction ID : SA11A.473730
 Amount of Each Receipt this Period
 131.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	362.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2142 OF 4311
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. LEVINE, S, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 50 DINGLETOWN RD
 City GREENWICH State CT Zip Code 06830-3539
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt 10 / 31 / 2016
Transaction ID : SA11A.463430
 Amount of Each Receipt this Period 1000.00
 Memo Item CONTRIBUTION

B. LEVNO, SELMA, M., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 305 7TH AVENUE SW
 City SIDNEY State MT Zip Code 59270-3816
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 411.00

Date of Receipt 10 / 31 / 2016
Transaction ID : SA11A.457282
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

C. LEVNO, SELMA, M., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 305 7TH AVENUE SW
 City SIDNEY State MT Zip Code 59270-3816
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 411.00

Date of Receipt 11 / 01 / 2016
Transaction ID : SA11A.461575
 Amount of Each Receipt this Period 38.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶ 1088.00
TOTAL This Period (last page this line number only).....▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2143 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. LEVNO, SELMA, M., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 305 7TH AVENUE SW
 City SIDNEY State MT Zip Code 59270-3816
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 411.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 04 / 2016
Transaction ID : SA11A.467526
 Amount of Each Receipt this Period
 40.00
 Memo Item
 CONTRIBUTION

B. LEVY, IRWIN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1000 UPTOWN PARK BLVD #64
 City HOUSTON State TX Zip Code 77056-3245
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 27 / 2016
Transaction ID : SA11A.453930
 Amount of Each Receipt this Period
 250.00
 Memo Item
 CONTRIBUTION

C. LEVY, MICHAEL, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 6710 PELICAN BAY BLVD.
 435
 City NAPLES State FL Zip Code 34108-8205
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 235.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 01 / 2016
Transaction ID : SA11A.462434
 Amount of Each Receipt this Period
 50.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	340.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2144 OF 4311
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. LEVY, MICHAEL, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 6710 PELICAN BAY BLVD.
435

City NAPLES State FL Zip Code 34108-8205

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
235.00

Date of Receipt
MM / DD / YYYY
11 / 05 / 2016

Transaction ID : SA11A.478643

Amount of Each Receipt this Period
50.00

Memo Item CONTRIBUTION

B. LEVY, RACHEL, , MS.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 31 SAMANTHAS WAY

City PITTSFORD State NY Zip Code 14534-1085

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
350.00

Date of Receipt
MM / DD / YYYY
10 / 23 / 2016

Transaction ID : SA11A.446536

Amount of Each Receipt this Period
100.00

Memo Item CONTRIBUTION

C. LEVY, WINSTON, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address P.O. BOX 576

City NATCHITOCHEs State LA Zip Code 71458-0576

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) ICCHC Occupation (for Individual) PHYSICIAN

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
500.00

Date of Receipt
MM / DD / YYYY
11 / 04 / 2016

Transaction ID : SA11A.471977

Amount of Each Receipt this Period
250.00

Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	400.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2145 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
Team Ryan

A. LEWIS, ANGELA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4050 BROOKHOLLOW DRIVE
 City ABILENE State TX Zip Code 79605-6448
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 350.00

Date of Receipt 10 / 27 / 2016
Transaction ID : SA11A.456583
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

B. LEWIS, ANGELA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4050 BROOKHOLLOW DRIVE
 City ABILENE State TX Zip Code 79605-6448
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 350.00

Date of Receipt 10 / 27 / 2016
Transaction ID : SA11A.456601
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

C. LEWIS, DANNY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5504 CYPRESS CT
 City MIDLAND State TX Zip Code 79707-1522
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) CONCHO RESOURCES Occupation (for Individual) ENGINEER
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 11 / 02 / 2016
Transaction ID : SA11A.466030
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	600.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2146 OF 4311
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. LEWIS JR, DONALD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 708 CAVALIER DR,
 City VIRGINIA BEACH State VA Zip Code 23451-3838
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) ARTIST
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1075.00

Date of Receipt 10 / 26 / 2016
Transaction ID : SA11A.450619
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

B. LEWIS JR, DONALD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 708 CAVALIER DR,
 City VIRGINIA BEACH State VA Zip Code 23451-3838
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) ARTIST
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1075.00

Date of Receipt 10 / 26 / 2016
Transaction ID : SA11A.450627
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

C. LEWIS JR, DONALD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 708 CAVALIER DR,
 City VIRGINIA BEACH State VA Zip Code 23451-3838
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) ARTIST
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1075.00

Date of Receipt 11 / 04 / 2016
Transaction ID : SA11A.470762
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 750.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2147 OF 4311
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. LEWIS, EDWARD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 10100 EMPYREAN WAY # 204
 City LOS ANGELES State CA Zip Code 90067-3815
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 30 / 2016
Transaction ID : SA11A.460170
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION

B. LEWIS, EDWARD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 10100 EMPYREAN WAY # 204
 City LOS ANGELES State CA Zip Code 90067-3815
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 04 / 2016
Transaction ID : SA11A.473777
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION

C. LEWIS, GREGORY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 518 CHESAPEAKE PLACE
 City GREENVILLE State NC Zip Code 27858-0678
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) EASTERN RADIOLOGISTS Occupation (for Individual) PHYSICIAN
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 26 / 2016
Transaction ID : SA11A.450729
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	300.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2148 OF 4311
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. LEWIS, JANICE, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 6538 156TH AVE SE

City BELLEVUE	State WA	Zip Code 98006-5426
------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
525.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		23		2016

Transaction ID : SA11A.446472

Amount of Each Receipt this Period
25.00

Memo Item
CONTRIBUTION

B. LEWIS, JANICE, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 6538 156TH AVE SE

City BELLEVUE	State WA	Zip Code 98006-5426
------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
525.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		21		2016

Transaction ID : SA11A.447189

Amount of Each Receipt this Period
50.00

Memo Item
CONTRIBUTION

C. LEWIS, JANICE, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 6538 156TH AVE SE

City BELLEVUE	State WA	Zip Code 98006-5426
------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
525.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		26		2016

Transaction ID : SA11A.450260

Amount of Each Receipt this Period
25.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	100.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2149 OF 4311
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. LEWIS, JANICE, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 6538 156TH AVE SE

City BELLEVUE	State WA	Zip Code 98006-5426
------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
525.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		28		2016

Transaction ID : SA11A.455475

Amount of Each Receipt this Period
25.00

Memo Item CONTRIBUTION

B. LEWIS, JANICE, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 6538 156TH AVE SE

City BELLEVUE	State WA	Zip Code 98006-5426
------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
525.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		28		2016

Transaction ID : SA11A.455476

Amount of Each Receipt this Period
25.00

Memo Item CONTRIBUTION

C. LEWIS, JANICE, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 6538 156TH AVE SE

City BELLEVUE	State WA	Zip Code 98006-5426
------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
525.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11		01		2016

Transaction ID : SA11A.462468

Amount of Each Receipt this Period
25.00

Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	75.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2150 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. LEWIS, JANICE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 6538 156TH AVE SE
 City BELLEVUE State WA Zip Code 98006-5426
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 525.00

Date of Receipt
 11 / 02 / 2016
Transaction ID : SA11A.470086
 Amount of Each Receipt this Period
 50.00
 Memo Item
 CONTRIBUTION

B. LEWIS, JANICE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 6538 156TH AVE SE
 City BELLEVUE State WA Zip Code 98006-5426
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 525.00

Date of Receipt
 11 / 07 / 2016
Transaction ID : SA11A.476059
 Amount of Each Receipt this Period
 25.00
 Memo Item
 CONTRIBUTION

C. LEWIS, JANICE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 6538 156TH AVE SE
 City BELLEVUE State WA Zip Code 98006-5426
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 525.00

Date of Receipt
 11 / 05 / 2016
Transaction ID : SA11A.478717
 Amount of Each Receipt this Period
 25.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	100.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2151 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
Team Ryan

A. LEWIS, JENNY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3197 HARVEST MOON DRIVE
 City PALM HARBOR State FL Zip Code 34683-2125
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) FIS Occupation (for Individual) SR. DIRECTOR
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 375.00

Date of Receipt 10 / 31 / 2016
Transaction ID : SA11A.459199
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

B. LEWIS, JENNY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3197 HARVEST MOON DRIVE
 City PALM HARBOR State FL Zip Code 34683-2125
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) FIS Occupation (for Individual) SR. DIRECTOR
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 375.00

Date of Receipt 11 / 02 / 2016
Transaction ID : SA11A.469937
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

C. LEWIS, JENNY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3197 HARVEST MOON DRIVE
 City PALM HARBOR State FL Zip Code 34683-2125
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) FIS Occupation (for Individual) SR. DIRECTOR
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 375.00

Date of Receipt 11 / 02 / 2016
Transaction ID : SA11A.469939
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	75.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2152 OF 4311
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. LEWIS, JENNY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3197 HARVEST MOON DRIVE
 City PALM HARBOR State FL Zip Code 34683-2125
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) FIS Occupation (for Individual) SR. DIRECTOR
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 375.00

Date of Receipt 11 / 04 / 2016
Transaction ID : SA11A.473729
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

B. LEWIS, KENNETH, B., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 301 W GREEN TREE :AME
 City FARMINGTON State MO Zip Code 63640-2477
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 11 / 05 / 2016
Transaction ID : SA11A.479079
 Amount of Each Receipt this Period 300.00
 Memo Item CONTRIBUTION

C. LEWIS, SALLY, N., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 12135 STEVENS CT
 City LIVE OAK State TX Zip Code 78233-4257
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 375.00

Date of Receipt 11 / 01 / 2016
Transaction ID : SA11A.463164
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶ 350.00
TOTAL This Period (last page this line number only).....▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2153 OF 4311
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. LEWIS, SALLY, N., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 12135 STEVENS CT
 City LIVE OAK State TX Zip Code 78233-4257
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 375.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 01 / 2016
Transaction ID : SA11A.463166
 Amount of Each Receipt this Period
 25.00
 Memo Item
 CONTRIBUTION

B. LEWIS, SALLY, N., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 12135 STEVENS CT
 City LIVE OAK State TX Zip Code 78233-4257
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 375.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 05 / 2016
Transaction ID : SA11A.478671
 Amount of Each Receipt this Period
 25.00
 Memo Item
 CONTRIBUTION

C. LEWIS, VERNON, F., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 204 E SANTA CRUX DR
 City GOODYEAR State AZ Zip Code 85338-1429
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) VERN LEWIS WELDING SUPPLY INC Occupation (for Individual) PRES CORP
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 420.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 26 / 2016
Transaction ID : SA11A.447654
 Amount of Each Receipt this Period
 35.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 85.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2154 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. LEWIS, WILLIAM, CRIS, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1652 LINDEN CIRCLE
 City BOUNTIFUL State UT Zip Code 84010-5908
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 10 / 25 / 2016
Transaction ID : SA11A.447395
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

B. LEWIS, WILLIAM, J., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 6203 HIGHCROFT DR.
 City NAPLES State FL Zip Code 34119-8496
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) ADVANCED FLEXIBLE COMPOSITES INC. Occupation (for Individual) CEO
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 10 / 31 / 2016
Transaction ID : SA11A.458672
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

C. LEWIT, ROBERT, T., DR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2120 HARBOURSIDE DRIVE UNIT 633
 City LONGBOAT KEY State FL Zip Code 34228-4263
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 7350.00

Date of Receipt 10 / 30 / 2016
Transaction ID : SA11A.460309
 Amount of Each Receipt this Period 1500.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	1850.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2155 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. LEWIT, ROBERT, T., DR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2120 HARBOURSIDE DRIVE
 UNIT 633
 City LONGBOAT KEY State FL Zip Code 34228-4263
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 7350.00

Date of Receipt 11 / 04 / 2016
Transaction ID : SA11A.474077
 Amount of Each Receipt this Period 1500.00
 Memo Item CONTRIBUTION

B. LEWIT, WILLIAM, V., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 25 VALLEY RD
 City SCARSDALE State NY Zip Code 10583-1126
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1500.00

Date of Receipt 10 / 31 / 2016
Transaction ID : SA11A.458134
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

C. LEWIT, WILLIAM, V., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 25 VALLEY RD
 City SCARSDALE State NY Zip Code 10583-1126
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1500.00

Date of Receipt 11 / 02 / 2016
Transaction ID : SA11A.467061
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	1575.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2156 OF 4311
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. LEWIT, WILLIAM, V., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 25 VALLEY RD
 City SCARSDALE State NY Zip Code 10583-1126
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1500.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 02 / 2016
Transaction ID : SA11A.467064
 Amount of Each Receipt this Period
 25.00
 Memo Item
 CONTRIBUTION

B. LEWKOWITZ, BERND, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 306 N. GLADSTONE AVE.
 City MARGATE CITY State NJ Zip Code 08402-1634
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 04 / 2016
Transaction ID : SA11A.473756
 Amount of Each Receipt this Period
 50.00
 Memo Item
 CONTRIBUTION

C. LEYERZAPH, JOHN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2108 NW TWILIGHT DR.
 City BEND State OR Zip Code 97703-5413
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 475.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 21 / 2016
Transaction ID : SA11A.444323
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 175.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2157 OF 4311
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. LEYERZAPH, JOHN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2108 NW TWILIGHT DR.
 City BEND State OR Zip Code 97703-5413
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 475.00

Date of Receipt 10 / 21 / 2016
Transaction ID : SA11A.444345
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

B. LEYERZAPH, JOHN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2108 NW TWILIGHT DR.
 City BEND State OR Zip Code 97703-5413
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 475.00

Date of Receipt 10 / 31 / 2016
Transaction ID : SA11A.463810
 Amount of Each Receipt this Period 75.00
 Memo Item CONTRIBUTION

C. LIANG, SUSAN, S., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1010 FROG LEAP TRAIL NW
 City KENNESAW State GA Zip Code 30152-6213
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) HEALTH MARK INC Occupation (for Individual) ACCOUNTING MANAGER
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt 10 / 25 / 2016
Transaction ID : SA11A.447252
 Amount of Each Receipt this Period 1000.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶ 1175.00
TOTAL This Period (last page this line number only).....▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2158 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. LIBERATORE, CHESTER, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 9247CREEKWOOD DR
 City MENTOR State OH Zip Code 44060-6443
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt 11 / 04 / 2016
Transaction ID : SA11A.471307
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

B. LIBERATORE, CHESTER, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 9247CREEKWOOD DR
 City MENTOR State OH Zip Code 44060-6443
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt 11 / 05 / 2016
Transaction ID : SA11A.478371
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

C. LICHTENSTEIN, BRENDA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 35 FINCH FOREST TR
 City ATLANTA State GA Zip Code 30327-4576
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) BRENMAR CORP Occupation (for Individual) PILOT
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 450.00

Date of Receipt 10 / 31 / 2016
Transaction ID : SA11A.458422
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 300.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2159 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. LICHTENBERGER, H. WILLIAM, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 508 NW WINTERS CREEK ROAD
 City PALM CITY State FL Zip Code 34990-8096
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 20000.00

Date of Receipt 10 / 28 / 2016
Transaction ID : SA11A.449670
 Amount of Each Receipt this Period 10000.00
 Memo Item CONTRIBUTION

B. LIEBERMAN, ELLIOTT, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 36 RUSTIC GATE LANE
 City DIX HILLS State NY Zip Code 11746-6132
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) IMP, PLLC Occupation (for Individual) UROLOGIST
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 11 / 05 / 2016
Transaction ID : SA11A.478583
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

C. LIEBERMAN, ELLIOTT, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 36 RUSTIC GATE LANE
 City DIX HILLS State NY Zip Code 11746-6132
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) IMP, PLLC Occupation (for Individual) UROLOGIST
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 11 / 05 / 2016
Transaction ID : SA11A.478584
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	10200.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2160 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
Team Ryan

A. LIFSEY, KATHARINE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 23217 N 119TH DRIVE
 City SUN CITY State AZ Zip Code 85373-5408
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) HOSPICE OF THE VALLEY Occupation (for Individual) RECEPTIONIST
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 10 / 31 / 2016
Transaction ID : SA11A.458149
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

B. LIFSEY, KATHARINE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 23217 N 119TH DRIVE
 City SUN CITY State AZ Zip Code 85373-5408
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) HOSPICE OF THE VALLEY Occupation (for Individual) RECEPTIONIST
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 11 / 03 / 2016
Transaction ID : SA11A.469320
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

C. LIFSEY, KATHARINE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 23217 N 119TH DRIVE
 City SUN CITY State AZ Zip Code 85373-5408
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) HOSPICE OF THE VALLEY Occupation (for Individual) RECEPTIONIST
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 11 / 03 / 2016
Transaction ID : SA11A.469326
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	125.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2161 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. LIFSEY, KATHARINE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 23217 N 119TH DRIVE
 City SUN CITY State AZ Zip Code 85373-5408
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) HOSPICE OF THE VALLEY Occupation (for Individual) RECEPTIONIST
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 11 / 04 / 2016
Transaction ID : SA11A.479457
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

B. LILLA, EUGENE, T., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4502 SHIRLEY STREET
 City OMAHA State NE Zip Code 68106-2522
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 10 / 27 / 2016
Transaction ID : SA11A.452376
 Amount of Each Receipt this Period 200.00
 Memo Item CONTRIBUTION

C. LINABURG, RONALD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 6201 STEUBENVILLE PIKE SUITE 110
 City MCKEES ROCKS State PA Zip Code 15136-1389
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 550.00

Date of Receipt 10 / 27 / 2016
Transaction ID : SA11A.453444
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	475.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2162 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. LINABURG, RONALD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 6201 STEUBENVILLE PIKE SUITE 110
 City MCKEES ROCKS State PA Zip Code 15136-1389
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 550.00

Date of Receipt 11 / 06 / 2016
Transaction ID : SA11A.480921
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

B. LINCOLN, DAVID, C., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1741 E MORTEN AVENUE
 City PHOENIX State AZ Zip Code 85020-4645
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF Occupation (for Individual) ENTREPRENEUR
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 10 / 31 / 2016
Transaction ID : SA11A.457343
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

C. LINCOLN, EVE, T., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3600 S. YOSEMITE STREET 828
 City DENVER State CO Zip Code 80237-1812
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) TSCHETTER HAMRICK SULZER Occupation (for Individual) CLIENT & PUBLIC RELATIONS MGR
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 900.00

Date of Receipt 10 / 20 / 2016
Transaction ID : SA11A.442434
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	550.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2163 OF 4311
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. LINCOLN, EVE, T., ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 3600 S. YOSEMITE STREET
828

City DENVER State CO Zip Code 80237-1812

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) TSCHETTER HAMRICK SULZER Occupation (for Individual) CLIENT & PUBLIC RELATIONS MGR

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 900.00

Date of Receipt 11 / 04 / 2016
Transaction ID : SA11A.472353

Amount of Each Receipt this Period 50.00

Memo Item CONTRIBUTION

B. LINCOLN, MARY, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 12930 W BURGUNDY DRIVE

City LITTLETON State CO Zip Code 80127-4623

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 260.00

Date of Receipt 11 / 05 / 2016
Transaction ID : SA11A.478778

Amount of Each Receipt this Period 30.00

Memo Item CONTRIBUTION

C. LINCOLN, MARY, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 12930 W BURGUNDY DRIVE

City LITTLETON State CO Zip Code 80127-4623

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 260.00

Date of Receipt 11 / 05 / 2016
Transaction ID : SA11A.478789

Amount of Each Receipt this Period 25.00

Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 105.00

TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2164 OF 4311
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. LINCOLN, MARY, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 12930 W BURGUNDY DRIVE

City LITTLETON	State CO	Zip Code 80127-4623
-------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
260.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	05	/	2016

Transaction ID : SA11A.478794

Amount of Each Receipt this Period
25.00

Memo Item CONTRIBUTION

B. LINDES, CONRAD, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 13375 OLD PLEASANT VALLEY ROAD

City MIDDLEBURG HEIGHTS	State OH	Zip Code 44130-5619
----------------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) SOUTHWEST FAMILY PHYSICIANS, INC.	Occupation (for Individual) FAMILY PHYSICIAN
--	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
380.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	03	/	2016

Transaction ID : SA11A.468937

Amount of Each Receipt this Period
100.00

Memo Item CONTRIBUTION

C. LINDEE, MARJORIE, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 373 PINE LANE

City LOS ALTOS	State CA	Zip Code 94022-1648
-------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
974.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	22	/	2016

Transaction ID : SA11A.447052

Amount of Each Receipt this Period
100.00

Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	225.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2165 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. LINDEE, MARJORIE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 373 PINE LANE
 City LOS ALTOS State CA Zip Code 94022-1648
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 974.00

Date of Receipt 10 / 26 / 2016
Transaction ID : SA11A.451346
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

B. LINDEE, MARJORIE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 373 PINE LANE
 City LOS ALTOS State CA Zip Code 94022-1648
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 974.00

Date of Receipt 10 / 26 / 2016
Transaction ID : SA11A.451347
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

C. LINDEE, MARJORIE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 373 PINE LANE
 City LOS ALTOS State CA Zip Code 94022-1648
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 974.00

Date of Receipt 11 / 03 / 2016
Transaction ID : SA11A.468671
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	200.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2166 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. LINDHOUT, WILLIAM, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 406 SPRING BROOKE DR.
 City BRIGHTON State MI Zip Code 48116-2911
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) LINDHOUT ASSOCIATES ARCHITECTS Occupation (for Individual) A R CHITECT
 Receipt For: Primary General Other (specify) Aggregate Year-to-Date 300.00

Date of Receipt 11 / 07 / 2016
Transaction ID : SA11A.475453
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

B. LINDIG, LARK, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 11600 ARGONNE FOREST TRAIL A
 City AUSTIN State TX Zip Code 78759-2226
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) LARK LINDIG Occupation (for Individual) SELF
 Receipt For: Primary General Other (specify) Aggregate Year-to-Date 1750.00

Date of Receipt 10 / 25 / 2016
Transaction ID : SA11A.448845
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

C. LINDIG, LARK, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 11600 ARGONNE FOREST TRAIL A
 City AUSTIN State TX Zip Code 78759-2226
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) LARK LINDIG Occupation (for Individual) SELF
 Receipt For: Primary General Other (specify) Aggregate Year-to-Date 1750.00

Date of Receipt 11 / 04 / 2016
Transaction ID : SA11A.471578
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	600.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2167 OF 4311
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
Team Ryan

A. LINDNER, BILL, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 321 W. OREGON AV

City PHOENIX	State AZ	Zip Code 85013-2026
-----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) WILLIAM R LINDNER	Occupation (for Individual) REALTOR
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
275.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		20		2016

Transaction ID : SA11A.442640

Amount of Each Receipt this Period
25.00

Memo Item
CONTRIBUTION

B. LINDNER, BILL, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 321 W. OREGON AV

City PHOENIX	State AZ	Zip Code 85013-2026
-----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) WILLIAM R LINDNER	Occupation (for Individual) REALTOR
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
275.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		20		2016

Transaction ID : SA11A.442652

Amount of Each Receipt this Period
25.00

Memo Item
CONTRIBUTION

C. LINDNER, BILL, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 321 W. OREGON AV

City PHOENIX	State AZ	Zip Code 85013-2026
-----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) WILLIAM R LINDNER	Occupation (for Individual) REALTOR
--	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
275.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		31		2016

Transaction ID : SA11A.458156

Amount of Each Receipt this Period
25.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	75.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2168 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. LINDNER, BILL, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 321 W. OREGON AV
 City PHOENIX State AZ Zip Code 85013-2026
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) WILLIAM R LINDNER Occupation (for Individual) REALTOR
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 275.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 05 / 2016
Transaction ID : SA11A.478731
 Amount of Each Receipt this Period
 25.00
 Memo Item
 CONTRIBUTION

B. LINDNER, IVAN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 313 NE 5TH ST.
 City OAK GROVE State MO Zip Code 64075-9107
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 380.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 27 / 2016
Transaction ID : SA11A.453820
 Amount of Each Receipt this Period
 50.00
 Memo Item
 CONTRIBUTION

C. LINDNER, IVAN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 313 NE 5TH ST.
 City OAK GROVE State MO Zip Code 64075-9107
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 380.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 02 / 2016
Transaction ID : SA11A.469897
 Amount of Each Receipt this Period
 50.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	125.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2169 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
Team Ryan

A. LINDNER, IVAN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 313 NE 5TH ST.
 City OAK GROVE State MO Zip Code 64075-9107
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 380.00

Date of Receipt 11 / 04 / 2016
Transaction ID : SA11A.472636
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

B. LINDSEY, DAVID, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 29000 US HWY 98 203 B
 City DAPHNE State AL Zip Code 36526-7272
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 325.00

Date of Receipt 10 / 21 / 2016
Transaction ID : SA11A.444393
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

C. LINDSEY, DAVID, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 29000 US HWY 98 203 B
 City DAPHNE State AL Zip Code 36526-7272
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 325.00

Date of Receipt 10 / 26 / 2016
Transaction ID : SA11A.450094
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	125.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2170 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13 <input type="checkbox"/> 11b <input type="checkbox"/> 14 <input type="checkbox"/> 11c <input type="checkbox"/> 15 <input type="checkbox"/> 12 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. LINDSEY, DAVID, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 29000 US HWY 98
 203 B
 City DAPHNE State AL Zip Code 36526-7272
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 325.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 26 / 2016
Transaction ID : SA11A.450095
 Amount of Each Receipt this Period
 50.00
 Memo Item
 CONTRIBUTION

B. LINDSEY, DAVID, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 29000 US HWY 98
 203 B
 City DAPHNE State AL Zip Code 36526-7272
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 325.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 04 / 2016
Transaction ID : SA11A.471499
 Amount of Each Receipt this Period
 50.00
 Memo Item
 CONTRIBUTION

C. LINDSEY, DAVID, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 29000 US HWY 98
 203 B
 City DAPHNE State AL Zip Code 36526-7272
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 325.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 04 / 2016
Transaction ID : SA11A.472350
 Amount of Each Receipt this Period
 25.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	125.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2171 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name A. LINES, ALVIN, , ,		Date of Receipt M M M / D D D / Y Y Y Y Y Y 10 / 26 / 2016
Mailing Address 4430 W CASSIA ST		Transaction ID : SA11A.450392
City BOISE	State ID	Zip Code 83705-5848
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 100.00
Name of Employer (for Individual) ALVIN K LINES	Occupation (for Individual) MEETINGHOUSE MECHANIC	<input type="checkbox"/> Memo Item CONTRIBUTION
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name B. LINES, ALVIN, , ,		Date of Receipt M M M / D D D / Y Y Y Y Y Y 11 / 04 / 2016
Mailing Address 4430 W CASSIA ST		Transaction ID : SA11A.473363
City BOISE	State ID	Zip Code 83705-5848
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 25.00
Name of Employer (for Individual) ALVIN K LINES	Occupation (for Individual) MEETINGHOUSE MECHANIC	<input type="checkbox"/> Memo Item CONTRIBUTION
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name C. LINN, ROBERT, , ,		Date of Receipt M M M / D D D / Y Y Y Y Y Y 11 / 02 / 2016
Mailing Address 601 PINE RIDGE ROAD		Transaction ID : SA11A.465088
City MEDIA	State ID PA	Zip Code 19063-1717
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 1000.00
Name of Employer (for Individual) LINN ARCHITECTS	Occupation (for Individual) ARCHITECT	<input type="checkbox"/> Memo Item CONTRIBUTION
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Aggregate Year-to-Date ▼ 1000.00	

SUBTOTAL of Receipts This Page (optional).....▶	1125.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2172 OF 4311
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. LINS, JOSEPH, T., ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 3085 MANZANO DRIVE

City WALNUT CREEK	State CA	Zip Code 94598-3822
----------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) SOLAIRUS AVIATION	Occupation (for Individual) PILOT
--	--------------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
205.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		31		2016

Transaction ID : SA11A.458925

Amount of Each Receipt this Period
30.00

Memo Item
CONTRIBUTION

B. LINS, JOSEPH, T., ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 3085 MANZANO DRIVE

City WALNUT CREEK	State CA	Zip Code 94598-3822
----------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) SOLAIRUS AVIATION	Occupation (for Individual) PILOT
--	--------------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
205.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11		04		2016

Transaction ID : SA11A.479640

Amount of Each Receipt this Period
25.00

Memo Item
CONTRIBUTION

C. LINTGEN, ALICE, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 48 PAIGE TRAIL

City PERKASIE	State PA	Zip Code 18944-2664
------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		21		2016

Transaction ID : SA11A.444330

Amount of Each Receipt this Period
50.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	105.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2173 OF 4311
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. LINTGEN, ALICE, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 48 PAIGE TRAIL

City PERKASIE	State PA	Zip Code 18944-2664
------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	26	/	2016

Transaction ID : SA11A.447627

Amount of Each Receipt this Period
50.00

Memo Item
CONTRIBUTION

B. LINTGEN, ALICE, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 48 PAIGE TRAIL

City PERKASIE	State PA	Zip Code 18944-2664
------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	02	/	2016

Transaction ID : SA11A.467096

Amount of Each Receipt this Period
50.00

Memo Item
CONTRIBUTION

C. LIONETT, DAVID, J., MR.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 11157 SIERRA PALM COURT

City FORT MYERS	State FL	Zip Code 33966-5754
--------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
1100.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	28	/	2016

Transaction ID : SA11A.456098

Amount of Each Receipt this Period
100.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	200.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2174 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. LIONETT, DAVID, J., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 11157 SIERRA PALM COURT
 City FORT MYERS State FL Zip Code 33966-5754
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1100.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 04 / 2016
Transaction ID : SA11A.471376
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION

B. LIPMAN, GAILE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address P O BOX 2424
 City ATHENS State TX Zip Code 75751-7424
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) EAST TEXAS RANCH LP Occupation (for Individual) ORCHARD CONSULTANT
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 227.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 06 / 2016
Transaction ID : SA11A.478185
 Amount of Each Receipt this Period
 25.00
 Memo Item
 CONTRIBUTION

C. LIPSEY, SUZANNE, H., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO BOX 7795
 City AVON State CO Zip Code 81620-7795
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 17150.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 21 / 2016
Transaction ID : SA11A.444403
 Amount of Each Receipt this Period
 500.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	625.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2175 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. LIPSEY, SUZANNE, H., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO BOX 7795
 City AVON State CO Zip Code 81620-7795
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 17150.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 21 / 2016
Transaction ID : SA11A.444404
 Amount of Each Receipt this Period
 500.00
 Memo Item
 CONTRIBUTION

B. LIPSEY, SUZANNE, H., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO BOX 7795
 City AVON State CO Zip Code 81620-7795
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 17150.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 26 / 2016
Transaction ID : SA11A.450524
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION

C. LIPSEY, SUZANNE, H., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO BOX 7795
 City AVON State CO Zip Code 81620-7795
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 17150.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 26 / 2016
Transaction ID : SA11A.450526
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	700.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2176 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
Team Ryan

A. LIPSEY, SUZANNE, H., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO BOX 7795
 City AVON State CO Zip Code 81620-7795
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 17150.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 29 / 2016
Transaction ID : SA11A.460885
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION

B. LIPSEY, SUZANNE, H., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO BOX 7795
 City AVON State CO Zip Code 81620-7795
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 17150.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 01 / 2016
Transaction ID : SA11A.462554
 Amount of Each Receipt this Period
 500.00
 Memo Item
 CONTRIBUTION

C. LIPSEY, SUZANNE, H., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO BOX 7795
 City AVON State CO Zip Code 81620-7795
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 17150.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 02 / 2016
Transaction ID : SA11A.466206
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	700.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2177 OF 4311
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name A. LITTLE, DAVID, , ,		Date of Receipt M M M / D D D / Y Y Y Y Y Y 10 / 27 / 2016
Mailing Address 1734 CASEY JONES CT.		Transaction ID : SA11A.456880
City CLEARWATER	State FL	Zip Code 33765-1701
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 100.00
Name of Employer (for Individual) REAL ESTATE	Occupation (for Individual) SELF EMPLOYED	<input type="checkbox"/> Memo Item CONTRIBUTION
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 550.00	

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name B. LITTLE, DAVID, , ,		Date of Receipt M M M / D D D / Y Y Y Y Y Y 10 / 27 / 2016
Mailing Address 1734 CASEY JONES CT.		Transaction ID : SA11A.456881
City CLEARWATER	State FL	Zip Code 33765-1701
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 100.00
Name of Employer (for Individual) REAL ESTATE	Occupation (for Individual) SELF EMPLOYED	<input type="checkbox"/> Memo Item CONTRIBUTION
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 550.00	

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name C. LITTLE, DAVID, , ,		Date of Receipt M M M / D D D / Y Y Y Y Y Y 10 / 31 / 2016
Mailing Address 1734 CASEY JONES CT.		Transaction ID : SA11A.464251
City CLEARWATER	State FL	Zip Code 33765-1701
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 250.00
Name of Employer (for Individual) REAL ESTATE	Occupation (for Individual) SELF EMPLOYED	<input type="checkbox"/> Memo Item CONTRIBUTION
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Aggregate Year-to-Date ▼ 550.00	

SUBTOTAL of Receipts This Page (optional).....▶	450.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2178 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
Team Ryan

A. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
LITTLE, RICHARD, , ,

Mailing Address **911 KAGAWA STREET**

City PACIFIC PALISADES	State CA	Zip Code 90272-3834
----------------------------------	--------------------	-------------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
--	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1650.00

Date of Receipt
10 / 31 / 2016

Transaction ID : SA11A.464481

Amount of Each Receipt this Period
250.00

Memo Item
CONTRIBUTION

B. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
LITTLE, RICHARD, , ,

Mailing Address **911 KAGAWA STREET**

City PACIFIC PALISADES	State CA	Zip Code 90272-3834
----------------------------------	--------------------	-------------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
--	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1650.00

Date of Receipt
10 / 31 / 2016

Transaction ID : SA11A.464499

Amount of Each Receipt this Period
250.00

Memo Item
CONTRIBUTION

C. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
LITTLE, RICHARD, , ,

Mailing Address **911 KAGAWA STREET**

City PACIFIC PALISADES	State CA	Zip Code 90272-3834
----------------------------------	--------------------	-------------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
--	---

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
1650.00

Date of Receipt
11 / 02 / 2016

Transaction ID : SA11A.469968

Amount of Each Receipt this Period
250.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	750.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2179 OF 4311
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/>	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. LITTON, BEVERLY, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1433 CEDAR POST LANE #5

City HOUSTON	State TX	Zip Code 77055-4340
-----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) SPRING BRANCH ISD	Occupation (for Individual) CAREER & TECHNICAL ED. COUNSE
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
210.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	27	/	2016

Transaction ID : SA11A.453833

Amount of Each Receipt this Period
35.00

Memo Item
CONTRIBUTION

B. LITTON, BEVERLY, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1433 CEDAR POST LANE #5

City HOUSTON	State TX	Zip Code 77055-4340
-----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) SPRING BRANCH ISD	Occupation (for Individual) CAREER & TECHNICAL ED. COUNSE
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
210.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	04	/	2016

Transaction ID : SA11A.472676

Amount of Each Receipt this Period
35.00

Memo Item
CONTRIBUTION

C. LITZINGER, VERNON, E., MR.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 13238 FOUNTAIN HEAD ROAD

City HAGERSTOWN	State MD	Zip Code 21742-2611
--------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) PACKAGING SERVICES	Occupation (for Individual) PRESIDENT
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
350.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	31	/	2016

Transaction ID : SA11A.459077

Amount of Each Receipt this Period
100.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	170.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2180 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. LIU, LEE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3086 EDGEWOOD ROAD
 City CEDAR RAPIDS State IA Zip Code 52411-8502
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 11 / 06 / 2016
Transaction ID : SA11A.480895
 Amount of Each Receipt this Period 500.00
 Memo Item CONTRIBUTION

B. LIYANA, ANDREW, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 102 LOCH LEVEN WAY
 City HENDERSONVILLE State TN Zip Code 37075-7702
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) DUPONT Occupation (for Individual) SITE SUPERINTENDENT
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 325.00

Date of Receipt 10 / 29 / 2016
Transaction ID : SA11A.460981
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

C. LIYANA, ANDREW, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 102 LOCH LEVEN WAY
 City HENDERSONVILLE State TN Zip Code 37075-7702
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) DUPONT Occupation (for Individual) SITE SUPERINTENDENT
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 325.00

Date of Receipt 10 / 31 / 2016
Transaction ID : SA11A.463473
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	575.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2181 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. LIYANA, ANDREW, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 102 LOCH LEVEN WAY

City HENDERSONVILLE	State TN	Zip Code 37075-7702
------------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) DUPONT	Occupation (for Individual) SITE SUPERINTENDENT
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
325.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	03	/	2016

Transaction ID : SA11A.468837

Amount of Each Receipt this Period
50.00

Memo Item CONTRIBUTION

B. LIYANA, ANDREW, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 102 LOCH LEVEN WAY

City HENDERSONVILLE	State TN	Zip Code 37075-7702
------------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) DUPONT	Occupation (for Individual) SITE SUPERINTENDENT
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
325.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	04	/	2016

Transaction ID : SA11A.471811

Amount of Each Receipt this Period
50.00

Memo Item CONTRIBUTION

C. LIYANA, ANDREW, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 102 LOCH LEVEN WAY

City HENDERSONVILLE	State TN	Zip Code 37075-7702
------------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) DUPONT	Occupation (for Individual) SITE SUPERINTENDENT
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
325.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	07	/	2016

Transaction ID : SA11A.480101

Amount of Each Receipt this Period
25.00

Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	125.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2182 OF 4311
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. LLOYD, FRED, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 37245 VALGIO DR

City CALIMESA	State CA	Zip Code 92320-1481
------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) SELF EMPLOYED	Occupation (for Individual) PHYSICIAN
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		26		2016

Transaction ID : SA11A.451393

Amount of Each Receipt this Period
250.00

Memo Item
CONTRIBUTION

B. LLOYD, FRED, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 37245 VALGIO DR

City CALIMESA	State CA	Zip Code 92320-1481
------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) SELF EMPLOYED	Occupation (for Individual) PHYSICIAN
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		26		2016

Transaction ID : SA11A.451395

Amount of Each Receipt this Period
250.00

Memo Item
CONTRIBUTION

C. LLOYD, ROSALIE, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1610 MANOR DRIVE NE

City CULLMAN	State AL	Zip Code 35055-2140
-----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
495.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		20		2016

Transaction ID : SA11A.444759

Amount of Each Receipt this Period
25.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	525.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2183 OF 4311
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
LLOYD, ROSALIE, , ,

Mailing Address **1610 MANOR DRIVE NE**

City CULLMAN	State AL	Zip Code 35055-2140
------------------------	--------------------	-------------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
--	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **495.00**

Date of Receipt
10 / 28 / 2016

Transaction ID : SA11A.456396

Amount of Each Receipt this Period
25.00

Memo Item CONTRIBUTION

B. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
LLOYD, ROSALIE, , ,

Mailing Address **1610 MANOR DRIVE NE**

City CULLMAN	State AL	Zip Code 35055-2140
------------------------	--------------------	-------------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
--	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **495.00**

Date of Receipt
11 / 02 / 2016

Transaction ID : SA11A.467149

Amount of Each Receipt this Period
35.00

Memo Item CONTRIBUTION

C. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
LLOYD, ROSALIE, , ,

Mailing Address **1610 MANOR DRIVE NE**

City CULLMAN	State AL	Zip Code 35055-2140
------------------------	--------------------	-------------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
--	---

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼ **495.00**

Date of Receipt
11 / 02 / 2016

Transaction ID : SA11A.467150

Amount of Each Receipt this Period
35.00

Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	95.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2184 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
-----------------------------	-----------------------------	-----------------------------

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NAME OF COMMITTEE (In Full)
Team Ryan

A. LLOYD, ROSALIE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1610 MANOR DRIVE NE
 City CULLMAN State AL Zip Code 35055-2140
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 495.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 04 / 2016
Transaction ID : SA11A.470596
 Amount of Each Receipt this Period
 25.00
 Memo Item
 CONTRIBUTION

B. LLOYD, ROSALIE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1610 MANOR DRIVE NE
 City CULLMAN State AL Zip Code 35055-2140
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 495.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 04 / 2016
Transaction ID : SA11A.470600
 Amount of Each Receipt this Period
 25.00
 Memo Item
 CONTRIBUTION

C. LLOYD, ROSALIE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1610 MANOR DRIVE NE
 City CULLMAN State AL Zip Code 35055-2140
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 495.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 04 / 2016
Transaction ID : SA11A.479636
 Amount of Each Receipt this Period
 25.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶
TOTAL This Period (last page this line number only)..... ▶

75.00

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2185 OF 4311
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. LOCKMILLER, DEANNA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2530 SR 311
 City CLOVIS State NM Zip Code 88101-1227
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 399.00

Date of Receipt 10 / 20 / 2016
Transaction ID : SA11A.442417
 Amount of Each Receipt this Period 54.00
 Memo Item CONTRIBUTION

B. LOCKMILLER, DEANNA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2530 SR 311
 City CLOVIS State NM Zip Code 88101-1227
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 399.00

Date of Receipt 11 / 04 / 2016
Transaction ID : SA11A.471989
 Amount of Each Receipt this Period 54.00
 Memo Item CONTRIBUTION

C. LODGE, DAVID, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 219 LOCH LOMOND RD
 City RANCHO MIRAGE State CA Zip Code 92270-5604
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 10 / 31 / 2016
Transaction ID : SA11A.463576
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 208.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2186 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
Team Ryan

A. LOEFFLER, DONALD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 22120 WORCESTER DR.
 City NOVI State MI Zip Code 48374-3957
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 26 / 2016
Transaction ID : SA11A.451100
 Amount of Each Receipt this Period
 50.00
 Memo Item
 CONTRIBUTION

B. LOEFFLER, DONALD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 22120 WORCESTER DR.
 City NOVI State MI Zip Code 48374-3957
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 04 / 2016
Transaction ID : SA11A.471405
 Amount of Each Receipt this Period
 50.00
 Memo Item
 CONTRIBUTION

C. LOFMARK, JOYCE, H., MS.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 38 BROOKHOUSE DRIVE
 M
 City MARBLEHEAD State MA Zip Code 01945-1611
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 225.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 24 / 2016
Transaction ID : SA11A.445809
 Amount of Each Receipt this Period
 25.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	125.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2187 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
Team Ryan

A. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
LOFTUS, SHEILA, M., ,

Mailing Address 240 COUNTY ROAD 100 E

City IVESDALE	State IL	Zip Code 61851-9714
------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
433.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 26 / 2016

Transaction ID : SA11A.447686

Amount of Each Receipt this Period
53.00

Memo Item CONTRIBUTION

B. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
LOFTUS, SHEILA, M., ,

Mailing Address 240 COUNTY ROAD 100 E

City IVESDALE	State IL	Zip Code 61851-9714
------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
433.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 01 / 2016

Transaction ID : SA11A.461593

Amount of Each Receipt this Period
55.00

Memo Item CONTRIBUTION

C. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
LOFTUS, SHEILA, M., ,

Mailing Address 240 COUNTY ROAD 100 E

City IVESDALE	State IL	Zip Code 61851-9714
------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
433.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 08 / 2016

Transaction ID : SA11A.467953

Amount of Each Receipt this Period
50.00

Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	158.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2188 OF 4311
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. LOGAN, C., , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 17513 COUNTY ROAD 311

City HARROD	State OH	Zip Code 45850-9509
FEC ID number of contributing federal political committee. C		
Name of Employer (for Individual) NONE		Occupation (for Individual) RETIRED
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 337.00

Date of Receipt
10 / 21 / 2016
Transaction ID : SA11A.444094
 Amount of Each Receipt this Period
25.00
 Memo Item
 CONTRIBUTION

B. LOGAN, C., , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 17513 COUNTY ROAD 311

City HARROD	State OH	Zip Code 45850-9509
FEC ID number of contributing federal political committee. C		
Name of Employer (for Individual) NONE		Occupation (for Individual) RETIRED
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 337.00

Date of Receipt
10 / 25 / 2016
Transaction ID : SA11A.452218
 Amount of Each Receipt this Period
30.00
 Memo Item
 CONTRIBUTION

C. LOGAN, C., , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 17513 COUNTY ROAD 311

City HARROD	State OH	Zip Code 45850-9509
FEC ID number of contributing federal political committee. C		
Name of Employer (for Individual) NONE		Occupation (for Individual) RETIRED
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		Aggregate Year-to-Date ▼ 337.00

Date of Receipt
10 / 25 / 2016
Transaction ID : SA11A.452222
 Amount of Each Receipt this Period
30.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	85.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2189 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
Team Ryan

A. LOGAN, C., , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 17513 COUNTY ROAD 311

City HARROD	State OH	Zip Code 45850-9509
----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
337.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 28 / 2016

Transaction ID : SA11A.461303

Amount of Each Receipt this Period
25.00

Memo Item CONTRIBUTION

B. LOGAN, C., , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 17513 COUNTY ROAD 311

City HARROD	State OH	Zip Code 45850-9509
----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
337.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 28 / 2016

Transaction ID : SA11A.461305

Amount of Each Receipt this Period
25.00

Memo Item CONTRIBUTION

C. LOGAN, DEAN, A., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 233 CIRCLE DRIVE

City TOWER LAKES	State IL	Zip Code 60010-1058
---------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
300.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 21 / 2016

Transaction ID : SA11A.443587

Amount of Each Receipt this Period
300.00

Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	350.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2190 OF 4311
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. LOHMAN, JACK, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 118 MARSH WALK

City HOLDEN BEACH	State NC	Zip Code 28462-1712
----------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
350.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	26	/	2016

Transaction ID : SA11A.454434

Amount of Each Receipt this Period
250.00

Memo Item CONTRIBUTION

B. LOHMAN, JACK, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 118 MARSH WALK

City HOLDEN BEACH	State NC	Zip Code 28462-1712
----------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
350.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	07	/	2016

Transaction ID : SA11A.475756

Amount of Each Receipt this Period
50.00

Memo Item CONTRIBUTION

C. LOHMAN, JACK, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 118 MARSH WALK

City HOLDEN BEACH	State NC	Zip Code 28462-1712
----------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
350.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	07	/	2016

Transaction ID : SA11A.475764

Amount of Each Receipt this Period
50.00

Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	350.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2191 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. LOHNES, JOHN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3459 S 143RD ST EAST
 City WICHITA State KS Zip Code 67232-9528
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) WICHITA RAD GROUP Occupation (for Individual) PHYSICIAN
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 11 / 06 / 2016
Transaction ID : SA11A.476924
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

B. LOHR, DAVID, G., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 35 WALTS WAY
 City CHEPACHET State RI Zip Code 02814-1312
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 275.00

Date of Receipt 11 / 04 / 2016
Transaction ID : SA11A.467552
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

C. LONDAL, GERALD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address P.O. BOX 6
 City WALLOON LAKE State MI Zip Code 49796-0006
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 10 / 20 / 2016
Transaction ID : SA11A.442240
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 450.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2192 OF 4311
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. LONDAL, GERALD, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address P.O. BOX 6

City WALLOON LAKE State MI Zip Code 49796-0006

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt 11 / 04 / 2016
Transaction ID : SA11A.473159

Amount of Each Receipt this Period 100.00

Memo Item CONTRIBUTION

B. LONG, BARRY, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 3405 CLEARWATER DR

City PRESCOTT State AZ Zip Code 86305-7191

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt 10 / 26 / 2016
Transaction ID : SA11A.450528

Amount of Each Receipt this Period 250.00

Memo Item CONTRIBUTION

C. LONG, DAVID, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 2191 MOREING ROAD

City STOCKTON State CA Zip Code 95204-3863

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED

Receipt For: Primary General Other (specify)

Aggregate Year-to-Date ▼ 500.00

Date of Receipt 10 / 20 / 2016
Transaction ID : SA11A.441937

Amount of Each Receipt this Period 250.00

Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 600.00

TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2193 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. LONG, DAVID, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2191 MOREING ROAD
 City STOCKTON State CA Zip Code 95204-3863
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 10 / 20 / 2016
Transaction ID : SA11A.441938
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

B. LONG, GEORGE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 18314 EDWARDS OAKS
 City SAN ANTONIO State TX Zip Code 78259-3532
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt 10 / 31 / 2016
Transaction ID : SA11A.459151
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

C. LONG, GEORGE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 18314 EDWARDS OAKS
 City SAN ANTONIO State TX Zip Code 78259-3532
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt 11 / 04 / 2016
Transaction ID : SA11A.471239
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 750.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2194 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. LONG, GODFREY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 11 SPRING KNOLL DRIVE
 City CINCINNATI State OH Zip Code 45227-3851
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 02 / 2016
Transaction ID : SA11A.466446
 Amount of Each Receipt this Period
 50.00
 Memo Item
 CONTRIBUTION

B. LONG, GODFREY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 11 SPRING KNOLL DRIVE
 City CINCINNATI State OH Zip Code 45227-3851
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 02 / 2016
Transaction ID : SA11A.466447
 Amount of Each Receipt this Period
 50.00
 Memo Item
 CONTRIBUTION

C. LONG, GODFREY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 11 SPRING KNOLL DRIVE
 City CINCINNATI State OH Zip Code 45227-3851
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 02 / 2016
Transaction ID : SA11A.466462
 Amount of Each Receipt this Period
 50.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	150.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2195 OF 4311
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. LONG, GODFREY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 11 SPRING KNOLL DRIVE
 City CINCINNATI State OH Zip Code 45227-3851
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt
 11 / 02 / 2016
Transaction ID : SA11A.466463
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

B. LONG, JEFFRY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 77 WOOD DUCK DRIVE
 City SANGER State CA Zip Code 93657-9057
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt
 10 / 27 / 2016
Transaction ID : SA11A.453089
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

C. LONG, JEFFRY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 77 WOOD DUCK DRIVE
 City SANGER State CA Zip Code 93657-9057
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt
 10 / 27 / 2016
Transaction ID : SA11A.453090
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶ 150.00
TOTAL This Period (last page this line number only).....▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2196 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. LONG, JEFFRY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 77 WOOD DUCK DRIVE
 City SANGER State CA Zip Code 93657-9057
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 10 / 27 / 2016
Transaction ID : SA11A.453094
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

B. LONG, JEFFRY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 77 WOOD DUCK DRIVE
 City SANGER State CA Zip Code 93657-9057
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 10 / 27 / 2016
Transaction ID : SA11A.453096
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

C. LONG, MARY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 309 FRANKLIN STREET
 City ALEXANDRIA State VA Zip Code 22314-4120
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) M B LONG & ASSOCIATES, PLLC Occupation (for Individual) ATTORNEY
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt 11 / 03 / 2016
Transaction ID : SA11A.468662
 Amount of Each Receipt this Period 1000.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	1100.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2197 OF 4311
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. LONG, MICKEY, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address **PO BOX 1270**

City **MIDLAND** State **TX** Zip Code **79702-1270**

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) **WESTEX WELL SERVICES** Occupation (for Individual) **PRESIDENT**

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **100000.00**

Date of Receipt **11 / 11 / 2016**

Transaction ID : SA11A.468435

Amount of Each Receipt this Period **10000.00**

Memo Item CONTRIBUTION

B. LONG, SHARRY, , MS.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address **4876 STATE ROUTE 350**

City **LEBANON** State **OH** Zip Code **45036-9381**

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) **NONE** Occupation (for Individual) **RETIRED**

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **330.00**

Date of Receipt **10 / 31 / 2016**

Transaction ID : SA11A.458452

Amount of Each Receipt this Period **25.00**

Memo Item CONTRIBUTION

C. LONG, SHARRY, , MS.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address **4876 STATE ROUTE 350**

City **LEBANON** State **OH** Zip Code **45036-9381**

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) **NONE** Occupation (for Individual) **RETIRED**

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **330.00**

Date of Receipt **11 / 02 / 2016**

Transaction ID : SA11A.466566

Amount of Each Receipt this Period **25.00**

Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... **10050.00**

TOTAL This Period (last page this line number only).....

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2198 OF 4311
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
Team Ryan

A. LONG, THAD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2880 BALMORAL RD
 City MOUNTAIN BRK State AL Zip Code 35223-1236
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) ATTORNEY
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 10 / 31 / 2016
Transaction ID : SA11A.457872
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

B. LONGENECKER, ROBERT, J., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 8 GAELSONG LANE
 City WYOMISSING State PA Zip Code 19610-3120
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) INFORMATION REQUESTED PER BEST EFFORTS Occupation (for Individual) INFORMATION REQUESTED PER BE
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 10 / 20 / 2016
Transaction ID : SA11A.433480
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

C. LONGHURST, GLEN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1363 NORTH 3700 WEST
 City CEDAR CITY State UT Zip Code 84721-8385
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 230.00

Date of Receipt 10 / 30 / 2016
Transaction ID : SA11A.459457
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	400.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2199 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. LONGHURST, GLEN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1363 NORTH 3700 WEST
 City CEDAR CITY State UT Zip Code 84721-8385
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 230.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 30 / 2016
Transaction ID : SA11A.459473
 Amount of Each Receipt this Period
 50.00
 Memo Item
 CONTRIBUTION

B. LONGHURST, GLEN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1363 NORTH 3700 WEST
 City CEDAR CITY State UT Zip Code 84721-8385
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 230.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 30 / 2016
Transaction ID : SA11A.459474
 Amount of Each Receipt this Period
 50.00
 Memo Item
 CONTRIBUTION

C. LOOP, STEPHEN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 9637 KAMPTON DR
 City BOISE State ID Zip Code 83704-4128
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) FULL CIRCLE ENTERPRISES Occupation (for Individual) CONSULTANT - ENGINEERING, HISTO
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 22 / 2016
Transaction ID : SA11A.446650
 Amount of Each Receipt this Period
 50.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶ 150.00
TOTAL This Period (last page this line number only).....▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2200 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
Team Ryan

A. LOPEZ, LILLIAM, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1581 BRICKELL AVENUE
APT 1001

City MIAMI	State FL	Zip Code 33129-1215
---------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) EISNERAMPER LLP	Occupation (for Individual) CPA
--	------------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 04 / 2016

Transaction ID : SA11A.471657

Amount of Each Receipt this Period
50.00

Memo Item
CONTRIBUTION

B. LOPEZ, LILLIAM, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1581 BRICKELL AVENUE
APT 1001

City MIAMI	State FL	Zip Code 33129-1215
---------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) EISNERAMPER LLP	Occupation (for Individual) CPA
--	------------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 07 / 2016

Transaction ID : SA11A.475501

Amount of Each Receipt this Period
50.00

Memo Item
CONTRIBUTION

C. LOPEZ, PEDRO, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 3311 PONCE DE LEON BOULEVARD

City CORAL GABLES	State FL	Zip Code 33134-7210
----------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) INFORMATION REQUESTED PER BEST EFFORTS	Occupation (for Individual) INFORMATION REQUESTED PER BES
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 24 / 2016

Transaction ID : SA11A.443957

Amount of Each Receipt this Period
50.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	150.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2201 OF 4311
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. LOPEZ, PEDRO, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 3311 PONCE DE LEON BOULEVARD

City CORAL GABLES	State FL	Zip Code 33134-7210
----------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) INFORMATION REQUESTED PER BEST EFFORTS	Occupation (for Individual) INFORMATION REQUESTED PER BE
---	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
11		01		2016

Transaction ID : SA11A.461758

Amount of Each Receipt this Period
50.00

Memo Item
CONTRIBUTION

B. LORAIN, STEVE, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 4017 ARAGON WAY

City RANCHO CORDOVA	State CA	Zip Code 95742-8005
------------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) SELF-EMPLOYED	Occupation (for Individual) CPA
--	------------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
10		31		2016

Transaction ID : SA11A.463793

Amount of Each Receipt this Period
100.00

Memo Item
CONTRIBUTION

C. LOTHIAN, JUDITH, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 650 76 ST

City BROOKLYN	State NY	Zip Code 11209-3326
------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) SETON HALL UNIVERSITY	Occupation (for Individual) PROFESSOR
--	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
600.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
10		21		2016

Transaction ID : SA11A.444555

Amount of Each Receipt this Period
100.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	250.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2202 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. LOTHIAN, JUDITH, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 650 76 ST
 City BROOKLYN State NY Zip Code 11209-3326
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SETON HALL UNIVERSITY Occupation (for Individual) PROFESSOR
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 600.00

Date of Receipt 11 / 04 / 2016
Transaction ID : SA11A.472100
 Amount of Each Receipt this Period 100.00
 Memo Item
 CONTRIBUTION

B. LOTITO, MICHAEL, J., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 95 DEER PARK AVENUE
 City SAN RAFAEL State CA Zip Code 94901-2310
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) LITTLER Occupation (for Individual) LAWYER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 350.00

Date of Receipt 10 / 24 / 2016
Transaction ID : SA11A.446097
 Amount of Each Receipt this Period 100.00
 Memo Item
 CONTRIBUTION

C. LOTITO, MICHAEL, J., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 95 DEER PARK AVENUE
 City SAN RAFAEL State CA Zip Code 94901-2310
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) LITTLER Occupation (for Individual) LAWYER
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 350.00

Date of Receipt 10 / 24 / 2016
Transaction ID : SA11A.446100
 Amount of Each Receipt this Period 100.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	300.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2203 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. LOTT, THOMAS, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5334 HARRIS WOODS TRACE
 City FULSHEAR State TX Zip Code 77441-4381
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) APACHE Occupation (for Individual) GEOLOGIST
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1100.00

Date of Receipt 10 / 24 / 2016
Transaction ID : SA11A.446011
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

B. LOTT, THOMAS, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5334 HARRIS WOODS TRACE
 City FULSHEAR State TX Zip Code 77441-4381
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) APACHE Occupation (for Individual) GEOLOGIST
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1100.00

Date of Receipt 10 / 24 / 2016
Transaction ID : SA11A.446018
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

C. LOTT, THOMAS, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5334 HARRIS WOODS TRACE
 City FULSHEAR State TX Zip Code 77441-4381
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) APACHE Occupation (for Individual) GEOLOGIST
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1100.00

Date of Receipt 10 / 24 / 2016
Transaction ID : SA11A.446208
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	300.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2204 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. LOTT, THOMAS, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5334 HARRIS WOODS TRACE
 City FULSHEAR State TX Zip Code 77441-4381
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) APACHE Occupation (for Individual) GEOLOGIST
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1100.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 31 / 2016
Transaction ID : SA11A.458181
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION

B. LOTT, THOMAS, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5334 HARRIS WOODS TRACE
 City FULSHEAR State TX Zip Code 77441-4381
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) APACHE Occupation (for Individual) GEOLOGIST
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1100.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 31 / 2016
Transaction ID : SA11A.458184
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION

C. LOTT, THOMAS, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5334 HARRIS WOODS TRACE
 City FULSHEAR State TX Zip Code 77441-4381
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) APACHE Occupation (for Individual) GEOLOGIST
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1100.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 04 / 2016
Transaction ID : SA11A.472652
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	300.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2205 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. LOUD, HUGH, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO BOX 11660
 City ASPEN State CO Zip Code 81612-9509
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 2000.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 21 / 2016
Transaction ID : SA11A.447169
 Amount of Each Receipt this Period
 1000.00
 Memo Item
 CONTRIBUTION

B. LOUD, HUGH, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO BOX 11660
 City ASPEN State CO Zip Code 81612-9509
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 2000.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 21 / 2016
Transaction ID : SA11A.447170
 Amount of Each Receipt this Period
 1000.00
 Memo Item
 CONTRIBUTION

C. LOUIE, WINDSOR, C., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address P. O. BOX 1364
 City TUSTIN State CA Zip Code 92781-1364
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 700.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 31 / 2016
Transaction ID : SA11A.463849
 Amount of Each Receipt this Period
 50.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	2050.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2206 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. LOUIE, WINDSOR, C., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address P. O. BOX 1364
 City TUSTIN State CA Zip Code 92781-1364
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 700.00

Date of Receipt 11 / 02 / 2016
Transaction ID : SA11A.465775
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

B. LOURY, MARK, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 926 HAZEL CT
 City FORT COLLINS State CO Zip Code 80526-3911
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) AO Occupation (for Individual) SURGEON
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 11 / 01 / 2016
Transaction ID : SA11A.462785
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

C. LOVE, RICHARD, D., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3212 W 83RD TERRACE
 City LEAWOOD State KS Zip Code 66206-1304
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 10 / 20 / 2016
Transaction ID : SA11A.433420
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 450.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2207 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
Team Ryan

A. LOVEDAY, WILLIAM, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 601 FALLEN LEAF WAY
 City INCLINE VILLAGE State NV Zip Code 89451-8111
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 31 / 2016
Transaction ID : SA11A.457278
 Amount of Each Receipt this Period
 500.00
 Memo Item
 CONTRIBUTION

B. LOVELACE, LORRAINE, , MS.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4974 RIO VERDE DR
 City SAN JOSE State CA Zip Code 95118-2303
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 800.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 04 / 2016
Transaction ID : SA11A.472106
 Amount of Each Receipt this Period
 50.00
 Memo Item
 CONTRIBUTION

C. LOVERN, R., W., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 629 IDLEWYLD DRIVE
 City FORT LAUDERDALE State FL Zip Code 33301-2735
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) INFORMATION REQUESTED PER BEST EFFORTS Occupation (for Individual) INFORMATION REQUESTED PER BEST EFFORTS
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 28 / 2016
Transaction ID : SA11A.454817
 Amount of Each Receipt this Period
 1000.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	1550.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2208 OF 4311
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. LOVO, PAULA, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 5580 LA CUMBRE ROAD

City SOMIS	State CA	Zip Code 93066-9784
---------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
330.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	04	/	2016

Transaction ID : SA11A.474225

Amount of Each Receipt this Period
50.00

Memo Item
CONTRIBUTION

B. LOW, LAWANA, L., ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 2740 N MAYFAIR AVE

City SPRINGFIELD	State MO	Zip Code 65803-5084
---------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) PRIME INC	Occupation (for Individual) OWNER
--	--------------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
50000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	28	/	2016

Transaction ID : SA11A.449689

Amount of Each Receipt this Period
50000.00

Memo Item
CONTRIBUTION

C. LOW, ROBERT, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 2740 N MAYFAIR AVE

City SPRINGFIELD	State MO	Zip Code 65803-5084
---------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) PRIME INC	Occupation (for Individual) OWNER
--	--------------------------------------

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
50000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	28	/	2016

Transaction ID : SA11A.449688

Amount of Each Receipt this Period
50000.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	100050.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2209 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. LOWE, THOMAS, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2630 W LAFAYETTE RD
 City EXCELSIOR State MN Zip Code 55331-9417
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt 11 / 04 / 2016
Transaction ID : SA11A.471629
 Amount of Each Receipt this Period 500.00
 Memo Item CONTRIBUTION

B. LOWELL, MELVIN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1505 W. 5650 N.
 City SAINT GEORGE State UT Zip Code 84770-5929
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 376.00

Date of Receipt 11 / 04 / 2016
Transaction ID : SA11A.473274
 Amount of Each Receipt this Period 42.00
 Memo Item CONTRIBUTION

C. LOWENSTEIN, CHARLES, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1006 VILLA DRIVE
 City MELBOURNE State FL Zip Code 32940-7038
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) KAPLAN UNIVERSITY Occupation (for Individual) EDITOR
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 373.00

Date of Receipt 10 / 31 / 2016
Transaction ID : SA11A.458604
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	592.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2210 OF 4311
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. LOWENSTEIN, CHARLES, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1006 VILLA DRIVE

City MELBOURNE	State FL	Zip Code 32940-7038
-------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) KAPLAN UNIVERSITY	Occupation (for Individual) EDITOR
--	---------------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
373.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		31		2016

Transaction ID : SA11A.458626

Amount of Each Receipt this Period
50.00

Memo Item CONTRIBUTION

B. LOWENSTEIN, CHARLES, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1006 VILLA DRIVE

City MELBOURNE	State FL	Zip Code 32940-7038
-------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) KAPLAN UNIVERSITY	Occupation (for Individual) EDITOR
--	---------------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
373.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11		07		2016

Transaction ID : SA11A.475977

Amount of Each Receipt this Period
27.00

Memo Item CONTRIBUTION

C. LOWRANCE, DAN, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 2008 FOUR OAKS LN

City FORT WORTH	State TX	Zip Code 76107-3614
--------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
1000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11		03		2016

Transaction ID : SA11A.465235

Amount of Each Receipt this Period
1000.00

Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	1077.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2211 OF 4311
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. LOWRY, SHARON, A., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 10668 CHESTNUT HILL LN
 City DAYTON State OH Zip Code 45458-3599
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 3000.00

Date of Receipt **11 / 04 / 2016**
Transaction ID : SA11A.473009
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

B. LOWRY, SHARON, A., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 10668 CHESTNUT HILL LN
 City DAYTON State OH Zip Code 45458-3599
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 3000.00

Date of Receipt **11 / 07 / 2016**
Transaction ID : SA11A.475031
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

C. LOYND, RICHARD, B., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 19 RANDALL DRIVE
 City SHORT HILLS State NJ Zip Code 07078-1957
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) INFORMATION REQUESTED PER BEST EFFORTS Occupation (for Individual) INFORMATION REQUESTED PER BEST EFFORTS
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt **10 / 31 / 2016**
Transaction ID : SA11A.457293
 Amount of Each Receipt this Period 1000.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 1200.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2212 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. LUCAS, ALFRED, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3532 BELLE MEADE WAY
 City BIRMINGHAM State AL Zip Code 35223-1522
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) TAMERON AUTOMOTIVE GROUP INC Occupation (for Individual) CONTROLLER
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 300.00

Date of Receipt 10 / 28 / 2016
Transaction ID : SA11A.455850
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

B. LUCAS, CHRISTINE, S., MISS,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 821 VAUCLAIN RD
 City BRYN MAWR State PA Zip Code 19010-2113
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) GSK Occupation (for Individual) IT MANAGER
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 1850.00

Date of Receipt 10 / 28 / 2016
Transaction ID : SA11A.456099
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

C. LUCAS, DAVID, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 20206 SAND CREEK DRIVE
 City JORDAN State MN Zip Code 55352-9551
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SCOTT EQUIPMENT COMPANY Occupation (for Individual) PRESIDENT
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 500.00

Date of Receipt 10 / 28 / 2016
Transaction ID : SA11A.455806
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶ 600.00
TOTAL This Period (last page this line number only).....▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 2213 OF 4311
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Team Ryan

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name A. LUCAS, DAVID, , ,		Date of Receipt MM / DD / YYYY 10 / 28 / 2016
Mailing Address 20206 SAND CREEK DRIVE		Transaction ID : SA11A.455828
City JORDAN	State MN	Zip Code 55352-9551
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 250.00
Name of Employer (for Individual) SCOTT EQUIPMENT COMPANY	Occupation (for Individual) PRESIDENT	<input type="checkbox"/> Memo Item CONTRIBUTION
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00	

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name B. LUCE, ROBERT, , ,		Date of Receipt MM / DD / YYYY 10 / 23 / 2016
Mailing Address 160 WORDSWORTH ROAD		Transaction ID : SA11A.446441
City BRICK	State NJ	Zip Code 08724-0734
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 18.00
Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED	<input type="checkbox"/> Memo Item CONTRIBUTION
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 218.00	

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name C. LUCE, ROBERT, , ,		Date of Receipt MM / DD / YYYY 10 / 23 / 2016
Mailing Address 160 WORDSWORTH ROAD		Transaction ID : SA11A.446453
City BRICK	State NJ	Zip Code 08724-0734
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 25.00
Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED	<input type="checkbox"/> Memo Item CONTRIBUTION
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Aggregate Year-to-Date ▼ 218.00	

SUBTOTAL of Receipts This Page (optional).....	293.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2214 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
Team Ryan

A. LUCE, ROBERT, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 160 WORDSWORTH ROAD
 City BRICK State NJ Zip Code 08724-0734
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 218.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 30 / 2016
Transaction ID : SA11A.460199
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

B. LUCE, ROBERT, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 160 WORDSWORTH ROAD
 City BRICK State NJ Zip Code 08724-0734
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 218.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 04 / 2016
Transaction ID : SA11A.471172
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

C. LUCIDO, LARRY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 9939 ONTARIO LN.
 City DALLAS State TX Zip Code 75220-1969
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 700.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 25 / 2016
Transaction ID : SA11A.447864
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	150.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2215 OF 4311
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
LUCIDO, LARRY, , ,

Mailing Address **9939 ONTARIO LN.**

City DALLAS	State TX	Zip Code 75220-1969
-----------------------	--------------------	-------------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
--	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
700.00

Date of Receipt
10 / 25 / 2016

Transaction ID : SA11A.447878

Amount of Each Receipt this Period
100.00

Memo Item CONTRIBUTION

B. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
LUCIDO, LARRY, , ,

Mailing Address **9939 ONTARIO LN.**

City DALLAS	State TX	Zip Code 75220-1969
-----------------------	--------------------	-------------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
--	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
700.00

Date of Receipt
10 / 25 / 2016

Transaction ID : SA11A.447880

Amount of Each Receipt this Period
100.00

Memo Item CONTRIBUTION

C. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
LUCIDO, LARRY, , ,

Mailing Address **9939 ONTARIO LN.**

City DALLAS	State TX	Zip Code 75220-1969
-----------------------	--------------------	-------------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
--	---

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
700.00

Date of Receipt
10 / 30 / 2016

Transaction ID : SA11A.459812

Amount of Each Receipt this Period
100.00

Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	300.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 2216 OF 4311
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. LUCIDO, LARRY, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 9939 ONTARIO LN.
City DALLAS State TX Zip Code 75220-1969
FEC ID number of contributing federal political committee. **C**
Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 700.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
10 / 30 / 2016
Transaction ID : SA11A.459817
Amount of Each Receipt this Period
100.00
 Memo Item CONTRIBUTION

B. LUCIDO, LARRY, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 9939 ONTARIO LN.
City DALLAS State TX Zip Code 75220-1969
FEC ID number of contributing federal political committee. **C**
Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 700.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
11 / 04 / 2016
Transaction ID : SA11A.474068
Amount of Each Receipt this Period
100.00
 Memo Item CONTRIBUTION

C. LUCKNER, CATHERINE, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 5041 SANDY BEACH AVE.
City SARASOTA State FL Zip Code 34242-1533
FEC ID number of contributing federal political committee. **C**
Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
Receipt For: Primary General Other (specify)
Aggregate Year-to-Date ▼ 250.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
10 / 29 / 2016
Transaction ID : SA11A.461202
Amount of Each Receipt this Period
250.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	450.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2217 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. LUKACS, LASZLO, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 24700 GRAND TRAVERSE AV
 City BROWNSTOWN State MI Zip Code 48134-8055
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt 11 / 04 / 2016
Transaction ID : SA11A.473192
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

B. LUKETICH, JAMES, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 30 SWEET WATER LANE
 City PITTSBURGH State PA Zip Code 15238-1901
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) UPMC Occupation (for Individual) SURGEON
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 11 / 02 / 2016
Transaction ID : SA11A.470242
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

C. LUMET, AMY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 447 N. DOHENY DRIVE # 205
 City BEVERLY HILLS State CA Zip Code 90210-3999
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) AMY LUMET Occupation (for Individual) PRODUCER
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 225.00

Date of Receipt 11 / 01 / 2016
Transaction ID : SA11A.462788
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	400.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2218 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
Team Ryan

A. LUMING, HENRY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 400 W. BUTTERFIELD RD
 APT 757
 City ELMHURST State IL Zip Code 60126-5907
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 232.00

Date of Receipt 10 / 25 / 2016
Transaction ID : SA11A.448324
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

B. LUMING, HENRY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 400 W. BUTTERFIELD RD
 APT 757
 City ELMHURST State IL Zip Code 60126-5907
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 232.00

Date of Receipt 10 / 25 / 2016
Transaction ID : SA11A.448339
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

C. LUNATO, JOHN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 6180 TAYLOR RD
 City PAINESVILLE State OH Zip Code 44077-9325
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt 11 / 04 / 2016
Transaction ID : SA11A.472355
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 125.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2219 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
Team Ryan

A. LUNDQUIST, DAVID, J., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 6277 N OCEAN BOULEVARD
 City BOYNTON BEACH State FL Zip Code 33435-5211
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 2100.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 31 / 2016
Transaction ID : SA11A.458908
 Amount of Each Receipt this Period
 500.00
 Memo Item CONTRIBUTION

B. LUNDQUIST, DAVID, J., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 6277 N OCEAN BOULEVARD
 City BOYNTON BEACH State FL Zip Code 33435-5211
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 2100.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 02 / 2016
Transaction ID : SA11A.465133
 Amount of Each Receipt this Period
 500.00
 Memo Item CONTRIBUTION

C. LUNDSTEN, ALVINA, , MRS.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 605 PARK AVENUE NW
 City WILLIAMS State MN Zip Code 56686-4409
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 01 / 2016
Transaction ID : SA11A.461722
 Amount of Each Receipt this Period
 100.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	1100.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2220 OF 4311
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. LUNT, DAVID, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 30 W. WILDFLOWER DR.

City SANTA FE	State NM	Zip Code 87506-0102
------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
800.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		31		2016

Transaction ID : SA11A.459205

Amount of Each Receipt this Period
100.00

Memo Item
CONTRIBUTION

B. LUNT, DAVID, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 30 W. WILDFLOWER DR.

City SANTA FE	State NM	Zip Code 87506-0102
------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
800.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11		04		2016

Transaction ID : SA11A.474057

Amount of Each Receipt this Period
100.00

Memo Item
CONTRIBUTION

C. LUO, CATHY, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 4361 E. ASHLEY LANE

City FAYETTEVILLE	State AR	Zip Code 72701-2908
----------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) PAIN MANAGEMENT	Occupation (for Individual) PHYSICIAN
--	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		31		2016

Transaction ID : SA11A.463251

Amount of Each Receipt this Period
250.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	450.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2221 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
Team Ryan

A. LUPRIORE, LEONARD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 117 DIVISADERO ST
 City SAN FRANCISCO State CA Zip Code 94117-3212
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 705.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 25 / 2016
Transaction ID : SA11A.448215
 Amount of Each Receipt this Period
 30.00
 Memo Item
 CONTRIBUTION

B. LUPRIORE, LEONARD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 117 DIVISADERO ST
 City SAN FRANCISCO State CA Zip Code 94117-3212
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 705.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 04 / 2016
Transaction ID : SA11A.470296
 Amount of Each Receipt this Period
 25.00
 Memo Item
 CONTRIBUTION

C. LUSTIG, HELGA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 304 GREENWOOD STREET
 City NEWTON State MA Zip Code 02459-3059
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 340.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 02 / 2016
Transaction ID : SA11A.466343
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	155.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2222 OF 4311
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. LUSTIG, HELGA, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 304 GREENWOOD STREET

City NEWTON	State MA	Zip Code 02459-3059
----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
340.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	02	/	2016

Transaction ID : SA11A.466356

Amount of Each Receipt this Period
100.00

Memo Item CONTRIBUTION

B. LUSTIG, HELGA, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 304 GREENWOOD STREET

City NEWTON	State MA	Zip Code 02459-3059
----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
340.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	02	/	2016

Transaction ID : SA11A.466357

Amount of Each Receipt this Period
100.00

Memo Item CONTRIBUTION

C. LUTHER, MARLENE, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 945 S 294TH PLACE

City FEDERAL WAY	State WA	Zip Code 98003-3714
---------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
235.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	27	/	2016

Transaction ID : SA11A.454229

Amount of Each Receipt this Period
25.00

Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	225.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2223 OF 4311
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. LUTHER, MARLENE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 945 S 294TH PLACE
 City FEDERAL WAY State WA Zip Code 98003-3714
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 235.00

Date of Receipt **10 / 27 / 2016**
Transaction ID : SA11A.454230
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

B. LUTHER, MARLENE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 945 S 294TH PLACE
 City FEDERAL WAY State WA Zip Code 98003-3714
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 235.00

Date of Receipt **11 / 05 / 2016**
Transaction ID : SA11A.478322
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

C. LUTHER, ROBERT, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 8928 HIGHLAND RD
 City PITTSBURGH State PA Zip Code 15237-4526
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 325.00

Date of Receipt **11 / 01 / 2016**
Transaction ID : SA11A.462344
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶ 100.00
TOTAL This Period (last page this line number only).....▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2224 OF 4311
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. LUTHER, ROBERT, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 8928 HIGHLAND RD

City PITTSBURGH	State PA	Zip Code 15237-4526
--------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
325.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	04	/	2016

Transaction ID : SA11A.473503

Amount of Each Receipt this Period
50.00

Memo Item CONTRIBUTION

B. LUTHI, RANDALL, B., ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 3006 STATELINE ROAD

City FREEDOM	State WY	Zip Code 83120-8838
-----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NOIA	Occupation (for Individual) ATTORNEY
---	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	24	/	2016

Transaction ID : SA11A.444063

Amount of Each Receipt this Period
500.00

Memo Item CONTRIBUTION

C. LYLE, JOHN, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1071 DAVIDS RD

City PERRIS	State CA	Zip Code 92571-0844
----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
225.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	28	/	2016

Transaction ID : SA11A.455643

Amount of Each Receipt this Period
50.00

Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	600.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2225 OF 4311		
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14	<input type="checkbox"/> 11c <input type="checkbox"/> 15	<input type="checkbox"/> 12 <input type="checkbox"/> 16

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NAME OF COMMITTEE (In Full)
Team Ryan

A. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
LYNCH, DAVID, J., ,

Mailing Address **2807 S BROWNS LAKE DR**

City BURLINGTON	State WI	Zip Code 53105-7956
---------------------------	--------------------	-------------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) LYNCH CHEVROLET	Occupation (for Individual) MANAGEMENT
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
13598.00

Date of Receipt
10 / 21 / 2016

Transaction ID : SA11A.444480

Amount of Each Receipt this Period
1000.00

Memo Item
CONTRIBUTION

B. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
LYNCH, DAVID, J., ,

Mailing Address **2807 S BROWNS LAKE DR**

City BURLINGTON	State WI	Zip Code 53105-7956
---------------------------	--------------------	-------------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) LYNCH CHEVROLET	Occupation (for Individual) MANAGEMENT
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
13598.00

Date of Receipt
10 / 20 / 2016

Transaction ID : SA11A.444907

Amount of Each Receipt this Period
1000.00

Memo Item
CONTRIBUTION

C. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
LYNCH, DAVID, J., ,

Mailing Address **2807 S BROWNS LAKE DR**

City BURLINGTON	State WI	Zip Code 53105-7956
---------------------------	--------------------	-------------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) LYNCH CHEVROLET	Occupation (for Individual) MANAGEMENT
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
13598.00

Date of Receipt
11 / 04 / 2016

Transaction ID : SA11A.472525

Amount of Each Receipt this Period
250.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	2250.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2226 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
-----------------------------	-----------------------------	-----------------------------

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NAME OF COMMITTEE (In Full)
Team Ryan

A. LYNCH, DAVID, J., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2807 S BROWNS LAKE DR
 City BURLINGTON State WI Zip Code 53105-7956
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) LYNCH CHEVROLET Occupation (for Individual) MANAGEMENT
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 13598.00

Date of Receipt 11 / 04 / 2016
Transaction ID : SA11A.473546
 Amount of Each Receipt this Period 1000.00
 Memo Item CONTRIBUTION

B. LYNCH, KEVIN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5735 GLEN EAGLE LANE
 City VERO BEACH State FL Zip Code 32967-7549
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 375.00

Date of Receipt 10 / 31 / 2016
Transaction ID : SA11A.458849
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

C. LYNCH, MICHAEL, J., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 271 GIRDLE ROAD
 City E AURORA State NY Zip Code 14052-1224
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) PHYSICIAN
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 10 / 24 / 2016
Transaction ID : SA11A.443728
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	1125.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2227 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. LYNCH, RANDALL, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 6230 E TURQUOISE AVE
 City PARADISE VALLEY State AZ Zip Code 85253-1245
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt 10 / 27 / 2016
Transaction ID : SA11A.457018
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

B. LYNCH, RANDALL, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 6230 E TURQUOISE AVE
 City PARADISE VALLEY State AZ Zip Code 85253-1245
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt 10 / 27 / 2016
Transaction ID : SA11A.457019
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

C. LYNCH, RANDALL, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 6230 E TURQUOISE AVE
 City PARADISE VALLEY State AZ Zip Code 85253-1245
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt 11 / 04 / 2016
Transaction ID : SA11A.470397
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 300.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2228 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. LYNCH, RANDALL, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 6230 E TURQUOISE AVE

City PARADISE VALLEY	State AZ	Zip Code 85253-1245
-------------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
400.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
11		04		2016

Transaction ID : SA11A.471444

Amount of Each Receipt this Period
100.00

Memo Item
CONTRIBUTION

B. LYONS, DIANA, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 4918 SPINNING WHEEL DR

City BRIGHTON	State CO	Zip Code 80601-4595
------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
225.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
11		02		2016

Transaction ID : SA11A.467128

Amount of Each Receipt this Period
50.00

Memo Item
CONTRIBUTION

C. LYONS, DIANA, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 4918 SPINNING WHEEL DR

City BRIGHTON	State CO	Zip Code 80601-4595
------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
225.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
11		02		2016

Transaction ID : SA11A.467130

Amount of Each Receipt this Period
50.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	200.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2229 OF 4311
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. LYONS, DIANA, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 4918 SPINNING WHEEL DR

City BRIGHTON	State CO	Zip Code 80601-4595
------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
225.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11		08		2016

Transaction ID : SA11A.479705

Amount of Each Receipt this Period
25.00

Memo Item
CONTRIBUTION

B. LYONS, G., R., ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 4860 WHISPERING PINE WAY

City NAPLES	State FL	Zip Code 34103-2408
----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) INFORMATION REQUESTED PER BEST EFFORTS	Occupation (for Individual) INFORMATION REQUESTED PER BE
---	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
2700.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		27		2016

Transaction ID : SA11A.452432

Amount of Each Receipt this Period
2700.00

Memo Item
CONTRIBUTION

C. LYONS, GRETCHEN, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 618 SOUTH MAIN STREET

City PHILIPPI	State WV	Zip Code 26416-1631
------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) MCCOY BROS.,INC.	Occupation (for Individual) OWNER
---	--------------------------------------

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
1000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		25		2016

Transaction ID : SA11A.447928

Amount of Each Receipt this Period
500.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	3225.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2230 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. LYONS, GRETCHEN, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 618 SOUTH MAIN STREET

City PHILIPPI	State WV	Zip Code 26416-1631
------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) MCCOY BROS.,INC.	Occupation (for Individual) OWNER
---	--------------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	04	/	2016

Transaction ID : SA11A.470718

Amount of Each Receipt this Period
500.00

Memo Item
CONTRIBUTION

B. LYTELL, JIM, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 18301 GLADES FARM ROAD

City ESTERO	State FL	Zip Code 33928-9606
----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) JIM LYTELL	Occupation (for Individual) SELF
---	-------------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
4000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	23	/	2016

Transaction ID : SA11A.446588

Amount of Each Receipt this Period
1000.00

Memo Item
CONTRIBUTION

C. LYTELL, JIM, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 18301 GLADES FARM ROAD

City ESTERO	State FL	Zip Code 33928-9606
----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) JIM LYTELL	Occupation (for Individual) SELF
---	-------------------------------------

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
4000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	04	/	2016

Transaction ID : SA11A.471220

Amount of Each Receipt this Period
1000.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	2500.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2231 OF 4311
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. LYTTON, ROBERT, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 2108 BARAK LANE

City BRYAN	State TX	Zip Code 77802-4628
---------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) TEXAS A&M UNIVERSITY	Occupation (for Individual) PROFESSOR OF CIVIL ENGINEERING
---	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
350.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		23		2016

Transaction ID : SA11A.446420

Amount of Each Receipt this Period
50.00

Memo Item
CONTRIBUTION

B. LYTTON, ROBERT, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 2108 BARAK LANE

City BRYAN	State TX	Zip Code 77802-4628
---------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) TEXAS A&M UNIVERSITY	Occupation (for Individual) PROFESSOR OF CIVIL ENGINEERING
---	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
350.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		22		2016

Transaction ID : SA11A.446782

Amount of Each Receipt this Period
50.00

Memo Item
CONTRIBUTION

C. LYTTON, ROBERT, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 2108 BARAK LANE

City BRYAN	State TX	Zip Code 77802-4628
---------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) TEXAS A&M UNIVERSITY	Occupation (for Individual) PROFESSOR OF CIVIL ENGINEERING
---	---

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
350.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		31		2016

Transaction ID : SA11A.458083

Amount of Each Receipt this Period
50.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	150.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2232 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
LYTTON, ROBERT, , ,

Mailing Address 2108 BARAK LANE

City BRYAN	State TX	Zip Code 77802-4628
---------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) TEXAS A&M UNIVERSITY	Occupation (for Individual) PROFESSOR OF CIVIL ENGINEERIN
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
350.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	06	/	2016

Transaction ID : SA11A.477813

Amount of Each Receipt this Period
25.00

Memo Item CONTRIBUTION

B. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
LYTTON, ROBERT, , ,

Mailing Address 2108 BARAK LANE

City BRYAN	State TX	Zip Code 77802-4628
---------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) TEXAS A&M UNIVERSITY	Occupation (for Individual) PROFESSOR OF CIVIL ENGINEERIN
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
350.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	06	/	2016

Transaction ID : SA11A.477824

Amount of Each Receipt this Period
25.00

Memo Item CONTRIBUTION

C. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
M<CCARTHY, PATRICK, , ,

Mailing Address 47802 270TH ST

City SIOUX FALLS	State SD	Zip Code 57108-8223
---------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
600.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	21	/	2016

Transaction ID : SA11A.444531

Amount of Each Receipt this Period
100.00

Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	150.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2233 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. M<CCARTHY, PATRICK, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 47802 270TH ST
 City SIOUX FALLS State SD Zip Code 57108-8223
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 600.00

Date of Receipt 11 / 04 / 2016
Transaction ID : SA11A.472789
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

B. MABE, KATHY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 141 WESMON ST
 City MOUNT AIRY State NC Zip Code 27030-8788
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) BLEVINS BUILDING SUPPLY Occupation (for Individual) OFFICE MANAGER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 350.00

Date of Receipt 10 / 25 / 2016
Transaction ID : SA11A.451454
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

C. MABE, KATHY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 141 WESMON ST
 City MOUNT AIRY State NC Zip Code 27030-8788
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) BLEVINS BUILDING SUPPLY Occupation (for Individual) OFFICE MANAGER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 350.00

Date of Receipt 10 / 25 / 2016
Transaction ID : SA11A.451455
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	300.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2234 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. MABRY, SUSAN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2741 SILVER CREEK DR
 City BLOOMINGTON State IN Zip Code 47401-4582
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 539.00

Date of Receipt 10 / 27 / 2016
Transaction ID : SA11A.453854
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

B. MACADAM, MILLARD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2114 VISTA LAREDO
 City NEWPORT BEACH State CA Zip Code 92660-4041
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) BUSINESS COACH AND CONSULTANT
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 302.00

Date of Receipt 10 / 29 / 2016
Transaction ID : SA11A.461093
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

C. MACADAM, MILLARD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2114 VISTA LAREDO
 City NEWPORT BEACH State CA Zip Code 92660-4041
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) BUSINESS COACH AND CONSULTANT
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 302.00

Date of Receipt 11 / 04 / 2016
Transaction ID : SA11A.472838
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	100.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2235 OF 4311
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. MACAFEE, KATHLEEN, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address **982 MAIN ST**

City **WALTHAM** State **MA** Zip Code **02451-7404**

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) **KENNETH A MACAFEE** Occupation (for Individual) **BOOKEEPER**

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **400.00**

Date of Receipt **11 / 04 / 2016**
Transaction ID : **SA11A.472814**

Amount of Each Receipt this Period **50.00**

Memo Item CONTRIBUTION

B. MACALUSO, RICHARD, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address **5367 LOS ALTOS LANE**

City **YORBA LINDA** State **CA** Zip Code **92886-4904**

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) **ORANGE COAST TITLE COMPANY** Occupation (for Individual) **EXECUTIVE**

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **250.00**

Date of Receipt **10 / 31 / 2016**
Transaction ID : **SA11A.457688**

Amount of Each Receipt this Period **250.00**

Memo Item CONTRIBUTION

C. MACARTHUR, TORAN, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address **2949 N 675 E**

City **LEHI** State **UT** Zip Code **84043-2919**

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) **PREMIER FAMILY MEDICAL** Occupation (for Individual) **HEALTHCARE**

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼ **400.00**

Date of Receipt **11 / 04 / 2016**
Transaction ID : **SA11A.473169**

Amount of Each Receipt this Period **50.00**

Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ **350.00**

TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2236 OF 4311
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. MACARTHUR, TORAN, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 2949 N 675 E

City LEHI	State UT	Zip Code 84043-2919
--------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) PREMIER FAMILY MEDICAL	Occupation (for Individual) HEALTHCARE
---	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
400.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	05	/	2016

Transaction ID : SA11A.478330

Amount of Each Receipt this Period
50.00

Memo Item CONTRIBUTION

B. MACCARONE, JOHN, A., ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 27 LA CAMPANA ROAD

City ORINDA	State CA	Zip Code 94563-1830
----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
400.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	24	/	2016

Transaction ID : SA11A.443959

Amount of Each Receipt this Period
200.00

Memo Item CONTRIBUTION

C. MACCARTHY, JUSTIN, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 317 W PINE SY

City CLEARFIELD	State PA	Zip Code 16830-1642
--------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) SELF	Occupation (for Individual) PHYSICIAN
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
350.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	22	/	2016

Transaction ID : SA11A.446892

Amount of Each Receipt this Period
50.00

Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	300.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2237 OF 4311
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. MACCARTHY, JUSTIN, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 317 W PINE SY

City CLEARFIELD	State PA	Zip Code 16830-1642
--------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual)
SELF

Occupation (for Individual)
PHYSICIAN

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
350.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	04	/	2016

Transaction ID : SA11A.472136

Amount of Each Receipt this Period
50.00

Memo Item
CONTRIBUTION

B. MACCARTHY, JUSTIN, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 317 W PINE SY

City CLEARFIELD	State PA	Zip Code 16830-1642
--------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual)
SELF

Occupation (for Individual)
PHYSICIAN

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
350.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	05	/	2016

Transaction ID : SA11A.478858

Amount of Each Receipt this Period
100.00

Memo Item
CONTRIBUTION

C. MACCARTHY, JUSTIN, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 317 W PINE SY

City CLEARFIELD	State PA	Zip Code 16830-1642
--------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual)
SELF

Occupation (for Individual)
PHYSICIAN

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
350.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	05	/	2016

Transaction ID : SA11A.478861

Amount of Each Receipt this Period
100.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	250.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2238 OF 4311
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. MACCREADY, SHERMAN, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 3749 DIBBLE RD

City JACKSON	State MI	Zip Code 49201-9344
-----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) JACKSON COMPUTER	Occupation (for Individual) OWNER
---	--------------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		26		2016

Transaction ID : SA11A.450573

Amount of Each Receipt this Period
250.00

Memo Item
CONTRIBUTION

B. MACDONALD, JUNE, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 4017 KILMARTIN DRIVE

City TALLAHASSEE	State FL	Zip Code 32309-2861
---------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
525.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		24		2016

Transaction ID : SA11A.449402

Amount of Each Receipt this Period
50.00

Memo Item
CONTRIBUTION

C. MACDONALD, JUNE, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 4017 KILMARTIN DRIVE

City TALLAHASSEE	State FL	Zip Code 32309-2861
---------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
525.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		28		2016

Transaction ID : SA11A.455218

Amount of Each Receipt this Period
30.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	330.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2239 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. MACDONALD, JUNE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4017 KILMARTIN DRIVE
 City TALLAHASSEE State FL Zip Code 32309-2861
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 525.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 28 / 2016
Transaction ID : SA11A.455219
 Amount of Each Receipt this Period
 30.00
 Memo Item
 CONTRIBUTION

B. MACDONALD, JUNE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4017 KILMARTIN DRIVE
 City TALLAHASSEE State FL Zip Code 32309-2861
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 525.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 02 / 2016
Transaction ID : SA11A.466536
 Amount of Each Receipt this Period
 50.00
 Memo Item
 CONTRIBUTION

C. MACDONALD, JUNE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4017 KILMARTIN DRIVE
 City TALLAHASSEE State FL Zip Code 32309-2861
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 525.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 02 / 2016
Transaction ID : SA11A.466541
 Amount of Each Receipt this Period
 50.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	130.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2240 OF 4311
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. MACDONALD, JUNE, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 4017 KILMARTIN DRIVE

City TALLAHASSEE	State FL	Zip Code 32309-2861
---------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
525.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11		02		2016

Transaction ID : SA11A.466542

Amount of Each Receipt this Period
50.00

Memo Item CONTRIBUTION

B. MACDONALD, JUNE, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 4017 KILMARTIN DRIVE

City TALLAHASSEE	State FL	Zip Code 32309-2861
---------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
525.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11		04		2016

Transaction ID : SA11A.470789

Amount of Each Receipt this Period
30.00

Memo Item CONTRIBUTION

C. MACDONALD, JUNE, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 4017 KILMARTIN DRIVE

City TALLAHASSEE	State FL	Zip Code 32309-2861
---------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
525.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11		04		2016

Transaction ID : SA11A.471420

Amount of Each Receipt this Period
50.00

Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	130.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2241 OF 4311
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
MACDONALD, JUNE, , ,

Mailing Address **4017 KILMARTIN DRIVE**

City **TALLAHASSEE** State **FL** Zip Code **32309-2861**

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) **NONE** Occupation (for Individual) **RETIRED**

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **525.00**

Date of Receipt **11 / 04 / 2016**

Transaction ID : SA11A.473352

Amount of Each Receipt this Period **25.00**

Memo Item CONTRIBUTION

B. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
MACDONALD, REID, , ,

Mailing Address **222 S 9TH STREET SUITE 1600**

City **MINNEAPOLIS** State **MN** Zip Code **55402-3382**

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) **INFORMATION REQUESTED PER BEST EFFORTS** Occupation (for Individual) **INFORMATION REQUESTED PER BE**

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **300.00**

Date of Receipt **11 / 07 / 2016**

Transaction ID : SA11A.467759

Amount of Each Receipt this Period **100.00**

Memo Item CONTRIBUTION

C. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
MACGREGOR, SCOTT, , ,

Mailing Address **6680 LYDIA CT**

City **CALEDONIA** State **MI** Zip Code **49316-9322**

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) **LPIT SOLUTIONS** Occupation (for Individual) **SELF**

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼ **1300.00**

Date of Receipt **10 / 24 / 2016**

Transaction ID : SA11A.445821

Amount of Each Receipt this Period **100.00**

Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... **225.00**

TOTAL This Period (last page this line number only).....

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2242 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. MACGREGOR, SCOTT, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 6680 LYDIA CT
 City CALEDONIA State MI Zip Code 49316-9322
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) LPIT SOLUTIONS Occupation (for Individual) SELF
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1300.00

Date of Receipt 10 / 24 / 2016
Transaction ID : SA11A.445822
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

B. MACGREGOR, SCOTT, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 6680 LYDIA CT
 City CALEDONIA State MI Zip Code 49316-9322
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) LPIT SOLUTIONS Occupation (for Individual) SELF
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1300.00

Date of Receipt 10 / 31 / 2016
Transaction ID : SA11A.457978
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

C. MACGREGOR, SCOTT, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 6680 LYDIA CT
 City CALEDONIA State MI Zip Code 49316-9322
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) LPIT SOLUTIONS Occupation (for Individual) SELF
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1300.00

Date of Receipt 11 / 03 / 2016
Transaction ID : SA11A.474478
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	300.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2243 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. MACGREGOR, SCOTT, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 6680 LYDIA CT
 City CALEDONIA State MI Zip Code 49316-9322
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) LPIT SOLUTIONS Occupation (for Individual) SELF
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1300.00

Date of Receipt 11 / 03 / 2016
Transaction ID : SA11A.474479
 Amount of Each Receipt this Period 100.00
 Memo Item
CONTRIBUTION

B. MACGREGOR, SCOTT, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 6680 LYDIA CT
 City CALEDONIA State MI Zip Code 49316-9322
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) LPIT SOLUTIONS Occupation (for Individual) SELF
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1300.00

Date of Receipt 11 / 04 / 2016
Transaction ID : SA11A.479663
 Amount of Each Receipt this Period 100.00
 Memo Item
CONTRIBUTION

C. MACGREGOR, SCOTT, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 6680 LYDIA CT
 City CALEDONIA State MI Zip Code 49316-9322
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) LPIT SOLUTIONS Occupation (for Individual) SELF
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1300.00

Date of Receipt 11 / 07 / 2016
Transaction ID : SA11A.480479
 Amount of Each Receipt this Period 100.00
 Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	300.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2244 OF 4311
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. MACGREGOR, SCOTT, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 6680 LYDIA CT

City CALEDONIA	State MI	Zip Code 49316-9322
-------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) LPIT SOLUTIONS	Occupation (for Individual) SELF
---	-------------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1300.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
11		06		2016

Transaction ID : SA11A.480890

Amount of Each Receipt this Period
100.00

Memo Item
CONTRIBUTION

B. MACGUIRE, KEVIN, A., ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 18 WILDWOOD LANE

City DARIEN	State CT	Zip Code 06820-3227
----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) INFORMATION REQUESTED PER BEST EFFORTS	Occupation (for Individual) INFORMATION REQUESTED PER BE
---	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
500.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
10		21		2016

Transaction ID : SA11A.443682

Amount of Each Receipt this Period
500.00

Memo Item
CONTRIBUTION

C. MACHEN, NICOLE, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1208 YORK CASTLE DRIVE

City PFLUGERVILLE	State TX	Zip Code 78660-2144
----------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) M/I HOMES	Occupation (for Individual) PURCHASING AGENT AND ESTIMATC
--	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
425.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
10		24		2016

Transaction ID : SA11A.449550

Amount of Each Receipt this Period
75.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	675.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2245 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. MACHEN, NICOLE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1208 YORK CASTLE DRIVE
 City PFLUGERVILLE State TX Zip Code 78660-2144
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) M/I HOMES Occupation (for Individual) PURCHASING AGENT AND ESTIMAT
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 425.00

Date of Receipt 10 / 24 / 2016
Transaction ID : SA11A.449552
 Amount of Each Receipt this Period 75.00
 Memo Item CONTRIBUTION

B. MACHEN, NICOLE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1208 YORK CASTLE DRIVE
 City PFLUGERVILLE State TX Zip Code 78660-2144
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) M/I HOMES Occupation (for Individual) PURCHASING AGENT AND ESTIMAT
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 425.00

Date of Receipt 11 / 02 / 2016
Transaction ID : SA11A.465880
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

C. MACHEN, NICOLE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1208 YORK CASTLE DRIVE
 City PFLUGERVILLE State TX Zip Code 78660-2144
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) M/I HOMES Occupation (for Individual) PURCHASING AGENT AND ESTIMAT
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 425.00

Date of Receipt 11 / 04 / 2016
Transaction ID : SA11A.471676
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶ 150.00
TOTAL This Period (last page this line number only).....▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2246 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. MACHNIK, MICHAEL, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 21851 NEWLAND 189
 City HUNTINGTON BEACH State CA Zip Code 92646-7607
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 10 / 24 / 2016
Transaction ID : SA11A.446020
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

B. MACINNIS, WILLIAM, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2996 WENDWOOD DR
 City MARIETTA State GA Zip Code 30062-1417
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 350.00

Date of Receipt 10 / 31 / 2016
Transaction ID : SA11A.457787
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

C. MACINNIS, WILLIAM, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2996 WENDWOOD DR
 City MARIETTA State GA Zip Code 30062-1417
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 350.00

Date of Receipt 10 / 31 / 2016
Transaction ID : SA11A.457788
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶ 150.00
TOTAL This Period (last page this line number only).....▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2247 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. MACKAY, C, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1338W 4800S
 City TAYLORSVILLE State UT Zip Code 84123-4323
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 230.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 27 / 2016
Transaction ID : SA11A.453887
 Amount of Each Receipt this Period
 25.00
 Memo Item
 CONTRIBUTION

B. MACKAY, C, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1338W 4800S
 City TAYLORSVILLE State UT Zip Code 84123-4323
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 230.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 01 / 2016
Transaction ID : SA11A.462833
 Amount of Each Receipt this Period
 35.00
 Memo Item
 CONTRIBUTION

C. MACKAY, C, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1338W 4800S
 City TAYLORSVILLE State UT Zip Code 84123-4323
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 230.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 02 / 2016
Transaction ID : SA11A.466488
 Amount of Each Receipt this Period
 25.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	85.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2248 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. MACKAY, C, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1338W 4800S
 City TAYLORSVILLE State UT Zip Code 84123-4323
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 230.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 04 / 2016
Transaction ID : SA11A.474272
 Amount of Each Receipt this Period
 25.00
 Memo Item
 CONTRIBUTION

B. MACKAY, ROBERT, J., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 530 MALCOLM RD, NW
 City VIENNA State VA Zip Code 22180-4123
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 26 / 2016
Transaction ID : SA11A.454293
 Amount of Each Receipt this Period
 250.00
 Memo Item
 CONTRIBUTION

C. MACKLEY, CORRINE, L., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 122 E.NORTH AVE.
 City HAGERSTOWN State MD Zip Code 21740-4008
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 310.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 24 / 2016
Transaction ID : SA11A.443775
 Amount of Each Receipt this Period
 15.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	290.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2249 OF 4311
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. MACKLEY, CORRINE, L., ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 122 E.NORTH AVE.

City HAGERSTOWN	State MD	Zip Code 21740-4008
--------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
310.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	21	/	2016

Transaction ID : SA11A.444482

Amount of Each Receipt this Period
25.00

Memo Item
CONTRIBUTION

B. MACKLEY, CORRINE, L., ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 122 E.NORTH AVE.

City HAGERSTOWN	State MD	Zip Code 21740-4008
--------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
310.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	31	/	2016

Transaction ID : SA11A.457776

Amount of Each Receipt this Period
25.00

Memo Item
CONTRIBUTION

C. MACKLEY, CORRINE, L., ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 122 E.NORTH AVE.

City HAGERSTOWN	State MD	Zip Code 21740-4008
--------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
310.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	07	/	2016

Transaction ID : SA11A.467899

Amount of Each Receipt this Period
25.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	75.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2250 OF 4311
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. MACKLEY, CORRINE, L., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 122 E.NORTH AVE.
 City HAGERSTOWN State MD Zip Code 21740-4008
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 310.00

Date of Receipt 11 / 04 / 2016
Transaction ID : SA11A.472798
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

B. MACOMBER, SCOTT, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 25980 VINEDO LANE
 City LOS ALTOS HILLS State CA Zip Code 94022-4471
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) ENTREPRENEUR
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 2000.00

Date of Receipt 10 / 31 / 2016
Transaction ID : SA11A.464198
 Amount of Each Receipt this Period 1000.00
 Memo Item CONTRIBUTION

C. MACOMBER, WILLIAM, A., , JR.
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 11216 BELLFLOWER LN
 City HUNTLEY State IL Zip Code 60142-7795
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 10 / 26 / 2016
Transaction ID : SA11A.447604
 Amount of Each Receipt this Period 500.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶ 1525.00
TOTAL This Period (last page this line number only).....▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2251 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. MACY, WILLIAM, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 5131 STAVERLY LANE

City PEACHTREE CORNERS	State GA	Zip Code 30092-1786
---------------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) INFORMATION BUILDERS	Occupation (for Individual) SALES
---	--------------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
300.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	26	/	2016

Transaction ID : SA11A.451104

Amount of Each Receipt this Period
100.00

Memo Item
CONTRIBUTION

B. MACY, WILLIAM, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 5131 STAVERLY LANE

City PEACHTREE CORNERS	State GA	Zip Code 30092-1786
---------------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) INFORMATION BUILDERS	Occupation (for Individual) SALES
---	--------------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
300.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	04	/	2016

Transaction ID : SA11A.473013

Amount of Each Receipt this Period
100.00

Memo Item
CONTRIBUTION

C. MADDEN, JOHN, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 2427 FOX MEADOW CIRCLE

City NORTHFIELD	State IL	Zip Code 60093-4304
--------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
450.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	28	/	2016

Transaction ID : SA11A.461409

Amount of Each Receipt this Period
250.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	450.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2252 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. MADDOX, JAMES, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 8501 N ILLINOIS
 City INDIANAPOLIS State IN Zip Code 46260-2321
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 10 / 31 / 2016
Transaction ID : SA11A.457999
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

B. MADDOX, JAMES, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 8501 N ILLINOIS
 City INDIANAPOLIS State IN Zip Code 46260-2321
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 11 / 03 / 2016
Transaction ID : SA11A.468712
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

C. MADDOX, JAMES, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 8501 N ILLINOIS
 City INDIANAPOLIS State IN Zip Code 46260-2321
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 11 / 07 / 2016
Transaction ID : SA11A.475351
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 75.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2253 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. MADHAVAN, SRINIVASA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1019 SUGAR LAKES DR
 City SUGAR LAND State TX Zip Code 77478-3446
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 800.00

Date of Receipt 10 / 30 / 2016
Transaction ID : SA11A.459688
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

B. MADRID, JAY, J., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 9205 MOSS TRIAL
 City DALLAS State TX Zip Code 75231-1407
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) WINSTEAD PC Occupation (for Individual) ATTORNEY
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 10 / 21 / 2016
Transaction ID : SA11A.443516
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

C. MAEDGENJR., MALCOLM, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address P.O. BOX 87
 City MATHIS State TX Zip Code 78368-0087
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) AGRICULTURE
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 275.00

Date of Receipt 10 / 21 / 2016
Transaction ID : SA11A.444434
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 375.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2254 OF 4311
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Team Ryan

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
A. MAEDGENJR., MALCOLM, , ,

Mailing Address P.O. BOX 87

City MATHIS State TX Zip Code 78368-0087

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) AGRICULTURE

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ **275.00**

Date of Receipt **10 / 27 / 2016**

Transaction ID : SA11A.452901

Amount of Each Receipt this Period **250.00**

Memo Item CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
B. MAGEE, LORRAINE, , ,

Mailing Address 2975 FRISCO HILL ROAD

City IMPERIAL State MO Zip Code 63052-2008

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ **600.00**

Date of Receipt **10 / 24 / 2016**

Transaction ID : SA11A.443789

Amount of Each Receipt this Period **500.00**

Memo Item CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
C. MAGENHEIM, JANE, , ,

Mailing Address P. O. BOX 72 8F

City ROXBURY State NY Zip Code 12474-0072

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED

Receipt For: Primary General Other (specify)

Aggregate Year-to-Date ▼ **344.00**

Date of Receipt **10 / 24 / 2016**

Transaction ID : SA11A.449267

Amount of Each Receipt this Period **100.00**

Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... **850.00**

TOTAL This Period (last page this line number only).....

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2255 OF 4311
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. MAGENHEIM, JANE, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address P. O. BOX 72
8F

City ROXBURY State NY Zip Code 12474-0072

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
344.00

Date of Receipt
10 / 24 / 2016
Transaction ID : SA11A.449287

Amount of Each Receipt this Period
100.00

Memo Item CONTRIBUTION

B. MAGENHEIM, JANE, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address P. O. BOX 72
8F

City ROXBURY State NY Zip Code 12474-0072

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
344.00

Date of Receipt
10 / 31 / 2016
Transaction ID : SA11A.464204

Amount of Each Receipt this Period
36.00

Memo Item CONTRIBUTION

C. MAGLEBY, KARL, L., ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 2666 RIVIERA MANOR

City WESTON State FL Zip Code 33332-3422

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) UNIVERSITY OF MIAMI Occupation (for Individual) PROFESSOR

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
3000.00

Date of Receipt
10 / 24 / 2016
Transaction ID : SA11A.443732

Amount of Each Receipt this Period
1000.00

Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 1136.00

TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2256 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. MAHAN, CHARLES, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1 N 131 INDIAN KNOLL RD
 City WEST CHICAGO State IL Zip Code 60185-
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 330.00

Date of Receipt 10 / 24 / 2016
Transaction ID : SA11A.445688
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

B. MAHAN, CHARLES, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1 N 131 INDIAN KNOLL RD
 City WEST CHICAGO State IL Zip Code 60185-
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 330.00

Date of Receipt 10 / 25 / 2016
Transaction ID : SA11A.448548
 Amount of Each Receipt this Period 30.00
 Memo Item CONTRIBUTION

C. MAHAN, CHARLES, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 13 GRANDVIEW DRIVE
 City PALM COAST State FL Zip Code 32137-1488
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) CONSULTANT
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 325.00

Date of Receipt 10 / 30 / 2016
Transaction ID : SA11A.460076
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶ 80.00
TOTAL This Period (last page this line number only).....▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2257 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
Team Ryan

A. MAHAN, CHARLES, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 13 GRANDVIEW DRIVE
 City PALM COAST State FL Zip Code 32137-1488
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) CONSULTANT
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 325.00

Date of Receipt **10 / 29 / 2016**
Transaction ID : SA11A.461092
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

B. MAHAN, CHARLES, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1 N 131 INDIAN KNOLL RD
 City WEST CHICAGO State IL Zip Code 60185-
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 330.00

Date of Receipt **11 / 03 / 2016**
Transaction ID : SA11A.468911
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

C. MAHAN, CHARLES, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 13 GRANDVIEW DRIVE
 City PALM COAST State FL Zip Code 32137-1488
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) CONSULTANT
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 325.00

Date of Receipt **11 / 04 / 2016**
Transaction ID : SA11A.471897
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 75.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2258 OF 4311
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. MAHAN, CHARLES, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 13 GRANDVIEW DRIVE

City PALM COAST	State FL	Zip Code 32137-1488
--------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) SELF EMPLOYED	Occupation (for Individual) CONSULTANT
--	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
325.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	04	/	2016

Transaction ID : SA11A.472378

Amount of Each Receipt this Period
25.00

Memo Item
CONTRIBUTION

B. MAHAN, CHARLES, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 13 GRANDVIEW DRIVE

City PALM COAST	State FL	Zip Code 32137-1488
--------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) SELF EMPLOYED	Occupation (for Individual) CONSULTANT
--	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
325.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	07	/	2016

Transaction ID : SA11A.476267

Amount of Each Receipt this Period
25.00

Memo Item
CONTRIBUTION

C. MAHAN, CHARLES, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 13 GRANDVIEW DRIVE

City PALM COAST	State FL	Zip Code 32137-1488
--------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) SELF EMPLOYED	Occupation (for Individual) CONSULTANT
--	---

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
325.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	07	/	2016

Transaction ID : SA11A.476276

Amount of Each Receipt this Period
25.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	75.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2259 OF 4311
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. MAHAN, FREDERICK, , MR.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 101 ST. FRANCIS BLVD

City SAN FRANCISCO	State CA	Zip Code 94127-1938
-----------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
235.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		26		2016

Transaction ID : SA11A.451307

Amount of Each Receipt this Period
50.00

Memo Item CONTRIBUTION

B. MAHAN, FREDERICK, , MR.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 101 ST. FRANCIS BLVD

City SAN FRANCISCO	State CA	Zip Code 94127-1938
-----------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
235.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		26		2016

Transaction ID : SA11A.451308

Amount of Each Receipt this Period
50.00

Memo Item CONTRIBUTION

C. MAHAN, FREDERICK, , MR.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 101 ST. FRANCIS BLVD

City SAN FRANCISCO	State CA	Zip Code 94127-1938
-----------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
235.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		26		2016

Transaction ID : SA11A.451309

Amount of Each Receipt this Period
50.00

Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	150.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2260 OF 4311
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. MAHASE, GEORGE, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 10510 95 AVE

City OZONE PARK	State NY	Zip Code 11416-1809
--------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NEW YORK STATE	Occupation (for Individual) TAX AUDITOR
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
431.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		27		2016

Transaction ID : SA11A.452737

Amount of Each Receipt this Period
100.00

Memo Item
CONTRIBUTION

B. MAHER, JAMES, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 3082 QUAIL RIDGE CIRCLE

City ROCHESTER HILLS	State MI	Zip Code 48309-2722
-------------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) INFORMATION REQUESTED PER BEST EFFORTS	Occupation (for Individual) INFORMATION REQUESTED PER BE
---	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		27		2016

Transaction ID : SA11A.452402

Amount of Each Receipt this Period
250.00

Memo Item
CONTRIBUTION

C. MAHONEY, GLORIA, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 7212 UPPER RIDGE ROAD

City EVERETT	State WA	Zip Code 98203-4907
-----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) ESTERLINE	Occupation (for Individual) FINANCIAL ANALYST
--	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11		02		2016

Transaction ID : SA11A.469501

Amount of Each Receipt this Period
100.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	450.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2261 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. MAJERUS, WILLIAM, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 229 SW 298 PL
 City FEDERAL WAY State WA Zip Code 98023-3565
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 205.00

Date of Receipt 10 / 26 / 2016
Transaction ID : SA11A.450423
 Amount of Each Receipt this Period 30.00
 Memo Item CONTRIBUTION

B. MAJERUS, WILLIAM, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 229 SW 298 PL
 City FEDERAL WAY State WA Zip Code 98023-3565
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 205.00

Date of Receipt 10 / 29 / 2016
Transaction ID : SA11A.460684
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

C. MAJERUS, WILLIAM, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 229 SW 298 PL
 City FEDERAL WAY State WA Zip Code 98023-3565
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 205.00

Date of Receipt 11 / 03 / 2016
Transaction ID : SA11A.468991
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶ 80.00
TOTAL This Period (last page this line number only).....▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2262 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. MAJORINO, ROBERT, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 887 CORTE PASTORAL
 City CAMARILLO State CA Zip Code 93010-7418
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) BERKSHIRE HATHAWAY CALIFORNIA REALTY Occupation (for Individual) OWNER/BROKER
 Receipt For: Primary General Other (specify) Aggregate Year-to-Date 300.00

Date of Receipt 10 / 31 / 2016
Transaction ID : SA11A.464088
 Amount of Each Receipt this Period 300.00
 Memo Item CONTRIBUTION

B. MAJOR, SUSAN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 860 LANDA ST APT 602
 City NEW BRAUNFELS State TX Zip Code 78130-6286
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) Aggregate Year-to-Date 250.00

Date of Receipt 10 / 25 / 2016
Transaction ID : SA11A.448859
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

C. MAJOR, SUSAN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 860 LANDA ST APT 602
 City NEW BRAUNFELS State TX Zip Code 78130-6286
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) Aggregate Year-to-Date 250.00

Date of Receipt 11 / 04 / 2016
Transaction ID : SA11A.471269
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	350.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2263 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. MAJOR, SUSAN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 860 LANDA ST APT 602
 City NEW BRAUNFELS State TX Zip Code 78130-6286
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 11 / 07 / 2016
Transaction ID : SA11A.476460
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

B. MAKDISSY, TOM, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4079 CASA GRANDE WAY
 City SAN JOSE State CA Zip Code 95118-1820
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 11 / 04 / 2016
Transaction ID : SA11A.470373
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

C. MAKINSON, D., W., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 325 ARAPAHO E
 City SHERMAN State TX Zip Code 75092-7605
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 11 / 03 / 2016
Transaction ID : SA11A.465317
 Amount of Each Receipt this Period 200.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	325.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2264 OF 4311
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. MAKOUS, NORMAN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 243 FREEDOM BLVD.
 243
 City COATESVILLE State PA Zip Code 19320-1554
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 29 / 2016
Transaction ID : SA11A.460507
 Amount of Each Receipt this Period
 500.00
 Memo Item
 CONTRIBUTION

B. MAKOU, SHAHRAM, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO BOX 4008
 City LANCASTER State CA Zip Code 93539-4008
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF (INSTITUTE OF NEUROLOGICAL SURGE Occupation (for Individual) NEUROSURGEON
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 800.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 24 / 2016
Transaction ID : SA11A.445919
 Amount of Each Receipt this Period
 50.00
 Memo Item
 CONTRIBUTION

C. MAKOU, SHAHRAM, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO BOX 4008
 City LANCASTER State CA Zip Code 93539-4008
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF (INSTITUTE OF NEUROLOGICAL SURGE Occupation (for Individual) NEUROSURGEON
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 800.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 24 / 2016
Transaction ID : SA11A.445921
 Amount of Each Receipt this Period
 50.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶ 600.00
TOTAL This Period (last page this line number only).....▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2265 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
Team Ryan

A. MALCOLM, JOYCE, L., DR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 411 JEFFERSON STREET
 City ALEXANDRIA State VA Zip Code 22314-4327
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SCALIA LAW SCHOOL Occupation (for Individual) LAW PROFESSOR
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 777.00

Date of Receipt 10 / 31 / 2016
Transaction ID : SA11A.458503
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

B. MALCOLM, JOYCE, L., DR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 411 JEFFERSON STREET
 City ALEXANDRIA State VA Zip Code 22314-4327
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SCALIA LAW SCHOOL Occupation (for Individual) LAW PROFESSOR
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 777.00

Date of Receipt 11 / 01 / 2016
Transaction ID : SA11A.462238
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

C. MALCOLM, JOYCE, L., DR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 411 JEFFERSON STREET
 City ALEXANDRIA State VA Zip Code 22314-4327
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SCALIA LAW SCHOOL Occupation (for Individual) LAW PROFESSOR
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 777.00

Date of Receipt 11 / 02 / 2016
Transaction ID : SA11A.470056
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	75.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2266 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. MALCOLM, JOYCE, L., DR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 411 JEFFERSON STREET
 City ALEXANDRIA State VA Zip Code 22314-4327
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SCALIA LAW SCHOOL Occupation (for Individual) LAW PROFESSOR
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 777.00

Date of Receipt 11 / 06 / 2016
Transaction ID : SA11A.478265
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

B. MALCOLM, KATHLEEN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 86 HOLYOKE ST
 City LYNN State MA Zip Code 01905-1455
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) PAYROLL EXPRESS Occupation (for Individual) ACCOUNTANT
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 325.00

Date of Receipt 10 / 29 / 2016
Transaction ID : SA11A.460566
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

C. MALCOLM, KATHLEEN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 86 HOLYOKE ST
 City LYNN State MA Zip Code 01905-1455
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) PAYROLL EXPRESS Occupation (for Individual) ACCOUNTANT
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 325.00

Date of Receipt 11 / 05 / 2016
Transaction ID : SA11A.479023
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	150.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2267 OF 4311
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. MALCOLM, MICHAEL, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1420 RED BUTTE DRIVE

City ASPEN	State CO	Zip Code 81611-1036
---------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) KALEIDESCAPE, INC.	Occupation (for Individual) EXECUTIVE
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	04	/	2016

Transaction ID : SA11A.474358

Amount of Each Receipt this Period
1000.00

Memo Item
CONTRIBUTION

B. MALEK, JOHN, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address P. O. BOX 1475

City TORRANCE	State CA	Zip Code 90505-0475
------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
450.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	23	/	2016

Transaction ID : SA11A.446614

Amount of Each Receipt this Period
100.00

Memo Item
CONTRIBUTION

C. MALEK, JOHN, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address P. O. BOX 1475

City TORRANCE	State CA	Zip Code 90505-0475
------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
450.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	27	/	2016

Transaction ID : SA11A.453391

Amount of Each Receipt this Period
50.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	1150.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2268 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. MALEK, JOHN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address P. O. BOX 1475
 City TORRANCE State CA Zip Code 90505-0475
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 450.00

Date of Receipt
 11 / 04 / 2016
Transaction ID : SA11A.472640
 Amount of Each Receipt this Period
 100.00
 Memo Item CONTRIBUTION

B. MALETTA, JOSEPH, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2750 ARTESIA. BLVD. 434
 City REDONDO BEACH State CA Zip Code 90278-6947
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 380.00

Date of Receipt
 10 / 30 / 2016
Transaction ID : SA11A.459677
 Amount of Each Receipt this Period
 30.00
 Memo Item CONTRIBUTION

C. MALETTA, JOSEPH, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2750 ARTESIA. BLVD. 434
 City REDONDO BEACH State CA Zip Code 90278-6947
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 380.00

Date of Receipt
 10 / 30 / 2016
Transaction ID : SA11A.459678
 Amount of Each Receipt this Period
 30.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	160.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2269 OF 4311
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. MALETTA, JOSEPH, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 2750 ARTESIA. BLVD.
434

City REDONDO BEACH	State CA	Zip Code 90278-6947
-----------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
380.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		29		2016

Transaction ID : SA11A.460710

Amount of Each Receipt this Period
30.00

Memo Item CONTRIBUTION

B. MALETTA, JOSEPH, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 2750 ARTESIA. BLVD.
434

City REDONDO BEACH	State CA	Zip Code 90278-6947
-----------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
380.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		29		2016

Transaction ID : SA11A.460711

Amount of Each Receipt this Period
30.00

Memo Item CONTRIBUTION

C. MALETTA, JOSEPH, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 2750 ARTESIA. BLVD.
434

City REDONDO BEACH	State CA	Zip Code 90278-6947
-----------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
380.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		29		2016

Transaction ID : SA11A.460712

Amount of Each Receipt this Period
30.00

Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	90.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2270 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. MALETTA, JOSEPH, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 2750 ARTESIA. BLVD.
434

City REDONDO BEACH	State CA	Zip Code 90278-6947
-----------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
380.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11		03		2016

Transaction ID : SA11A.469345

Amount of Each Receipt this Period
45.00

Memo Item
CONTRIBUTION

B. MALETTA, JOSEPH, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 2750 ARTESIA. BLVD.
434

City REDONDO BEACH	State CA	Zip Code 90278-6947
-----------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
380.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11		06		2016

Transaction ID : SA11A.478017

Amount of Each Receipt this Period
30.00

Memo Item
CONTRIBUTION

C. MALETTA, JOSEPH, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 2750 ARTESIA. BLVD.
434

City REDONDO BEACH	State CA	Zip Code 90278-6947
-----------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
380.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11		06		2016

Transaction ID : SA11A.478022

Amount of Each Receipt this Period
25.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	100.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2271 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. MALETTA, JOSEPH, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2750 ARTESIA. BLVD.
 434
 City REDONDO BEACH State CA Zip Code 90278-6947
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 380.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 06 / 2016
Transaction ID : SA11A.478024
 Amount of Each Receipt this Period
 25.00
 Memo Item
 CONTRIBUTION

B. MALILA, WILLIAM, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3335 YELLOWSTONE DR.
 City ANN ARBOR State MI Zip Code 48105-1522
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 355.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 25 / 2016
Transaction ID : SA11A.448390
 Amount of Each Receipt this Period
 30.00
 Memo Item
 CONTRIBUTION

C. MALILA, WILLIAM, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3335 YELLOWSTONE DR.
 City ANN ARBOR State MI Zip Code 48105-1522
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 355.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 25 / 2016
Transaction ID : SA11A.448408
 Amount of Each Receipt this Period
 30.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	85.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2272 OF 4311
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. MALLON, FRANCIS, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 42 WREN ROAD

City GILBERTSVILLE	State PA	Zip Code 19525-9248
-----------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) EXELON	Occupation (for Individual) TECH
---	-------------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
227.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	05	/	2016

Transaction ID : SA11A.478364

Amount of Each Receipt this Period
25.00

Memo Item
CONTRIBUTION

B. MALLOY, ROBERT, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address PO BOX 128

City GOLDFIELD	State IA	Zip Code 50542-0128
-------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) SELF EMPLOYED	Occupation (for Individual) LAWYER/FARMER
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
800.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	25	/	2016

Transaction ID : SA11A.448724

Amount of Each Receipt this Period
250.00

Memo Item
CONTRIBUTION

C. MALLOY, ROBERT, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address PO BOX 128

City GOLDFIELD	State IA	Zip Code 50542-0128
-------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) SELF EMPLOYED	Occupation (for Individual) LAWYER/FARMER
--	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
800.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	04	/	2016

Transaction ID : SA11A.471318

Amount of Each Receipt this Period
250.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	525.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2273 OF 4311
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. MALLOY, ROBERT, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address **PO BOX 128**

City GOLDFIELD	State IA	Zip Code 50542-0128
--------------------------	--------------------	-------------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) SELF EMPLOYED	Occupation (for Individual) LAWYER/FARMER
---	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **800.00**

Date of Receipt
11 / 04 / 2016

Transaction ID : SA11A.473698

Amount of Each Receipt this Period
100.00

Memo Item CONTRIBUTION

B. MALONEY-BENEDIX, COLLEEN, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address **2 HEARTHSTONE PLACE**

City ANDOVER	State MA	Zip Code 01810-5421
------------------------	--------------------	-------------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) COLLEEN MALONEY-BENEDIX	Occupation (for Individual) CHILDCARE DIRECTOR
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **450.00**

Date of Receipt
10 / 25 / 2016

Transaction ID : SA11A.451666

Amount of Each Receipt this Period
250.00

Memo Item CONTRIBUTION

C. MALONEY-BENEDIX, COLLEEN, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address **2 HEARTHSTONE PLACE**

City ANDOVER	State MA	Zip Code 01810-5421
------------------------	--------------------	-------------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) COLLEEN MALONEY-BENEDIX	Occupation (for Individual) CHILDCARE DIRECTOR
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼ **450.00**

Date of Receipt
11 / 07 / 2016

Transaction ID : SA11A.476333

Amount of Each Receipt this Period
100.00

Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	450.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2274 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
Team Ryan

A. MALONEY-BENEDIX, COLLEEN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2 HEARTHSTONE PLACE
 City ANDOVER State MA Zip Code 01810-5421
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) COLLEEN MALONEY-BENEDIX Occupation (for Individual) CHILDCARE DIRECTOR
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 450.00

Date of Receipt **11 / 07 / 2016**
Transaction ID : SA11A.476335
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

B. MALPASS, EVELYN, R., MRS.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 21330 N. COBURG ROAD
 City HARRISBURG State OR Zip Code 97446-9747
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt **10 / 20 / 2016**
Transaction ID : SA11A.442450
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

C. MALPASS, EVELYN, R., MRS.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 21330 N. COBURG ROAD
 City HARRISBURG State OR Zip Code 97446-9747
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt **10 / 21 / 2016**
Transaction ID : SA11A.444278
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	300.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2275 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. MALPASS, EVELYN, R., MRS.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 21330 N. COBURG ROAD
 City HARRISBURG State OR Zip Code 97446-9747
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 04 / 2016
Transaction ID : SA11A.473539
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION

B. MALYGIN, NICOLE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 26 E BEND LN
 City HOUSTON State TX Zip Code 77007-7024
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 700.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 27 / 2016
Transaction ID : SA11A.454232
 Amount of Each Receipt this Period
 250.00
 Memo Item
 CONTRIBUTION

C. MALYGIN, NICOLE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 26 E BEND LN
 City HOUSTON State TX Zip Code 77007-7024
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 700.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 27 / 2016
Transaction ID : SA11A.454233
 Amount of Each Receipt this Period
 250.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	600.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2276 OF 4311
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. MALYGIN, NICOLE, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 26 E BEND LN

City HOUSTON	State TX	Zip Code 77007-7024
-----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
700.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
11		05		2016

Transaction ID : SA11A.478445

Amount of Each Receipt this Period
100.00

Memo Item
CONTRIBUTION

B. MALYGIN, NICOLE, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 26 E BEND LN

City HOUSTON	State TX	Zip Code 77007-7024
-----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
700.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
11		05		2016

Transaction ID : SA11A.478446

Amount of Each Receipt this Period
100.00

Memo Item
CONTRIBUTION

C. MALYGIN, SERGEY, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 26 E BEND LN

City HOUSTON	State TX	Zip Code 77007-7024
-----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) MMS HG, LLC	Occupation (for Individual) MANAGEMENT
--	---

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
250.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
11		05		2016

Transaction ID : SA11A.478442

Amount of Each Receipt this Period
250.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	450.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2277 OF 4311
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. MANDEVILLE, CRAIG, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 9886 SUNFLOWER HILL ST
 City LAS VEGAS State NV Zip Code 89178-3827
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 430.00

Date of Receipt
 11 / 03 / 2016
Transaction ID : SA11A.468747
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

B. MANDEL, MIRIAM, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 8022 OKEAN TERRACE
 City LOS ANGELES State CA Zip Code 90046-1143
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) REAL ESTATE
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 575.00

Date of Receipt
 10 / 26 / 2016
Transaction ID : SA11A.454594
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

C. MANDLER, JOHN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 8 UNDERCLIFF TERRACE
 City WEST ORANGE State NJ Zip Code 07052-3930
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) MANDEL, KATZ & BROSNAN LLP Occupation (for Individual) ATTORNEY
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 1050.00

Date of Receipt
 10 / 22 / 2016
Transaction ID : SA11A.449643
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶ 175.00
TOTAL This Period (last page this line number only).....▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2278 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. MANDLER, JOHN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 8 UNDERCLIFF TERRACE
 City WEST ORANGE State NJ Zip Code 07052-3930
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) MANDEL, KATZ & BROSNAN LLP Occupation (for Individual) ATTORNEY
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 1050.00

Date of Receipt 11 / 05 / 2016
Transaction ID : SA11A.478795
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

B. MANELSKI, DENIS, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1804 OCEAN DR
 City VERO BEACH State FL Zip Code 32963-2110
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) INFORMATION REQUESTED PER BEST EFFORTS Occupation (for Individual) INFORMATION REQUESTED PER BE
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 10000.00

Date of Receipt 11 / 14 / 2016
Transaction ID : SA11A.468431
 Amount of Each Receipt this Period 10000.00
 Memo Item CONTRIBUTION

C. MANGELSDORF, CLARK, P., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2304 WATKINS AVENUE
 City LATROBE State PA Zip Code 15650-3272
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 1450.00

Date of Receipt 11 / 15 / 2016
Transaction ID : SA11A.468292
 Amount of Each Receipt this Period 350.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	10600.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2279 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
Team Ryan

A. MANLEY, GARY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 9336 SIENNA RIDGE DR.
 City LAS VEGAS State NV Zip Code 89117-7015
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) ROSEMAN UNIVERSITY Occupation (for Individual) PROFESSOR
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 900.00

Date of Receipt
 11 / 02 / 2016
Transaction ID : SA11A.466027
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION

B. MANLEY, GARY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 9336 SIENNA RIDGE DR.
 City LAS VEGAS State NV Zip Code 89117-7015
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) ROSEMAN UNIVERSITY Occupation (for Individual) PROFESSOR
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 900.00

Date of Receipt
 11 / 02 / 2016
Transaction ID : SA11A.466028
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION

C. MANLEY, GARY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 9336 SIENNA RIDGE DR.
 City LAS VEGAS State NV Zip Code 89117-7015
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) ROSEMAN UNIVERSITY Occupation (for Individual) PROFESSOR
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 900.00

Date of Receipt
 11 / 04 / 2016
Transaction ID : SA11A.474038
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	300.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2280 OF 4311
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name A. MANLEY, JUNE, , ,			Date of Receipt
Mailing Address 2230 MINERVA COURT			<input type="text" value="10"/> / <input type="text" value="28"/> / <input type="text" value="2016"/>
City LIVERMORE	State CA	Zip Code 94550-8282	Transaction ID : SA11A.455671
FEC ID number of contributing federal political committee. <input type="text" value="C"/>			Amount of Each Receipt this Period <input type="text" value="75.00"/>
Name of Employer (for Individual) PHALA DATA		Occupation (for Individual) CEO	<input type="checkbox"/> Memo Item CONTRIBUTION
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ <input type="text" value="225.00"/>		

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name B. MANLEY, JUNE, , ,			Date of Receipt
Mailing Address 2230 MINERVA COURT			<input type="text" value="10"/> / <input type="text" value="28"/> / <input type="text" value="2016"/>
City LIVERMORE	State CA	Zip Code 94550-8282	Transaction ID : SA11A.455672
FEC ID number of contributing federal political committee. <input type="text" value="C"/>			Amount of Each Receipt this Period <input type="text" value="75.00"/>
Name of Employer (for Individual) PHALA DATA		Occupation (for Individual) CEO	<input type="checkbox"/> Memo Item CONTRIBUTION
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ <input type="text" value="225.00"/>		

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name C. MANLEY, JUNE, , ,			Date of Receipt
Mailing Address 2230 MINERVA COURT			<input type="text" value="11"/> / <input type="text" value="04"/> / <input type="text" value="2016"/>
City LIVERMORE	State CA	Zip Code 94550-8282	Transaction ID : SA11A.471429
FEC ID number of contributing federal political committee. <input type="text" value="C"/>			Amount of Each Receipt this Period <input type="text" value="75.00"/>
Name of Employer (for Individual) PHALA DATA		Occupation (for Individual) CEO	<input type="checkbox"/> Memo Item CONTRIBUTION
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Aggregate Year-to-Date ▼ <input type="text" value="225.00"/>		

SUBTOTAL of Receipts This Page (optional).....▶	<input type="text" value="225.00"/>
TOTAL This Period (last page this line number only).....▶	<input type="text" value=""/>

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2281 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. MANLEY, MARK, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 13526 GREENWOOD MANOR DR
 City CYPRESS State TX Zip Code 77429-4838
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) HYDROCARBON DATA SYSTEMS Occupation (for Individual) PRESIDENT
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 375.00

Date of Receipt 11 / 02 / 2016
Transaction ID : SA11A.465812
 Amount of Each Receipt this Period 375.00
 Memo Item CONTRIBUTION

B. MANN, CAROLYN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1201 E. CANAL DRIVE
 City TURLOCK State CA Zip Code 95380-4159
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) MANN ELECTRIC, INC. Occupation (for Individual) ELECTRICAL CONTRACTOR
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 450.00

Date of Receipt 11 / 04 / 2016
Transaction ID : SA11A.471634
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

C. MANN, JOHN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 250 WEST COPPER ST
 City BUTTE State MT Zip Code 59701-9274
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 750.00

Date of Receipt 10 / 25 / 2016
Transaction ID : SA11A.451854
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	675.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2282 OF 4311
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. MANN, JOHN, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 250 WEST COPPER ST

City BUTTE	State MT	Zip Code 59701-9274
---------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
750.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		25		2016

Transaction ID : SA11A.451856

Amount of Each Receipt this Period
250.00

Memo Item
CONTRIBUTION

B. MANN, JOHN, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 250 WEST COPPER ST

City BUTTE	State MT	Zip Code 59701-9274
---------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
750.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11		06		2016

Transaction ID : SA11A.477241

Amount of Each Receipt this Period
250.00

Memo Item
CONTRIBUTION

C. MANNING, CHAS, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 2354 BETTONA ST

City LIVERMORE	State CA	Zip Code 94550-7151
-------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11		07		2016

Transaction ID : SA11A.480486

Amount of Each Receipt this Period
250.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	750.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2283 OF 4311
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. MANNING, ELLIS, W., MR., JR
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 300 DEER VALLEY ROAD
APT. 1E

City SAN RAFAEL	State CA	Zip Code 94903-5514
--------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) RETIRED	Occupation (for Individual) RETIRED
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1950.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		25		2016

Transaction ID : SA11A.447355

Amount of Each Receipt this Period
400.00

Memo Item CONTRIBUTION

B. MANNING MD, J., , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 3 LITTLE CREEK

City FLOWOOD	State MS	Zip Code 39232-9346
-----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		30		2016

Transaction ID : SA11A.459808

Amount of Each Receipt this Period
250.00

Memo Item CONTRIBUTION

C. MANNING, JAMES, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 12 LAUREL LEAF CT

City DURHAM	State NC	Zip Code 27703-8196
----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
225.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		27		2016

Transaction ID : SA11A.454047

Amount of Each Receipt this Period
100.00

Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	750.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2284 OF 4311
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. MANNING, JAMES, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 12 LAUREL LEAF CT

City DURHAM	State NC	Zip Code 27703-8196
----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
225.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
11		08		2016

Transaction ID : SA11A.479713

Amount of Each Receipt this Period
25.00

Memo Item
CONTRIBUTION

B. MANNING, JAMES, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 12 LAUREL LEAF CT

City DURHAM	State NC	Zip Code 27703-8196
----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
225.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
11		07		2016

Transaction ID : SA11A.480651

Amount of Each Receipt this Period
100.00

Memo Item
CONTRIBUTION

C. MANNINO, KATHY, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 109 SEARIGHT DR

City BADEN	State PA	Zip Code 15005-2874
---------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) CAM HOSPITALITY	Occupation (for Individual) ACCOUNTANT
--	---

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
230.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
10		25		2016

Transaction ID : SA11A.448538

Amount of Each Receipt this Period
50.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	175.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2285 OF 4311
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. MANNINO, KATHY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 109 SEARIGHT DR
 City BADEN State PA Zip Code 15005-2874
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) CAM HOSPITALITY Occupation (for Individual) ACCOUNTANT
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 230.00

Date of Receipt 10 / 31 / 2016
Transaction ID : SA11A.457583
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

B. MANNSFELD, SVEN-PETER, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address HILLWOOD ROAD 48
 City MOBILE State AL Zip Code 36608-2310
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 600.00

Date of Receipt 10 / 21 / 2016
Transaction ID : SA11A.444095
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

C. MANNSFELD, SVEN-PETER, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address HILLWOOD ROAD 48
 City MOBILE State AL Zip Code 36608-2310
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 600.00

Date of Receipt 10 / 25 / 2016
Transaction ID : SA11A.448918
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 250.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2286 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name A. MANNSFELD, SVEN-PETER, , ,			Date of Receipt MM / DD / YYYY 11 / 04 / 2016 Transaction ID : SA11A.470450
Mailing Address HILLWOOD ROAD 48			Amount of Each Receipt this Period 100.00
City MOBILE	State AL	Zip Code 36608-2310	<input type="checkbox"/> Memo Item CONTRIBUTION
FEC ID number of contributing federal political committee. C			
Name of Employer (for Individual) NONE		Occupation (for Individual) RETIRED	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 600.00		

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name B. MANSFIELD, MARY, , ,			Date of Receipt MM / DD / YYYY 10 / 27 / 2016 Transaction ID : SA11A.453443
Mailing Address 2553 S CLAYTON ST			Amount of Each Receipt this Period 100.00
City DENVER	State CO	Zip Code 80210-6114	<input type="checkbox"/> Memo Item CONTRIBUTION
FEC ID number of contributing federal political committee. C			
Name of Employer (for Individual) NONE		Occupation (for Individual) RETIRED	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1125.00		

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name C. MANSFIELD, MARY, , ,			Date of Receipt MM / DD / YYYY 10 / 26 / 2016 Transaction ID : SA11A.454671
Mailing Address 2553 S CLAYTON ST			Amount of Each Receipt this Period 50.00
City DENVER	State CO	Zip Code 80210-6114	<input type="checkbox"/> Memo Item CONTRIBUTION
FEC ID number of contributing federal political committee. C			
Name of Employer (for Individual) NONE		Occupation (for Individual) RETIRED	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Aggregate Year-to-Date ▼ 1125.00		

SUBTOTAL of Receipts This Page (optional).....▶	250.00
TOTAL This Period (last page this line number only).....▶	

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2287 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. MANSFIELD, MARY, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 2553 S CLAYTON ST

City DENVER	State CO	Zip Code 80210-6114
----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1125.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		31		2016

Transaction ID : SA11A.463579

Amount of Each Receipt this Period
50.00

Memo Item CONTRIBUTION

B. MANSFIELD, MARY, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 2553 S CLAYTON ST

City DENVER	State CO	Zip Code 80210-6114
----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1125.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		31		2016

Transaction ID : SA11A.464613

Amount of Each Receipt this Period
100.00

Memo Item CONTRIBUTION

C. MANSFIELD, MARY, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 2553 S CLAYTON ST

City DENVER	State CO	Zip Code 80210-6114
----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
1125.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11		07		2016

Transaction ID : SA11A.480579

Amount of Each Receipt this Period
25.00

Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	175.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2288 OF 4311
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. MANSFIELD, MARY, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 2553 S CLAYTON ST

City DENVER	State CO	Zip Code 80210-6114
----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1125.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	07	/	2016

Transaction ID : SA11A.480580

Amount of Each Receipt this Period
25.00

Memo Item CONTRIBUTION

B. MANTE, GEORGE, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 5011 DONOVAN DRIVE SE
2

City OLYMPIA	State WA	Zip Code 98501-4835
-----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) EMPLOYMENT SECURITY DEPT. ST OF WA	Occupation (for Individual) SENIOR POLICY ANALYST
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
305.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	29	/	2016

Transaction ID : SA11A.460751

Amount of Each Receipt this Period
50.00

Memo Item CONTRIBUTION

C. MANTE, GEORGE, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 5011 DONOVAN DRIVE SE
2

City OLYMPIA	State WA	Zip Code 98501-4835
-----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) EMPLOYMENT SECURITY DEPT. ST OF WA	Occupation (for Individual) SENIOR POLICY ANALYST
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
305.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	29	/	2016

Transaction ID : SA11A.460752

Amount of Each Receipt this Period
50.00

Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	125.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2289 OF 4311
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. MANTLER, RICHARD, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 6610 COUNTRY LN N

City RICHMOND	State TX	Zip Code 77406-7762
------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
350.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		31		2016

Transaction ID : SA11A.463893

Amount of Each Receipt this Period
75.00

Memo Item
CONTRIBUTION

B. MANTLER, RICHARD, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 6610 COUNTRY LN N

City RICHMOND	State TX	Zip Code 77406-7762
------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
350.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11		06		2016

Transaction ID : SA11A.477409

Amount of Each Receipt this Period
100.00

Memo Item
CONTRIBUTION

C. MANWARING, MADELINE, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 7734 RETREAT LANE

City WARRENTON	State VA	Zip Code 20186-7546
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
525.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		26		2016

Transaction ID : SA11A.449888

Amount of Each Receipt this Period
50.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	225.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2290 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. MANWARING, MADELINE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 7734 RETREAT LANE
 City WARRENTON State VA Zip Code 20186-7546
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 525.00

Date of Receipt
 11 / 07 / 2016
Transaction ID : SA11A.476478
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION

B. MANWARING, MADELINE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 7734 RETREAT LANE
 City WARRENTON State VA Zip Code 20186-7546
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 525.00

Date of Receipt
 11 / 07 / 2016
Transaction ID : SA11A.476479
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION

C. MAPLES, JAMES, C., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO BOX 175
 City NEWTON State IA Zip Code 50208-0175
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt
 10 / 28 / 2016
Transaction ID : SA11A.454737
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	300.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2291 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. MARAIS, M, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address **PO BOX 4365**
 City **JACKSON** State **WY** Zip Code **83001-4365**
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) **W E WECKER ASSOCIATES** Occupation (for Individual) **STATISTICIAN**
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ **750.00**

Date of Receipt **11 / 07 / 2016**
Transaction ID : SA11A.474633
 Amount of Each Receipt this Period **250.00**
 Memo Item
CONTRIBUTION

B. MARAIS, M, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address **PO BOX 4365**
 City **JACKSON** State **WY** Zip Code **83001-4365**
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) **W E WECKER ASSOCIATES** Occupation (for Individual) **STATISTICIAN**
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ **750.00**

Date of Receipt **11 / 07 / 2016**
Transaction ID : SA11A.474637
 Amount of Each Receipt this Period **250.00**
 Memo Item
CONTRIBUTION

C. MARANTE, ROLANDO, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address **5077 SW 183RD AVE**
 City **MIRAMAR** State **FL** Zip Code **33029-6316**
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) **INFORMATION REQUESTED PER BEST EFFORTS** Occupation (for Individual) **INFORMATION REQUESTED PER BEST EFFORTS**
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ **1000.00**

Date of Receipt **10 / 24 / 2016**
Transaction ID : SA11A.443450
 Amount of Each Receipt this Period **1000.00**
 Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... **1500.00**
TOTAL This Period (last page this line number only).....

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2292 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
Team Ryan

A. MARCHETTI, GILBERTO, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 566 YARDLEY TR
 City MUNDELEIN State IL Zip Code 60060-3379
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 10 / 24 / 2016
Transaction ID : SA11A.445977
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

B. MARCHETTI, GILBERTO, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 566 YARDLEY TR
 City MUNDELEIN State IL Zip Code 60060-3379
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 10 / 23 / 2016
Transaction ID : SA11A.446482
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

C. MARCINIAK, RICHARD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1065 GATOR TRAIL
 City WEST PALM BEACH State FL Zip Code 33409-2059
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 225.00

Date of Receipt 11 / 04 / 2016
Transaction ID : SA11A.472775
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	175.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2293 OF 4311
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. MARCUS, NANCY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3953 MAPLE AVE, SUITE 290
 City DALLAS State TX Zip Code 75219-3227
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) CAIN CAPITAL LLC & SMU Occupation (for Individual) FINANCE
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 10 / 24 / 2016
Transaction ID : SA11A.444072
 Amount of Each Receipt this Period 500.00
 Memo Item
 CONTRIBUTION

B. MARDAK, KEITH, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2743 NORTH LAKE DR
 City MILWAUKEE State WI Zip Code 53211-3851
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) HAL LEONARD CORPORATION Occupation (for Individual) CHAIRMAN-CEO
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 2700.00

Date of Receipt 11 / 03 / 2016
Transaction ID : SA11A.465236
 Amount of Each Receipt this Period 2700.00
 Memo Item
 CONTRIBUTION

C. MARDA, RAMA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1705 MUSKET CIRCLE
 City UPPER HOLLAND State PA Zip Code 19053-1500
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 2000.00

Date of Receipt 10 / 24 / 2016
Transaction ID : SA11A.446223
 Amount of Each Receipt this Period 1000.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 4200.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2294 OF 4311
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. MARDA, RAMA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1705 MUSKET CIRCLE

City UPPER HOLLAND	State PA	Zip Code 19053-1500
-----------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
2000.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 24 / 2016
Transaction ID : SA11A.446224

Amount of Each Receipt this Period
 1000.00

Memo Item
 CONTRIBUTION

B. MARINO, MARY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 127 WILDCAT RD

City MONTICELLO	State NY	Zip Code 12701-4126
--------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
373.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 04 / 2016
Transaction ID : SA11A.474259

Amount of Each Receipt this Period
 25.00

Memo Item
 CONTRIBUTION

C. MARIO, FRANK, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 838 N CLINTON AVENUE

City DALLAS	State TX	Zip Code 75208-3661
----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) PENSION RESOURCES CORPORATION	Occupation (for Individual) PENSION ADVISOR
--	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 29 / 2016
Transaction ID : SA11A.461076

Amount of Each Receipt this Period
 50.00

Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	1075.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2295 OF 4311
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. MARIO, FRANK, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 838 N CLINTON AVENUE

City DALLAS	State TX	Zip Code 75208-3661
----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) PENSION RESOURCES CORPORATION	Occupation (for Individual) PENSION ADVISOR
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	04	/	2016

Transaction ID : SA11A.472312

Amount of Each Receipt this Period
50.00

Memo Item CONTRIBUTION

B. MARIX, MICHAEL, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 4627 W ALABAMA

City HOUSTON	State TX	Zip Code 77027-4701
-----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
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Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	28	/	2016

Transaction ID : SA11A.455807

Amount of Each Receipt this Period
250.00

Memo Item CONTRIBUTION

C. MARK, RUTH, A., MRS.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 1811 WOODGATE DRIVE

City GOSHEN	State IN	Zip Code 46526-6456
----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
285.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	21	/	2016

Transaction ID : SA11A.444205

Amount of Each Receipt this Period
25.00

Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	325.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2296 OF 4311
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. MARK, RUTH, A., MRS.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1811 WOODGATE DRIVE

City GOSHEN	State IN	Zip Code 46526-6456
----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
285.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		25		2016

Transaction ID : SA11A.448597

Amount of Each Receipt this Period
25.00

Memo Item
CONTRIBUTION

B. MARK, RUTH, A., MRS.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1811 WOODGATE DRIVE

City GOSHEN	State IN	Zip Code 46526-6456
----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
285.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		26		2016

Transaction ID : SA11A.450671

Amount of Each Receipt this Period
25.00

Memo Item
CONTRIBUTION

C. MARK, RUTH, A., MRS.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1811 WOODGATE DRIVE

City GOSHEN	State IN	Zip Code 46526-6456
----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
285.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		27		2016

Transaction ID : SA11A.453313

Amount of Each Receipt this Period
25.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	75.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2297 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13 <input type="checkbox"/> 11b <input type="checkbox"/> 14 <input type="checkbox"/> 11c <input type="checkbox"/> 15 <input type="checkbox"/> 12 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. MARK, RUTH, A., MRS.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1811 WOODGATE DRIVE
 City GOSHEN State IN Zip Code 46526-6456
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 285.00

Date of Receipt 10 / 29 / 2016
Transaction ID : SA11A.460753
 Amount of Each Receipt this Period 20.00
 Memo Item CONTRIBUTION

B. MARK, RUTH, A., MRS.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1811 WOODGATE DRIVE
 City GOSHEN State IN Zip Code 46526-6456
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 285.00

Date of Receipt 11 / 07 / 2016
Transaction ID : SA11A.475034
 Amount of Each Receipt this Period 20.00
 Memo Item CONTRIBUTION

C. MARKEL, BRUCE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 230 E. CUMMINGS ST.
 City BROWNSTOWN State IN Zip Code 47220-1961
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) INFORMATION REQUESTED PER BEST EFFORTS Occupation (for Individual) INFORMATION REQUESTED PER BEST EFFORTS
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 10 / 25 / 2016
Transaction ID : SA11A.452205
 Amount of Each Receipt this Period 500.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 540.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2298 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. MARKHAM, JOSEPH, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 15180 W. 50TH DR.
 City GOLDEN State CO Zip Code 80403-1542
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) BOUNCE INC Occupation (for Individual) CEO
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt 11 / 04 / 2016
Transaction ID : SA11A.471665
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

B. MARKHAM, KATHLEEN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 648 SAXONY BLVD.
 City ST PETERSBURG State FL Zip Code 33716-1284
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 11 / 04 / 2016
Transaction ID : SA11A.473224
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

C. MARKHAM, ROBERT, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3829 KINROSS DRIVE
 City BIRMINGHAM State AL Zip Code 35242-5803
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SOUTHERN COMPANY SERVICES, INC Occupation (for Individual) RISK MANAGER
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt 10 / 28 / 2016
Transaction ID : SA11A.456012
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	450.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2299 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. MARKHAM, ROBERT, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3829 KINROSS DRIVE
 City BIRMINGHAM State AL Zip Code 35242-5803
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SOUTHERN COMPANY SERVICES, INC Occupation (for Individual) RISK MANAGER
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 400.00

Date of Receipt 11 / 04 / 2016
Transaction ID : SA11A.472981
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

B. MARKOWITZ, LANCE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4810 PALM DRIVE
 City LA CANADA State CA Zip Code 91011-1513
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) UNION BANK Occupation (for Individual) BANKER
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 350.00

Date of Receipt 10 / 24 / 2016
Transaction ID : SA11A.449535
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

C. MARKOWITZ, LANCE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4810 PALM DRIVE
 City LA CANADA State CA Zip Code 91011-1513
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) UNION BANK Occupation (for Individual) BANKER
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 350.00

Date of Receipt 11 / 01 / 2016
Transaction ID : SA11A.463117
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	250.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2300 OF 4311
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. MARKOVITZ, LAWRENCE, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 13200 JASMINE HILL TERRACE

City ROCKVILLE	State MD	Zip Code 20850-3665
-------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) SELF EMPLOYED	Occupation (for Individual) PHYSICIAN
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1200.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		21		2016

Transaction ID : SA11A.444619

Amount of Each Receipt this Period
1000.00

Memo Item
CONTRIBUTION

B. MARKS, GREG, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 3534 DUMBARTON ROAD NW

City ATLANTA	State GA	Zip Code 30327-2614
-----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) INFORMATION REQUESTED PER BEST EFFORTS	Occupation (for Individual) INFORMATION REQUESTED PER BE
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Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11		02		2016

Transaction ID : SA11A.465147

Amount of Each Receipt this Period
1000.00

Memo Item
CONTRIBUTION

C. MAROSI, MARK, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1120 35TH ST

City DOWNERS GROVE	State IL	Zip Code 60515-1419
-----------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) IIC	Occupation (for Individual) EXECUTIVE
--	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
300.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11		04		2016

Transaction ID : SA11A.473997

Amount of Each Receipt this Period
100.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	2100.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2301 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. MARRON, DONALD, B., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1285 AVENUE OF THE AMERICAS 14TH F
 City NEW YORK State NY Zip Code 10019-6028
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) LIGHTYEAR CAPITAL Occupation (for Individual) CHAIRMAN
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 50000.00

Date of Receipt 11 / 08 / 2016
Transaction ID : SA11A.468127
 Amount of Each Receipt this Period 50000.00
 Memo Item CONTRIBUTION

B. MARSCHEL, GLENN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 10325 GAYWOOD ROAD
 City DALLAS State TX Zip Code 75229-6608
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 2000.00

Date of Receipt 10 / 20 / 2016
Transaction ID : SA11A.442098
 Amount of Each Receipt this Period 2000.00
 Memo Item CONTRIBUTION

C. MARSHALL, C TRAVIS, TRAVIS, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 9707 OLD GEORGETOWN ROAD APT 2606
 City BETHESDA State MD Zip Code 20814-1763
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 1500.00

Date of Receipt 10 / 21 / 2016
Transaction ID : SA11A.443605
 Amount of Each Receipt this Period 1000.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	53000.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2302 OF 4311
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. MARSHALL, C TRAVIS, TRAVIS, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 9707 OLD GEORGETOWN ROAD
 APT 2606
 City BETHESDA State MD Zip Code 20814-1763
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1500.00

Date of Receipt 11 / 04 / 2016
Transaction ID : SA11A.467505
 Amount of Each Receipt this Period 300.00
 Memo Item CONTRIBUTION

B. MARSHALL, JOHN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 136 MOORINGS PARK DR.
 P502
 City NAPLES State FL Zip Code 34105-2995
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 800.00

Date of Receipt 10 / 25 / 2016
Transaction ID : SA11A.452207
 Amount of Each Receipt this Period 200.00
 Memo Item CONTRIBUTION

C. MARSHALL, JOHN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 136 MOORINGS PARK DR.
 P502
 City NAPLES State FL Zip Code 34105-2995
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 800.00

Date of Receipt 11 / 02 / 2016
Transaction ID : SA11A.465853
 Amount of Each Receipt this Period 200.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 700.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2303 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name A. MARSHA, L., , ,			Date of Receipt MM / DD / YYYY 10 / 24 / 2016
Mailing Address 5655 PINEBRANCH RD.			Transaction ID : SA11A.449249
City COLUMBIA	State SC	Zip Code 29206-1502	Amount of Each Receipt this Period 100.00
FEC ID number of contributing federal political committee. C			<input type="checkbox"/> Memo Item CONTRIBUTION
Name of Employer (for Individual) NONE		Occupation (for Individual) RETIRED	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00		

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name B. MARSHA, L., , ,			Date of Receipt MM / DD / YYYY 10 / 24 / 2016
Mailing Address 5655 PINEBRANCH RD.			Transaction ID : SA11A.449251
City COLUMBIA	State SC	Zip Code 29206-1502	Amount of Each Receipt this Period 100.00
FEC ID number of contributing federal political committee. C			<input type="checkbox"/> Memo Item CONTRIBUTION
Name of Employer (for Individual) NONE		Occupation (for Individual) RETIRED	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00		

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name C. MARSHA, L., , ,			Date of Receipt MM / DD / YYYY 11 / 05 / 2016
Mailing Address 5655 PINEBRANCH RD.			Transaction ID : SA11A.478408
City COLUMBIA	State SC	Zip Code 29206-1502	Amount of Each Receipt this Period 50.00
FEC ID number of contributing federal political committee. C			<input type="checkbox"/> Memo Item CONTRIBUTION
Name of Employer (for Individual) NONE		Occupation (for Individual) RETIRED	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Aggregate Year-to-Date ▼ 250.00		

SUBTOTAL of Receipts This Page (optional).....▶	250.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2304 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. MARSH, LORAL, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 611 ROTUNDA STREET
 City LYNCHBURG State VA Zip Code 24502-2073
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) LIBERTY UNIVERSITY Occupation (for Individual) PUBLISHER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 825.00

Date of Receipt
 11 / 02 / 2016
Transaction ID : SA11A.466570
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

B. MARSH, LORAL, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 611 ROTUNDA STREET
 City LYNCHBURG State VA Zip Code 24502-2073
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) LIBERTY UNIVERSITY Occupation (for Individual) PUBLISHER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 825.00

Date of Receipt
 11 / 02 / 2016
Transaction ID : SA11A.466572
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

C. MARSH, LORAL, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 611 ROTUNDA STREET
 City LYNCHBURG State VA Zip Code 24502-2073
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) LIBERTY UNIVERSITY Occupation (for Individual) PUBLISHER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 825.00

Date of Receipt
 11 / 07 / 2016
Transaction ID : SA11A.475958
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 75.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2305 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. MARSHALL, MARIE, M., MS.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 100 RIDGESIDE ROAD
 City CHATTANOOGA State TN Zip Code 37411-1829
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1100.00

Date of Receipt 10 / 25 / 2016
Transaction ID : SA11A.447526
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

B. MARSHALL, WILLIAM, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 287 VISTA OAK DR
 City LONGWOOD State FL Zip Code 32779-3013
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 205.00

Date of Receipt 10 / 22 / 2016
Transaction ID : SA11A.446851
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

C. MARSHALL, WILLIAM, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 287 VISTA OAK DR
 City LONGWOOD State FL Zip Code 32779-3013
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 205.00

Date of Receipt 11 / 04 / 2016
Transaction ID : SA11A.471867
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	200.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2306 OF 4311
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. MARSOLAN, NORMAN, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1164 BONVIEW LN NE

City ATLANTA	State GA	Zip Code 30324-2904
-----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) GEORGIA TECH	Occupation (for Individual) PROFESSOR
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
538.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	27	/	2016

Transaction ID : SA11A.456731

Amount of Each Receipt this Period
50.00

Memo Item
CONTRIBUTION

B. MARSOLAN, NORMAN, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1164 BONVIEW LN NE

City ATLANTA	State GA	Zip Code 30324-2904
-----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) GEORGIA TECH	Occupation (for Individual) PROFESSOR
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
538.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	02	/	2016

Transaction ID : SA11A.469539

Amount of Each Receipt this Period
25.00

Memo Item
CONTRIBUTION

C. MARTIN, ANDY, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 4812 CREEK MEADOW COVE

City SPICEWOOD	State TX	Zip Code 78669-6122
-------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) DIGITAL CHEETAH SOLUTIONS INC.	Occupation (for Individual) CTO
---	------------------------------------

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	26	/	2016

Transaction ID : SA11A.450322

Amount of Each Receipt this Period
250.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	325.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2307 OF 4311
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. MARTIN, ANDY, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 4812 CREEK MEADOW COVE

City SPICEWOOD	State TX	Zip Code 78669-6122
-------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) DIGITAL CHEETAH SOLUTIONS INC.	Occupation (for Individual) CTO
---	------------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	06	/	2016

Transaction ID : SA11A.478046

Amount of Each Receipt this Period
250.00

Memo Item
CONTRIBUTION

B. MARTIN, BARBARA, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 903 BUCKBOARD WAY

City LANSDALE	State PA	Zip Code 19446-4447
------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
302.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	25	/	2016

Transaction ID : SA11A.449109

Amount of Each Receipt this Period
25.00

Memo Item
CONTRIBUTION

C. MARTIN, BARBARA, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 903 BUCKBOARD WAY

City LANSDALE	State PA	Zip Code 19446-4447
------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
302.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	31	/	2016

Transaction ID : SA11A.458386

Amount of Each Receipt this Period
25.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	300.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2308 OF 4311
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. MARTIN, BARBARA, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 903 BUCKBOARD WAY

City LANSDALE	State PA	Zip Code 19446-4447
------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
302.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	07	/	2016

Transaction ID : SA11A.480682

Amount of Each Receipt this Period
25.00

Memo Item CONTRIBUTION

B. MARTIN, DAVID, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 8965 SW 156TH STREET

City PALMETTO BAY	State FL	Zip Code 33157-1931
----------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) SELF EMPLOYED	Occupation (for Individual) INSURANCE AGENT
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	27	/	2016

Transaction ID : SA11A.452264

Amount of Each Receipt this Period
500.00

Memo Item CONTRIBUTION

C. MARTIN, DONA, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 3291 OLD OAK TREE LANE

City ESCONDIDO	State CA	Zip Code 92026-8416
-------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	26	/	2016

Transaction ID : SA11A.450896

Amount of Each Receipt this Period
100.00

Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	625.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2309 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. MARTIN, EDWARD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2328 COLISEUM STREET
 City NEW ORLEANS State LA Zip Code 70130-5767
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 700.00

Date of Receipt 10 / 24 / 2016
Transaction ID : SA11A.446156
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

B. MARTIN, ELIZABETH, , MS.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1721-2 NANTUCKET
 City HOUSTON State TX Zip Code 77057-3362
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) RANCHER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 15000.00

Date of Receipt 10 / 25 / 2016
Transaction ID : SA11A.447799
 Amount of Each Receipt this Period 5000.00
 Memo Item CONTRIBUTION

C. MARTIN, ELIZABETH, , MS.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1721-2 NANTUCKET
 City HOUSTON State TX Zip Code 77057-3362
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) RANCHER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 15000.00

Date of Receipt 10 / 25 / 2016
Transaction ID : SA11A.447800
 Amount of Each Receipt this Period 5000.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	10100.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2310 OF 4311
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. MARTIN, ELIZABETH, , MS.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1721-2 NANTUCKET

City HOUSTON	State TX	Zip Code 77057-3362
-----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) SELF EMPLOYED	Occupation (for Individual) RANCHER
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
15000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11		03		2016

Transaction ID : SA11A.468820

Amount of Each Receipt this Period
5000.00

Memo Item
CONTRIBUTION

B. MARTIN, ELLEN, W., MS.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 4955 GLENBROOK ROAD NW

City WASHINGTON	State DC	Zip Code 20016-3222
--------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) HOUSEWIFE	Occupation (for Individual) HOUSEWIFE
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
2000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		24		2016

Transaction ID : SA11A.444040

Amount of Each Receipt this Period
1000.00

Memo Item
CONTRIBUTION

C. MARTIN, IAN, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1951 W. SONOMA AVE

City STOCKTON	State CA	Zip Code 95204-2838
------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) SELF EMPLOYED	Occupation (for Individual) ATTORNEY
--	---

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
225.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11		07		2016

Transaction ID : SA11A.475795

Amount of Each Receipt this Period
100.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	6100.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2311 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name A. MARTIN, IAN, , ,			Date of Receipt MM / DD / YYYY 11 / 07 / 2016
Mailing Address 1951 W. SONOMA AVE			Transaction ID : SA11A.475796
City STOCKTON	State CA	Zip Code 95204-2838	Amount of Each Receipt this Period 100.00
FEC ID number of contributing federal political committee. C			<input type="checkbox"/> Memo Item CONTRIBUTION
Name of Employer (for Individual) SELF EMPLOYED		Occupation (for Individual) ATTORNEY	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 225.00		

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name B. MARTIN, IAN, , ,			Date of Receipt MM / DD / YYYY 11 / 08 / 2016
Mailing Address 1951 W. SONOMA AVE			Transaction ID : SA11A.479805
City STOCKTON	State CA	Zip Code 95204-2838	Amount of Each Receipt this Period 25.00
FEC ID number of contributing federal political committee. C			<input type="checkbox"/> Memo Item CONTRIBUTION
Name of Employer (for Individual) SELF EMPLOYED		Occupation (for Individual) ATTORNEY	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 225.00		

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name C. MARTIN, J., , ,			Date of Receipt MM / DD / YYYY 11 / 02 / 2016
Mailing Address 10095 LAWYERS RD			Transaction ID : SA11A.466625
City VIENNA	State VA	Zip Code 22181-2939	Amount of Each Receipt this Period 500.00
FEC ID number of contributing federal political committee. C			<input type="checkbox"/> Memo Item CONTRIBUTION
Name of Employer (for Individual) THE LIVINGSTON GROUP		Occupation (for Individual) MAN PARTNER	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Aggregate Year-to-Date ▼ 1000.00		

SUBTOTAL of Receipts This Page (optional).....▶	625.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2312 OF 4311
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. MARTIN, J., , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 10095 LAWYERS RD

City VIENNA	State VA	Zip Code 22181-2939
----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) THE LIVINGSTON GROUP	Occupation (for Individual) MAN PARTNER
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1000.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
11		02		2016

Transaction ID : SA11A.466647

Amount of Each Receipt this Period
500.00

Memo Item
CONTRIBUTION

B. MARTINEZ, JEFFREY, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 125 STANFORD DR

City SAN ANTONIO	State TX	Zip Code 78212-2009
---------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) PVA	Occupation (for Individual) PHYSICIAN
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
11		04		2016

Transaction ID : SA11A.470664

Amount of Each Receipt this Period
250.00

Memo Item
CONTRIBUTION

C. MARTIN, JERALD, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 2820 COBRE VALLE LANE

City PLANO	State TX	Zip Code 75023-5414
---------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
1000.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
10		21		2016

Transaction ID : SA11A.444201

Amount of Each Receipt this Period
1000.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	1750.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2313 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. MARTIN, JOHN, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 4515 NEBRASKA AVE. N.W.

City WASHINGTON	State DC	Zip Code 20016-1849
--------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
300.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	04	/	2016

Transaction ID : SA11A.474158

Amount of Each Receipt this Period
100.00

Memo Item
CONTRIBUTION

B. MARTINEZ, JULIO, C., DR.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1728 ROSE GARDEN LANE

City ORLANDO	State FL	Zip Code 32825-8284
-----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) INFORMATION REQUESTED PER BEST EFFORTS	Occupation (for Individual) INFORMATION REQUESTED PER BE
---	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
300.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	04	/	2016

Transaction ID : SA11A.467631

Amount of Each Receipt this Period
200.00

Memo Item
CONTRIBUTION

C. MARTINO, MARIE, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 666 AUGUSTA COURT

City BERWYN	State PA	Zip Code 19312-1978
----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) SELF EMPLOYED	Occupation (for Individual) ATTORNEY
--	---

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	01	/	2016

Transaction ID : SA11A.461542

Amount of Each Receipt this Period
400.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	700.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2314 OF 4311
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. MARTINI, MICHAEL, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 2789 STONE MEADOW DR

City MILFORD	State MI	Zip Code 48380-3842
-----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) BRIDGESTONE	Occupation (for Individual) ENGINEER
--	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
225.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
11		05		2016

Transaction ID : SA11A.478758

Amount of Each Receipt this Period
25.00

Memo Item
CONTRIBUTION

B. MARTINELLI, PETE, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 4141 INDUSTRIAL ARK DR.

City NORCROSS	State GA	Zip Code 30071-1654
------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) MOVING SUPPLIES	Occupation (for Individual) OWNER
--	--------------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
600.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
10		20		2016

Transaction ID : SA11A.442210

Amount of Each Receipt this Period
100.00

Memo Item
CONTRIBUTION

C. MARTINELLI, PETE, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 4141 INDUSTRIAL ARK DR.

City NORCROSS	State GA	Zip Code 30071-1654
------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) MOVING SUPPLIES	Occupation (for Individual) OWNER
--	--------------------------------------

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
600.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
10		27		2016

Transaction ID : SA11A.454122

Amount of Each Receipt this Period
100.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	225.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2315 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. MARTIN, PETER, M., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4344 SANCTUARY WAY
 City BONITA SPRINGS State FL Zip Code 34134-8722
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 10 / 25 / 2016
Transaction ID : SA11A.448090
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

B. MARTIN, PETER, M., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4344 SANCTUARY WAY
 City BONITA SPRINGS State FL Zip Code 34134-8722
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 10 / 26 / 2016
Transaction ID : SA11A.450355
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

C. MARTIN, RICHARD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 620 MIRAMAR DR
 City HALF MOON BAY State CA Zip Code 94019-5131
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 275.00

Date of Receipt 10 / 31 / 2016
Transaction ID : SA11A.458130
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 125.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2316 OF 4311
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. MARTINEZ, ROBERT, E., MR.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 600 BOTETOURT GARDENS

City NORFOLK	State VA	Zip Code 23507-1804
-----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NORFOLK SOUTHERN CORP	Occupation (for Individual) RR MGMT
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
220.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		25		2016

Transaction ID : SA11A.447410

Amount of Each Receipt this Period
20.00

Memo Item
CONTRIBUTION

B. MARTINEZ, ROBERT, E., MR.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 600 BOTETOURT GARDENS

City NORFOLK	State VA	Zip Code 23507-1804
-----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NORFOLK SOUTHERN CORP	Occupation (for Individual) RR MGMT
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
220.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		28		2016

Transaction ID : SA11A.454744

Amount of Each Receipt this Period
200.00

Memo Item
CONTRIBUTION

C. MARTIN, RON, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1742 PEACOCK LANE

City FULLERTON	State CA	Zip Code 92833-2244
-------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) SELF EMPLOYED	Occupation (for Individual) INFORMATION SCIENTIST
--	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
600.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		27		2016

Transaction ID : SA11A.452581

Amount of Each Receipt this Period
50.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	270.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2317 OF 4311
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. MARTIN, RON, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 1742 PEACOCK LANE

City FULLERTON	State CA	Zip Code 92833-2244
-------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) SELF EMPLOYED	Occupation (for Individual) INFORMATION SCIENTIST
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
600.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	02	/	2016

Transaction ID : SA11A.466544

Amount of Each Receipt this Period
50.00

Memo Item
CONTRIBUTION

B. MARTIN, RUSSELL, L., MR.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 8592 LINDEN CT

City GRANBURY	State TX	Zip Code 76049-4754
------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
385.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	31	/	2016

Transaction ID : SA11A.458836

Amount of Each Receipt this Period
25.00

Memo Item
CONTRIBUTION

C. MARTIN, SUE, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 3 HUNTINGTON STREET

City LONGVIEW	State TX	Zip Code 75601-3500
------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
600.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	28	/	2016

Transaction ID : SA11A.455992

Amount of Each Receipt this Period
100.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	175.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2318 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
Team Ryan

A. MARTIN, SUE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3 HUNTINGTON STREET
 City LONGVIEW State TX Zip Code 75601-3500
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 600.00

Date of Receipt 11 / 04 / 2016
Transaction ID : SA11A.472891
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

B. MARTZ, WILLIAM, K., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 356 DALE ROAD
 City BETHEL PARK State PA Zip Code 15102-1206
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) EASTMAN CHEMICAL Occupation (for Individual) CHEMICAL ENGINEER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1250.00

Date of Receipt 10 / 20 / 2016
Transaction ID : SA11A.433383
 Amount of Each Receipt this Period 1000.00
 Memo Item CONTRIBUTION

C. MARURI, ANTHONY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5276 B CONCORD BLVD
 City CONCORD State CA Zip Code 94521-2323
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 10 / 26 / 2016
Transaction ID : SA11A.454386
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	1200.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2319 OF 4311
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. MARUSIC, SUZANA, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 70 DIVIDENCE RD

City READING	State MA	Zip Code 01867-1021
-----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
600.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	02	/	2016

Transaction ID : SA11A.470069

Amount of Each Receipt this Period
100.00

Memo Item CONTRIBUTION

B. MARVIN, ANDREW, A., ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 914 FAIRVIEW AVENUE

City EPHRATA	State PA	Zip Code 17522-1319
-----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
5450.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	25	/	2016

Transaction ID : SA11A.447401

Amount of Each Receipt this Period
5400.00

Memo Item CONTRIBUTION

C. MARVIN, AUDINE, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 4220 LOWER ROSWELL RD
UNIT #7300

City MARIETTA	State GA	Zip Code 30068-4167
------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
644.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	20	/	2016

Transaction ID : SA11A.442431

Amount of Each Receipt this Period
25.00

Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	5525.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2320 OF 4311
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. MARVIN, AUDINE, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 4220 LOWER ROSWELL RD
UNIT #7300

City MARIETTA State GA Zip Code 30068-4167

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
644.00

Date of Receipt
10 / 27 / 2016
Transaction ID : SA11A.453685

Amount of Each Receipt this Period
25.00

Memo Item CONTRIBUTION

B. MARVIN, AUDINE, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 4220 LOWER ROSWELL RD
UNIT #7300

City MARIETTA State GA Zip Code 30068-4167

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
644.00

Date of Receipt
10 / 27 / 2016
Transaction ID : SA11A.453688

Amount of Each Receipt this Period
25.00

Memo Item CONTRIBUTION

C. MARVIN, AUDINE, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 4220 LOWER ROSWELL RD
UNIT #7300

City MARIETTA State GA Zip Code 30068-4167

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
644.00

Date of Receipt
10 / 27 / 2016
Transaction ID : SA11A.453751

Amount of Each Receipt this Period
25.00

Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 75.00

TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2321 OF 4311
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. MARVIN, AUDINE, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 4220 LOWER ROSWELL RD
UNIT #7300

City MARIETTA State GA Zip Code 30068-4167

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
644.00

Date of Receipt
10 / 31 / 2016
Transaction ID : SA11A.464201

Amount of Each Receipt this Period
25.00

Memo Item CONTRIBUTION

B. MARVIN, AUDINE, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 4220 LOWER ROSWELL RD
UNIT #7300

City MARIETTA State GA Zip Code 30068-4167

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
644.00

Date of Receipt
10 / 31 / 2016
Transaction ID : SA11A.464207

Amount of Each Receipt this Period
25.00

Memo Item CONTRIBUTION

C. MARVIN, AUDINE, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 4220 LOWER ROSWELL RD
UNIT #7300

City MARIETTA State GA Zip Code 30068-4167

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
644.00

Date of Receipt
11 / 04 / 2016
Transaction ID : SA11A.473187

Amount of Each Receipt this Period
25.00

Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 75.00

TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 2322 OF 4311
<input checked="" type="checkbox"/>	11a	<input type="checkbox"/>	11b
<input type="checkbox"/>	13	<input type="checkbox"/>	14
<input type="checkbox"/>		<input type="checkbox"/>	11c
<input type="checkbox"/>		<input type="checkbox"/>	12
<input type="checkbox"/>		<input type="checkbox"/>	15
<input type="checkbox"/>		<input type="checkbox"/>	16
<input type="checkbox"/>		<input type="checkbox"/>	17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. MARVIN, JAMES, L., MR.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 3725 CHATAWAY COURT

City COLORADO SPRINGS	State CO	Zip Code 80906-4388
--------------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) RETIRED	Occupation (for Individual) RETIRED
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	01	/	2016

Transaction ID : SA11A.461815

Amount of Each Receipt this Period
1000.00

Memo Item CONTRIBUTION

B. MARVIN, OKSANNA, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1085 MARTIN RD

City TALMO	State GA	Zip Code 30575-1326
---------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) SELF EMPLOYED	Occupation (for Individual) FARMER
--	---------------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
230.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	28	/	2016

Transaction ID : SA11A.455149

Amount of Each Receipt this Period
20.00

Memo Item CONTRIBUTION

C. MARVIN, OKSANNA, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1085 MARTIN RD

City TALMO	State GA	Zip Code 30575-1326
---------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) SELF EMPLOYED	Occupation (for Individual) FARMER
--	---------------------------------------

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
230.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	07	/	2016

Transaction ID : SA11A.475902

Amount of Each Receipt this Period
20.00

Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	1040.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2323 OF 4311
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. MARX, MELVIN, , MR.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address P.O. BOX 428

City LYNN	State NC	Zip Code 28750-0428
FEC ID number of contributing federal political committee. C		
Name of Employer (for Individual) NONE		Occupation (for Individual) RETIRED
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 205.00

Date of Receipt
10 / 26 / 2016
Transaction ID : SA11A.450547

Amount of Each Receipt this Period
30.00

Memo Item
CONTRIBUTION

B. MARX, MELVIN, , MR.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address P.O. BOX 428

City LYNN	State NC	Zip Code 28750-0428
FEC ID number of contributing federal political committee. C		
Name of Employer (for Individual) NONE		Occupation (for Individual) RETIRED
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 205.00

Date of Receipt
10 / 26 / 2016
Transaction ID : SA11A.450555

Amount of Each Receipt this Period
25.00

Memo Item
CONTRIBUTION

C. MARX, WILLIAM, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 1509 SOUTHWICK ROAD

City VIRGINIA BEACH	State VA	Zip Code 23451-5965
FEC ID number of contributing federal political committee. C		
Name of Employer (for Individual) NEXCOM		Occupation (for Individual) BUYER
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		Aggregate Year-to-Date ▼ 240.00

Date of Receipt
10 / 30 / 2016
Transaction ID : SA11A.459893

Amount of Each Receipt this Period
100.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	155.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2324 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. MARX, WILLIAM, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1509 SOUTHWICK ROAD
 City VIRGINIA BEACH State VA Zip Code 23451-5965
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NEXCOM Occupation (for Individual) BUYER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 240.00

Date of Receipt 11 / 07 / 2016
Transaction ID : SA11A.480597
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

B. MASCHINO, MERRILL, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 7710 FALSTAFF COURT
 City MCLEAN State VA Zip Code 22102-2721
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 11 / 03 / 2016
Transaction ID : SA11A.468693
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

C. MASETTI, PAOLO, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 848 CARILLON CT
 City CREVE COEUR State MO Zip Code 63141-6316
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) IPC ST LOUIS Occupation (for Individual) PHYSICIAN
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 489.00

Date of Receipt 10 / 22 / 2016
Transaction ID : SA11A.446721
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 75.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2325 OF 4311
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. MASETTI, PAOLO, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 848 CARILLON CT

City CREVE COEUR	State MO	Zip Code 63141-6316
---------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) IPC ST LOUIS	Occupation (for Individual) PHYSICIAN
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
489.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		24		2016

Transaction ID : SA11A.449559

Amount of Each Receipt this Period
25.00

Memo Item
CONTRIBUTION

B. MASI, MARILYN, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 5018 RIVER GEM AVE.

City WINDERMERE	State FL	Zip Code 34786-3154
--------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
350.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		28		2016

Transaction ID : SA11A.455785

Amount of Each Receipt this Period
25.00

Memo Item
CONTRIBUTION

C. MASI, MARILYN, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 5018 RIVER GEM AVE.

City WINDERMERE	State FL	Zip Code 34786-3154
--------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
350.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		28		2016

Transaction ID : SA11A.455787

Amount of Each Receipt this Period
25.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	75.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2326 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. MASI, MARILYN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5018 RIVER GEM AVE.
 City WINDERMERE State FL Zip Code 34786-3154
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 350.00

Date of Receipt
 11 / 02 / 2016
Transaction ID : SA11A.467023
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

B. MASI, MARILYN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5018 RIVER GEM AVE.
 City WINDERMERE State FL Zip Code 34786-3154
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 350.00

Date of Receipt
 11 / 05 / 2016
Transaction ID : SA11A.479235
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

C. MASIELLO, JAMES, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 234 LAFAYETTE ROAD
 City HAMPTON State NH Zip Code 03842-4105
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) ALLIANCE HOLDINGS, INC. Occupation (for Individual) CEO-CHAIRMAN
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 1400.00

Date of Receipt
 10 / 20 / 2016
Transaction ID : SA11A.442510
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶ 150.00
TOTAL This Period (last page this line number only).....▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2327 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. MASIELLO, JAMES, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 234 LAFAYETTE ROAD
 City HAMPTON State NH Zip Code 03842-4105
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) ALLIANCE HOLDINGS, INC. Occupation (for Individual) CEO-CHAIRMAN
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1400.00

Date of Receipt 10 / 29 / 2016
Transaction ID : SA11A.460946
 Amount of Each Receipt this Period 100.00
 Memo Item
 CONTRIBUTION

B. MASON, RAYMOND, A., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 880 SPYGLASS LANE
 City NAPLES State FL Zip Code 34102-7731
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) INFORMATION REQUESTED PER BEST EFFORTS Occupation (for Individual) INFORMATION REQUESTED PER BE
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt 10 / 25 / 2016
Transaction ID : SA11A.447442
 Amount of Each Receipt this Period 1000.00
 Memo Item
 CONTRIBUTION

C. MASSAD, DAVID, G., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO BOX 788
 City WESTBOROUGH State MA Zip Code 01581-0788
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) COMMERCE BANK Occupation (for Individual) SALES
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 10 / 24 / 2016
Transaction ID : SA11A.444052
 Amount of Each Receipt this Period 250.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 1350.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2328 OF 4311
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. MASSEE, DONALD, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 6221 CENTURY HILL DR

City RIVERSIDE	State CA	Zip Code 92506-4666
-------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) DONALD MASSEE	Occupation (for Individual) RADIOLOGIST
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
2600.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		24		2016

Transaction ID : SA11A.445949

Amount of Each Receipt this Period
250.00

Memo Item CONTRIBUTION

B. MASSEE, DONALD, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 6221 CENTURY HILL DR

City RIVERSIDE	State CA	Zip Code 92506-4666
-------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) DONALD MASSEE	Occupation (for Individual) RADIOLOGIST
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
2600.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11		02		2016

Transaction ID : SA11A.466528

Amount of Each Receipt this Period
250.00

Memo Item CONTRIBUTION

C. MASSEE, DONALD, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 6221 CENTURY HILL DR

City RIVERSIDE	State CA	Zip Code 92506-4666
-------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) DONALD MASSEE	Occupation (for Individual) RADIOLOGIST
--	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
2600.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11		05		2016

Transaction ID : SA11A.479189

Amount of Each Receipt this Period
250.00

Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	750.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2329 OF 4311
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. MASSEE, DONALD, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 6221 CENTURY HILL DR

City RIVERSIDE	State CA	Zip Code 92506-4666
-------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) DONALD MASSEE	Occupation (for Individual) RADIOLOGIST
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
2600.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	08	/	2016

Transaction ID : SA11A.479796

Amount of Each Receipt this Period
250.00

Memo Item CONTRIBUTION

B. MASSEY, PETER, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address PO BOX 6796

City FOLSOM	State CA	Zip Code 95763-6796
----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
535.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	31	/	2016

Transaction ID : SA11A.464594

Amount of Each Receipt this Period
25.00

Memo Item CONTRIBUTION

C. MASSEY, PETER, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address PO BOX 6796

City FOLSOM	State CA	Zip Code 95763-6796
----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
535.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	02	/	2016

Transaction ID : SA11A.469429

Amount of Each Receipt this Period
25.00

Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	300.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2330 OF 4311
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. MASSEY, PETER, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO BOX 6796
 City FOLSOM State CA Zip Code 95763-6796
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 535.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 04 / 2016
Transaction ID : SA11A.479525
 Amount of Each Receipt this Period
 25.00
 Memo Item
 CONTRIBUTION

B. MASSER, WILLIAM, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 438 CAMILLE DR
 City OSPREY State FL Zip Code 34229-9273
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 23 / 2016
Transaction ID : SA11A.446550
 Amount of Each Receipt this Period
 50.00
 Memo Item
 CONTRIBUTION

C. MASTERSON, JOE, A., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1285 GULF SHORE BOULEVARD N
 APT. 8B
 City NAPLES State FL Zip Code 34102-4936
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) MASTERSON COMPANY Occupation (for Individual) OWNER
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 5000.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 24 / 2016
Transaction ID : SA11A.443441
 Amount of Each Receipt this Period
 5000.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	5075.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2331 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. MASTERS, JOHN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1811 EAGLE DR
 City CHEYENNE State WY Zip Code 82009-2916
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt 10 / 21 / 2016
Transaction ID : SA11A.444277
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

B. MASTERS, JOHN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1811 EAGLE DR
 City CHEYENNE State WY Zip Code 82009-2916
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt 10 / 21 / 2016
Transaction ID : SA11A.444294
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

C. MASTROMARINOO, MARTIN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 196 TREETOP CIRCLE
 City NANUET State NY Zip Code 10954-1044
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 305.00

Date of Receipt 10 / 24 / 2016
Transaction ID : SA11A.445794
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 225.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2332 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. MASTROMARINOO, MARTIN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 196 TREETOP CIRCLE
 City NANUET State NY Zip Code 10954-1044
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 305.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 24 / 2016
Transaction ID : SA11A.445797
 Amount of Each Receipt this Period
 20.00
 Memo Item
 CONTRIBUTION

B. MASTROMARINOO, MARTIN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 196 TREETOP CIRCLE
 City NANUET State NY Zip Code 10954-1044
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 305.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 30 / 2016
Transaction ID : SA11A.459924
 Amount of Each Receipt this Period
 20.00
 Memo Item
 CONTRIBUTION

C. MASTROMARINOO, MARTIN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 196 TREETOP CIRCLE
 City NANUET State NY Zip Code 10954-1044
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 305.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 31 / 2016
Transaction ID : SA11A.463999
 Amount of Each Receipt this Period
 20.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	60.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2333 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. MASTROMARINOO, MARTIN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 196 TREETOP CIRCLE
 City NANUET State NY Zip Code 10954-1044
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 305.00

Date of Receipt 11 / 03 / 2016
Transaction ID : SA11A.468629
 Amount of Each Receipt this Period 20.00
 Memo Item CONTRIBUTION

B. MASTROMARINOO, MARTIN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 196 TREETOP CIRCLE
 City NANUET State NY Zip Code 10954-1044
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 305.00

Date of Receipt 11 / 06 / 2016
Transaction ID : SA11A.476745
 Amount of Each Receipt this Period 20.00
 Memo Item CONTRIBUTION

C. MASTRANGELO, RALPH, M., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 510 BUFFLEHEAD DRIVE
 City KIAWAH ISLAND State SC Zip Code 29455-5790
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) INFORMATION REQUESTED PER BEST EFFORTS Occupation (for Individual) INFORMATION REQUESTED PER BEST EFFORTS
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 10 / 25 / 2016
Transaction ID : SA11A.447572
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 290.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2334 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. MATAGRANO, LOUIS, A., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 877 CHILTERN RD
 City HILLSBOROUGH State CA Zip Code 94010-7054
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 11 / 02 / 2016
Transaction ID : SA11A.466587
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

B. MATELSKI, MARCIA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1112 DAVID ST.
 City RACINE State WI Zip Code 53404-2802
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) ASCENSION ALL SAINTS Occupation (for Individual) RN
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 10 / 26 / 2016
Transaction ID : SA11A.454369
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

C. MATHERS, DAVE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2252 FOUNDERS VIEW LANE
 City MIDLOTHIAN State VA Zip Code 23113-6387
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 10 / 31 / 2016
Transaction ID : SA11A.458637
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	450.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2335 OF 4311
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. MATHENY, MARVIN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1890 W SHELTON VLY RD
 City SHELTON State WA Zip Code 98584-8723
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 305.00

Date of Receipt 10 / 27 / 2016
Transaction ID : SA11A.456699
 Amount of Each Receipt this Period 30.00
 Memo Item CONTRIBUTION

B. MATHENY, MARVIN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1890 W SHELTON VLY RD
 City SHELTON State WA Zip Code 98584-8723
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 305.00

Date of Receipt 10 / 27 / 2016
Transaction ID : SA11A.456704
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

C. MATHEWS, MARY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1123 SEA BOURNE WAY
 City SUNSET BEACH State NC Zip Code 28468-4709
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 11 / 01 / 2016
Transaction ID : SA11A.461649
 Amount of Each Receipt this Period 300.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 355.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2336 OF 4311
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
A. MATTES, ALLEN, , ,

Mailing Address 5954 HALL STREET

City SPRINGFIELD	State VA	Zip Code 22152-1405
---------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
350.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		26		2016

Transaction ID : SA11A.447624

Amount of Each Receipt this Period
200.00

Memo Item CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
B. MATTHEWS, WILBUR, L., , JR.

Mailing Address 9121 E VALLEY VIEW LANE

City SAN ANTONIO	State TX	Zip Code 78217-5141
---------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
300.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		25		2016

Transaction ID : SA11A.447334

Amount of Each Receipt this Period
100.00

Memo Item CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
C. MATTOX, MICHAEL, L., ,

Mailing Address 673 WOODLAND SQ LP

City LACEY	State WA	Zip Code 98503-1066
---------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) ACCESS THE USA	Occupation (for Individual) MARKETING
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
26000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11		01		2016

Transaction ID : SA11A.462546

Amount of Each Receipt this Period
1000.00

Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	1300.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 2337 OF 4311
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
A. MATTSON, ROBERT, , ,

Mailing Address 3645 OAKMONTE BLVD.

City ROCHESTER State MI Zip Code 48306-4791

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
525.00

Date of Receipt
10 / 27 / 2016
Transaction ID : SA11A.456653

Amount of Each Receipt this Period
50.00

Memo Item CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
B. MATTSON, ROBERT, , ,

Mailing Address 3645 OAKMONTE BLVD.

City ROCHESTER State MI Zip Code 48306-4791

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
525.00

Date of Receipt
11 / 03 / 2016
Transaction ID : SA11A.468577

Amount of Each Receipt this Period
50.00

Memo Item CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
C. MATTSON, ROBERT, , ,

Mailing Address 3645 OAKMONTE BLVD.

City ROCHESTER State MI Zip Code 48306-4791

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
525.00

Date of Receipt
11 / 04 / 2016
Transaction ID : SA11A.472034

Amount of Each Receipt this Period
50.00

Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 150.00

TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2338 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. MATTSON, ROBERT, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3645 OAKMONTE BLVD.
 City ROCHESTER State MI Zip Code 48306-4791
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 525.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 04 / 2016
Transaction ID : SA11A.472623
 Amount of Each Receipt this Period
 50.00
 Memo Item
 CONTRIBUTION

B. MATTSON, ROBERT, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3645 OAKMONTE BLVD.
 City ROCHESTER State MI Zip Code 48306-4791
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 525.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 04 / 2016
Transaction ID : SA11A.472837
 Amount of Each Receipt this Period
 30.00
 Memo Item
 CONTRIBUTION

C. MATTSON, ROBERT, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3645 OAKMONTE BLVD.
 City ROCHESTER State MI Zip Code 48306-4791
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 525.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 06 / 2016
Transaction ID : SA11A.480859
 Amount of Each Receipt this Period
 30.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	110.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2339 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
Team Ryan

A. MATULA, DAN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4878 MERTZ ROAD
 City FAYETTEVILLE State TX Zip Code 78940-5292
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 450.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 30 / 2016
Transaction ID : SA11A.464945
 Amount of Each Receipt this Period
 100.00
 Memo Item CONTRIBUTION

B. MATULA, DAN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4878 MERTZ ROAD
 City FAYETTEVILLE State TX Zip Code 78940-5292
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 450.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 04 / 2016
Transaction ID : SA11A.471128
 Amount of Each Receipt this Period
 100.00
 Memo Item CONTRIBUTION

C. MATULA, DAN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4878 MERTZ ROAD
 City FAYETTEVILLE State TX Zip Code 78940-5292
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 450.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 05 / 2016
Transaction ID : SA11A.478815
 Amount of Each Receipt this Period
 25.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	225.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2340 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. MATZEN, GREGORY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2104 BIG SANDY COURT
 City GOLD RIVER State CA Zip Code 95670-8399
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt **11 / 08 / 2016**
Transaction ID : SA11A.479803
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

B. MAULDIN, RICHARD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 26 COUNTRY PARK CIRCLE
 City PETAL State MS Zip Code 39465-4126
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) MAULDIN COMPANY Occupation (for Individual) MANAGER GENERAL
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 354.00

Date of Receipt **10 / 30 / 2016**
Transaction ID : SA11A.460211
 Amount of Each Receipt this Period 59.00
 Memo Item CONTRIBUTION

C. MAULDIN, RICHARD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 26 COUNTRY PARK CIRCLE
 City PETAL State MS Zip Code 39465-4126
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) MAULDIN COMPANY Occupation (for Individual) MANAGER GENERAL
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 354.00

Date of Receipt **11 / 04 / 2016**
Transaction ID : SA11A.471016
 Amount of Each Receipt this Period 59.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	218.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2341 OF 4311
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. MAURAN, FRANK, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 22 PARSONAGE STREET

City PROVIDENCE	State RI	Zip Code 02903-4732
--------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) FRANK MAURAN	Occupation (for Individual) PRINTING/SHIPPING
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1850.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	04	/	2016

Transaction ID : SA11A.472967

Amount of Each Receipt this Period
250.00

Memo Item CONTRIBUTION

B. MAURY, ALBERT, R., ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 8600 NW 41ST ST

City DORAL	State FL	Zip Code 33166-6202
---------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) LEON MEDICAL CENTERS	Occupation (for Individual) HEALTHCARE EXECUTIVE
---	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
22500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	24	/	2016

Transaction ID : SA11A.443447

Amount of Each Receipt this Period
2500.00

Memo Item CONTRIBUTION

C. MAXEY, MARGARET, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 5300 S. ATLANTIC AVE. #5605
#5605

City NEW SMYRNA BEACH	State FL	Zip Code 32169-4595
--------------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
942.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	21	/	2016

Transaction ID : SA11A.444241

Amount of Each Receipt this Period
25.00

Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	2775.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2342 OF 4311
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. MAXEY, MARGARET, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5300 S. ATLANTIC AVE. #5605
 #5605
 City NEW SMYRNA BEACH State FL Zip Code 32169-4595
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 942.00

Date of Receipt 10 / 22 / 2016
Transaction ID : SA11A.447014
 Amount of Each Receipt this Period 15.00
 Memo Item CONTRIBUTION

B. MAXEY, MARGARET, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5300 S. ATLANTIC AVE. #5605
 #5605
 City NEW SMYRNA BEACH State FL Zip Code 32169-4595
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 942.00

Date of Receipt 10 / 25 / 2016
Transaction ID : SA11A.448330
 Amount of Each Receipt this Period 30.00
 Memo Item CONTRIBUTION

C. MAXEY, MARGARET, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5300 S. ATLANTIC AVE. #5605
 #5605
 City NEW SMYRNA BEACH State FL Zip Code 32169-4595
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 942.00

Date of Receipt 10 / 27 / 2016
Transaction ID : SA11A.453284
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶ 70.00
TOTAL This Period (last page this line number only).....▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2343 OF 4311
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. MAXEY, MARGARET, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5300 S. ATLANTIC AVE. #5605
 #5605
 City NEW SMYRNA BEACH State FL Zip Code 32169-4595
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 942.00

Date of Receipt **10 / 27 / 2016**
Transaction ID : SA11A.453285
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

B. MAXEY, MARGARET, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5300 S. ATLANTIC AVE. #5605
 #5605
 City NEW SMYRNA BEACH State FL Zip Code 32169-4595
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 942.00

Date of Receipt **10 / 31 / 2016**
Transaction ID : SA11A.458069
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

C. MAXEY, MARGARET, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5300 S. ATLANTIC AVE. #5605
 #5605
 City NEW SMYRNA BEACH State FL Zip Code 32169-4595
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 942.00

Date of Receipt **10 / 30 / 2016**
Transaction ID : SA11A.459437
 Amount of Each Receipt this Period 20.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 70.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2344 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. MAXEY, MARGARET, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5300 S. ATLANTIC AVE. #5605
 #5605
 City NEW SMYRNA BEACH State FL Zip Code 32169-4595
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 942.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 29 / 2016
Transaction ID : SA11A.460919
 Amount of Each Receipt this Period
 30.00
 Memo Item
 CONTRIBUTION

B. MAXEY, MARGARET, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5300 S. ATLANTIC AVE. #5605
 #5605
 City NEW SMYRNA BEACH State FL Zip Code 32169-4595
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 942.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 29 / 2016
Transaction ID : SA11A.461189
 Amount of Each Receipt this Period
 20.00
 Memo Item
 CONTRIBUTION

C. MAXEY, MARGARET, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5300 S. ATLANTIC AVE. #5605
 #5605
 City NEW SMYRNA BEACH State FL Zip Code 32169-4595
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 942.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 04 / 2016
Transaction ID : SA11A.472384
 Amount of Each Receipt this Period
 15.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶ 65.00
TOTAL This Period (last page this line number only).....▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2345 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. MAXEY, MARGARET, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5300 S. ATLANTIC AVE. #5605
 #5605
 City NEW SMYRNA BEACH State FL Zip Code 32169-4595
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 942.00

Date of Receipt 11 / 07 / 2016
Transaction ID : SA11A.475456
 Amount of Each Receipt this Period 20.00
 Memo Item CONTRIBUTION

B. MAXEY, MARGARET, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5300 S. ATLANTIC AVE. #5605
 #5605
 City NEW SMYRNA BEACH State FL Zip Code 32169-4595
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 942.00

Date of Receipt 11 / 06 / 2016
Transaction ID : SA11A.477849
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

C. MAXIM, JAMES, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 925 HUNT RD
 City RADNOR State PA Zip Code 19008-1525
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) MAXIM AUTOMOTIVE Occupation (for Individual) EXECUTIVE
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 850.00

Date of Receipt 10 / 29 / 2016
Transaction ID : SA11A.461138
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶ 145.00
TOTAL This Period (last page this line number only).....▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2346 OF 4311
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. MAXIM, JAMES, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 925 HUNT RD

City RADNOR	State PA	Zip Code 19008-1525
----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) MAXIM AUTOMOTIVE	Occupation (for Individual) EXECUTIVE
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
850.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	04	/	2016

Transaction ID : SA11A.472737

Amount of Each Receipt this Period
100.00

Memo Item
CONTRIBUTION

B. MAXSON, RICHARD, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 216 E 9400 S

City PARADISE	State UT	Zip Code 84328-9748
------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
402.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	23	/	2016

Transaction ID : SA11A.446611

Amount of Each Receipt this Period
50.00

Memo Item
CONTRIBUTION

C. MAXSON, RICHARD, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 216 E 9400 S

City PARADISE	State UT	Zip Code 84328-9748
------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
402.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	01	/	2016

Transaction ID : SA11A.462533

Amount of Each Receipt this Period
50.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	200.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2347 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. MAXWELL , DOUGLAS, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 15148 ISLEVIEW DRIVE
 City CHESTERFIELD State MO Zip Code 63017-7744
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1100.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 25 / 2016
Transaction ID : SA11A.448104
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION

B. MAXWELL , DOUGLAS, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 15148 ISLEVIEW DRIVE
 City CHESTERFIELD State MO Zip Code 63017-7744
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1100.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 25 / 2016
Transaction ID : SA11A.448106
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION

C. MAXWELL , DOUGLAS, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 15148 ISLEVIEW DRIVE
 City CHESTERFIELD State MO Zip Code 63017-7744
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1100.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 06 / 2016
Transaction ID : SA11A.476905
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	300.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2348 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. MAXWELL, ROSEMARY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4314 LORCOM LQNE
 City ARLINGTON State VA Zip Code 22207-3308
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) ARNOLD AND PORTER Occupation (for Individual) ATTORNEY
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 10 / 31 / 2016
Transaction ID : SA11A.457734
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

B. MAXWELL, TAYLOR, H., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 9121 SOUTHMONT CV206 CV206
 City FORT MYERS State FL Zip Code 33908-6308
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 675.00

Date of Receipt 10 / 23 / 2016
Transaction ID : SA11A.446263
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

C. MAXWELL, TAYLOR, H., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 9121 SOUTHMONT CV206 CV206
 City FORT MYERS State FL Zip Code 33908-6308
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 675.00

Date of Receipt 10 / 31 / 2016
Transaction ID : SA11A.458718
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	300.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2349 OF 4311
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. MAXWELL, TAYLOR, H., MR.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 9121 SOUTHMONT CV206
CV206

City FORT MYERS State FL Zip Code 33908-6308

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 675.00

Date of Receipt 10 / 31 / 2016
Transaction ID : SA11A.458721

Amount of Each Receipt this Period 25.00

Memo Item CONTRIBUTION

B. MAXWELL, TAYLOR, H., MR.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 9121 SOUTHMONT CV206
CV206

City FORT MYERS State FL Zip Code 33908-6308

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 675.00

Date of Receipt 11 / 01 / 2016
Transaction ID : SA11A.462455

Amount of Each Receipt this Period 100.00

Memo Item CONTRIBUTION

C. MAXWELL, TAYLOR, H., MR.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 9121 SOUTHMONT CV206
CV206

City FORT MYERS State FL Zip Code 33908-6308

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 675.00

Date of Receipt 11 / 02 / 2016
Transaction ID : SA11A.467010

Amount of Each Receipt this Period 100.00

Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 225.00

TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2350 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. MAXWELL, TAYLOR, H., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 9121 SOUTHMONT CV206
 CV206
 City FORT MYERS State FL Zip Code 33908-6308
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 675.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 02 / 2016
Transaction ID : SA11A.467012
 Amount of Each Receipt this Period
 100.00
 Memo Item CONTRIBUTION

B. MAXWELL, TAYLOR, H., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 9121 SOUTHMONT CV206
 CV206
 City FORT MYERS State FL Zip Code 33908-6308
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 675.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 07 / 2016
Transaction ID : SA11A.475821
 Amount of Each Receipt this Period
 25.00
 Memo Item CONTRIBUTION

C. MAXWELL, TAYLOR, H., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 9121 SOUTHMONT CV206
 CV206
 City FORT MYERS State FL Zip Code 33908-6308
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 675.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 07 / 2016
Transaction ID : SA11A.475822
 Amount of Each Receipt this Period
 25.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	150.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2351 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
Team Ryan

A. MAY, ERIC, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 11 STILWELL AVE
 City NORFOLK State MA Zip Code 02056-1156
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt
 10 / 25 / 2016
Transaction ID : SA11A.451557
 Amount of Each Receipt this Period
 100.00
 Memo Item CONTRIBUTION

B. MAY, ERIC, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 11 STILWELL AVE
 City NORFOLK State MA Zip Code 02056-1156
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt
 10 / 25 / 2016
Transaction ID : SA11A.451572
 Amount of Each Receipt this Period
 100.00
 Memo Item CONTRIBUTION

C. MAY, ERIC, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 11 STILWELL AVE
 City NORFOLK State MA Zip Code 02056-1156
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt
 10 / 25 / 2016
Transaction ID : SA11A.451573
 Amount of Each Receipt this Period
 100.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	300.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2352 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
Team Ryan

A. MAY, MRS. ROBERT, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2930 CR 412
 City CAMPBELLTON State TX Zip Code 78008-3523
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) INFORMATION REQUESTED PER BEST EFFORTS Occupation (for Individual) INFORMATION REQUESTED PER BE
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 500.00

Date of Receipt
 11 / 03 / 2016
Transaction ID : SA11A.465411
 Amount of Each Receipt this Period
 500.00
 Memo Item
 CONTRIBUTION

B. MAYES, BETTY, , MS.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1319 W 32ST SOUTH
 City WICHITA State KS Zip Code 67217-2545
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 250.00

Date of Receipt
 10 / 25 / 2016
Transaction ID : SA11A.452015
 Amount of Each Receipt this Period
 25.00
 Memo Item
 CONTRIBUTION

C. MAYES, BETTY, , MS.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1319 W 32ST SOUTH
 City WICHITA State KS Zip Code 67217-2545
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 250.00

Date of Receipt
 10 / 31 / 2016
Transaction ID : SA11A.457471
 Amount of Each Receipt this Period
 25.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	550.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2353 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. MAYES, BETTY, , MS.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1319 W 32ST SOUTH
 City WICHITA State KS Zip Code 67217-2545
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 07 / 2016
Transaction ID : SA11A.475280
 Amount of Each Receipt this Period
 25.00
 Memo Item
 CONTRIBUTION

B. MAYES , KENNETH, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 838 CHATSWORTH DRIVE
 City ACCOKEEK State MD Zip Code 20607-2033
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 475.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 30 / 2016
Transaction ID : SA11A.464940
 Amount of Each Receipt this Period
 25.00
 Memo Item
 CONTRIBUTION

C. MAYES , KENNETH, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 838 CHATSWORTH DRIVE
 City ACCOKEEK State MD Zip Code 20607-2033
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 475.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 02 / 2016
Transaction ID : SA11A.469536
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	150.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2354 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. MAYES , KENNETH, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 838 CHATSWORTH DRIVE
 City ACCOKEEK State MD Zip Code 20607-2033
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 475.00

Date of Receipt 11 / 04 / 2016
Transaction ID : SA11A.473938
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

B. MAYES , KENNETH, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 838 CHATSWORTH DRIVE
 City ACCOKEEK State MD Zip Code 20607-2033
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 475.00

Date of Receipt 11 / 07 / 2016
Transaction ID : SA11A.474631
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

C. MAYES , KENNETH, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 838 CHATSWORTH DRIVE
 City ACCOKEEK State MD Zip Code 20607-2033
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 475.00

Date of Receipt 11 / 05 / 2016
Transaction ID : SA11A.479005
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	225.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2355 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
Team Ryan

A. MAYLE, CAROLYN, HICKS, MS.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 850 I ST NW STE 800
 City WASHINGTON State DC Zip Code 20005-
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) BOCKORNY GROUP Occupation (for Individual) LOBBYIST
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 7500.00

Date of Receipt 10 / 29 / 2016
Transaction ID : SA11A.454820
 Amount of Each Receipt this Period 2500.00
 Memo Item CONTRIBUTION

B. MAYNARD, CAROL, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 132 TURNPIKE RD SUITE 100
 City SOUTHBOROUGH State MA Zip Code 01772-2129
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 537.00

Date of Receipt 10 / 20 / 2016
Transaction ID : SA11A.444756
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

C. MAYNARD, CAROL, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 132 TURNPIKE RD SUITE 100
 City SOUTHBOROUGH State MA Zip Code 01772-2129
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 537.00

Date of Receipt 10 / 29 / 2016
Transaction ID : SA11A.460362
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	2550.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2356 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. MAYR, JAMES, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2898 EDGEWOOD DR
 City NAVARRE State FL Zip Code 32566-8255
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 30 / 2016
Transaction ID : SA11A.459969
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION

B. MAZZARESE, FRANK, M., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 28 STRYKER STREET
 City BROOKLYN State NY Zip Code 11223-5223
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 240.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 23 / 2016
Transaction ID : SA11A.446407
 Amount of Each Receipt this Period
 25.00
 Memo Item
 CONTRIBUTION

C. MAZZARESE, FRANK, M., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 28 STRYKER STREET
 City BROOKLYN State NY Zip Code 11223-5223
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 240.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 02 / 2016
Transaction ID : SA11A.470011
 Amount of Each Receipt this Period
 25.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	150.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2357 OF 4311
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. MC CABE, RICHARD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2104 CAMERON COURT
 City WINTERVILLE State NC Zip Code 28590-8568
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) PROFESSOR Occupation (for Individual) ECU
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 575.00

Date of Receipt 10 / 27 / 2016
Transaction ID : SA11A.454174
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

B. MCADAMS, JAMES, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 323 CHURCH ROAD
 City SEGUIN State TX Zip Code 78155-1928
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) RANCHER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt 10 / 25 / 2016
Transaction ID : SA11A.447294
 Amount of Each Receipt this Period 200.00
 Memo Item CONTRIBUTION

C. MCADOO, WILLIAM, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO BOX 659
 City BERCLAIR State TX Zip Code 78107-0659
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) AUSTIN INDUSTRIES Occupation (for Individual) CONTRACTOR
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 10 / 28 / 2016
Transaction ID : SA11A.455046
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 500.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2358 OF 4311
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. MCALLISTER, BONNIE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 419 TWIN LAKES DR
 City GRAY State GA Zip Code 31032-5037
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 275.00

Date of Receipt 11 / 02 / 2016
Transaction ID : SA11A.469588
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

B. MCARTHUR, A SHIRLEY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 351 19TH STREET NE APT 22
 City EAST WENATCHEE State WA Zip Code 98802-8308
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 600.00

Date of Receipt 11 / 07 / 2016
Transaction ID : SA11A.467794
 Amount of Each Receipt this Period 300.00
 Memo Item CONTRIBUTION

C. MCAULIFFE, EUGENE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1837 PACIFIC COAST HIHWAY 234
 City HERMOSA BEACH State CA Zip Code 90254-
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 260.00

Date of Receipt 10 / 20 / 2016
Transaction ID : SA11A.442060
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 375.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2359 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. MCAULIFFE, EUGENE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1837 PACIFIC COAST HIIHWAY
 234
 City HERMOSA BEACH State CA Zip Code 90254-
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 260.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 26 / 2016
Transaction ID : SA11A.450050
 Amount of Each Receipt this Period
 25.00
 Memo Item
 CONTRIBUTION

B. MCAULIFFE, EUGENE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1837 PACIFIC COAST HIIHWAY
 234
 City HERMOSA BEACH State CA Zip Code 90254-
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 260.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 26 / 2016
Transaction ID : SA11A.450051
 Amount of Each Receipt this Period
 25.00
 Memo Item
 CONTRIBUTION

C. MCAULIFFE, EUGENE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1837 PACIFIC COAST HIIHWAY
 234
 City HERMOSA BEACH State CA Zip Code 90254-
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 260.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 25 / 2016
Transaction ID : SA11A.452072
 Amount of Each Receipt this Period
 30.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	80.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2360 OF 4311
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. MCAULIFFE, EUGENE, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1837 PACIFIC COAST HIHWAY
234

City HERMOSA BEACH	State CA	Zip Code 90254-
-----------------------	-------------	--------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
260.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	04	/	2016

Transaction ID : SA11A.473011

Amount of Each Receipt this Period
30.00

Memo Item
CONTRIBUTION

B. MCBEE, RICHARD, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 272 VALLEY VIEW LANE

City INDIAN SPRINGS	State AL	Zip Code 35124-3635
------------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) INFORMATION REQUESTED PER BEST EFFORTS	Occupation (for Individual) INFORMATION REQUESTED PER BE
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Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	27	/	2016

Transaction ID : SA11A.453490

Amount of Each Receipt this Period
250.00

Memo Item
CONTRIBUTION

C. MCBRIDE, DANE, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 3579 LARSON LN

City ROANOKE	State VA	Zip Code 24018-3150
-----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) ALLERGY & IMMUNOLOGY, PLC	Occupation (for Individual) PHYSICIAN
--	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
300.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	31	/	2016

Transaction ID : SA11A.463221

Amount of Each Receipt this Period
100.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	380.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2361 OF 4311
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. MCBRIAN, DONNA, J., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 7398 TEMPO TER NE
 City MINNEAPOLIS State MN Zip Code 55432-3223
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 220.00

Date of Receipt 10 / 28 / 2016
Transaction ID : SA11A.454816
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

B. MCBRIDE, HERMAN, L., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 14600 ST. RT. 65 P.O.BOX 491
 14600 STATE ROUTE 65
 City JACKSON CENTER State OH Zip Code 45334-0491
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RISING SUN EXPRESS Occupation (for Individual) OWNER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt 10 / 27 / 2016
Transaction ID : SA11A.453932
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

C. MCBRIDE, HERMAN, L., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 14600 ST. RT. 65 P.O.BOX 491
 14600 STATE ROUTE 65
 City JACKSON CENTER State OH Zip Code 45334-0491
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RISING SUN EXPRESS Occupation (for Individual) OWNER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt 11 / 04 / 2016
Transaction ID : SA11A.471416
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 600.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2362 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
Team Ryan

A. MCBRIDE, LOREN, C., MS.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 420 2ND AVE. N.
 City SURFSIDE BEACH State SC Zip Code 29575-3841
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 750.00

Date of Receipt 10 / 23 / 2016
Transaction ID : SA11A.446255
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

B. MCBRIDE, RICHARD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3986 MINERVA AVE
 City LOS ANGELES State CA Zip Code 90066-5020
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 450.00

Date of Receipt 10 / 27 / 2016
Transaction ID : SA11A.453875
 Amount of Each Receipt this Period 75.00
 Memo Item CONTRIBUTION

C. MCBRIDE, RICHARD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3986 MINERVA AVE
 City LOS ANGELES State CA Zip Code 90066-5020
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 450.00

Date of Receipt 11 / 04 / 2016
Transaction ID : SA11A.472745
 Amount of Each Receipt this Period 75.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	250.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2363 OF 4311
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. MCBROOM, JACKSON, T., MR.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1661 RIVER RIDGE

City WILLIAMSBURG	State VA	Zip Code 23185-7546
----------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
500.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
11 / 06 / 2016

Transaction ID : SA11A.477593

Amount of Each Receipt this Period
500.00

Memo Item CONTRIBUTION

B. MCBRYDE, NEILL, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 851 HEMPSTEAD PLACE

City CHARLOTTE	State NC	Zip Code 28207-2323
-------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) MOORE AND VAN ALLEN PLLC	Occupation (for Individual) ATTORNEY
---	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
550.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
11 / 01 / 2016

Transaction ID : SA11A.467305

Amount of Each Receipt this Period
100.00

Memo Item CONTRIBUTION

C. MCBRYDE, NEILL, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 851 HEMPSTEAD PLACE

City CHARLOTTE	State NC	Zip Code 28207-2323
-------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) MOORE AND VAN ALLEN PLLC	Occupation (for Individual) ATTORNEY
---	---

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
550.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
11 / 01 / 2016

Transaction ID : SA11A.467307

Amount of Each Receipt this Period
100.00

Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	700.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2364 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
Team Ryan

A. MCCAHAN, DAVID, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2903 YAUPON PLACE
 City AMARILLO State TX Zip Code 79124-4959
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) INFORMATION REQUESTED PER BEST EFFORTS Occupation (for Individual) INFORMATION REQUESTED PER BE
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 350.00

Date of Receipt 11 / 01 / 2016
Transaction ID : SA11A.461706
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

B. MCCAMMON, STEVE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4810 W ST RD
 City BLOOMINGTON State IN Zip Code 47403-
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) K & S ROLLOFF, INC Occupation (for Individual) OWNER
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 250.00

Date of Receipt 10 / 27 / 2016
Transaction ID : SA11A.452832
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

C. MCCANN JR, WILLIAM, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 515 W MAPLE ST
 City CALDWELL State ID Zip Code 83605-5175
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 575.00

Date of Receipt 10 / 20 / 2016
Transaction ID : SA11A.442293
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	450.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2365 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. MCCANN JR, WILLIAM, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 515 W MAPLE ST
 City CALDWELL State ID Zip Code 83605-5175
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 575.00

Date of Receipt 10 / 25 / 2016
Transaction ID : SA11A.451558
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

B. MCCANN JR, WILLIAM, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 515 W MAPLE ST
 City CALDWELL State ID Zip Code 83605-5175
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 575.00

Date of Receipt 11 / 03 / 2016
Transaction ID : SA11A.469310
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

C. MCCARTHY, EMILY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1612 COLQUITT ST 5
 City HOUSTON State TX Zip Code 77006-5263
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SGH Occupation (for Individual) ENGINEER
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 225.00

Date of Receipt 10 / 21 / 2016
Transaction ID : SA11A.444248
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	225.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2366 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13 <input type="checkbox"/> 11b <input type="checkbox"/> 14 <input type="checkbox"/> 11c <input type="checkbox"/> 15 <input type="checkbox"/> 12 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name A. MCCARTY, KENNITH, , ,			Date of Receipt M M M / D D D / Y Y Y Y Y Y 10 / 30 / 2016 Transaction ID : SA11A.460293		
Mailing Address 16600 CENTERFIELD DR 203			Amount of Each Receipt this Period 59.00		
City EAGLE RIVER	State AK	Zip Code 99577-7702	Memo Item CONTRIBUTION <input type="checkbox"/>		
FEC ID number of contributing federal political committee. C					
Name of Employer (for Individual) SELF EMPLOYED		Occupation (for Individual) MARITAL FAMILY THERAPIST			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 295.00			

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name B. MCCARTAN, THOMAS, , ,			Date of Receipt M M M / D D D / Y Y Y Y Y Y 10 / 20 / 2016 Transaction ID : SA11A.442313		
Mailing Address W292N2145 ELMHURST DRIVE			Amount of Each Receipt this Period 250.00		
City PEWAUKEE	State WI	Zip Code 53072-4914	Memo Item CONTRIBUTION <input type="checkbox"/>		
FEC ID number of contributing federal political committee. C					
Name of Employer (for Individual) NONE		Occupation (for Individual) RETIRED			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 500.00			

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name C. MCCARTAN, THOMAS, , ,			Date of Receipt M M M / D D D / Y Y Y Y Y Y 10 / 24 / 2016 Transaction ID : SA11A.445730		
Mailing Address W292N2145 ELMHURST DRIVE			Amount of Each Receipt this Period 250.00		
City PEWAUKEE	State WI	Zip Code 53072-4914	Memo Item CONTRIBUTION <input type="checkbox"/>		
FEC ID number of contributing federal political committee. C					
Name of Employer (for Individual) NONE		Occupation (for Individual) RETIRED			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		Aggregate Year-to-Date ▼ 500.00			

SUBTOTAL of Receipts This Page (optional).....▶	559.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2367 OF 4311
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. MCCASHIN II, JAMES, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address **680 PALMERA AVENUE**

City PACIFIC PALISADES	State CA	Zip Code 90272-3356
----------------------------------	--------------------	-------------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) SELF EMPLOYED	Occupation (for Individual) ATTORNEY- MEDIATOR
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt
11 / 01 / 2016

Transaction ID : SA11A.463152

Amount of Each Receipt this Period
250.00

Memo Item
CONTRIBUTION

B. MCCASLAND, TOM, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address **7608 GLENSHANNON CIRCLE**

City DALLAS	State TX	Zip Code 75225-2053
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) SELF EMPLOYED	Occupation (for Individual) RETIRED
---	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1000.00

Date of Receipt
11 / 01 / 2016

Transaction ID : SA11A.462347

Amount of Each Receipt this Period
1000.00

Memo Item
CONTRIBUTION

C. MCCAULEY, LEWIS, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address **1 FOX RUN LANE
622**

City ORCHARD PARK	State NY	Zip Code 14127-3165
-----------------------------	--------------------	-------------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) MCGARD LLC	Occupation (for Individual) MANUFACTURER
--	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
1000.00

Date of Receipt
10 / 26 / 2016

Transaction ID : SA11A.450868

Amount of Each Receipt this Period
1000.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	2250.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2368 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. MCCAWE, CRAIG, , MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2300 CARILOONG POINT
 City KIRKLAND State WA Zip Code 98033-
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) EAGLE RIVER Occupation (for Individual) INVESTOR
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 43800.00

Date of Receipt 11 / 01 / 2016
Transaction ID : SA11A.457431
 Amount of Each Receipt this Period 24200.00
 Memo Item CONTRIBUTION

B. MCCAWE, SUSAN, , MRS.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2300 CARILOONG POINT
 City KIRKLAND State WA Zip Code 98033-
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) COM INVESTMENTS LLC Occupation (for Individual) PRESIDENT
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 43800.00

Date of Receipt 11 / 01 / 2016
Transaction ID : SA11A.457432
 Amount of Each Receipt this Period 38400.00
 Memo Item CONTRIBUTION

C. MCCARTHY, PAUL, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 10000 W. 151ST STREET
 City ORLAND PARK State IL Zip Code 60462-3140
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) MARQUETTE NATIONAL Occupation (for Individual) BANKER
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 11 / 07 / 2016
Transaction ID : SA11A.476430
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	62850.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2369 OF 4311
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. MCCARTHY, PAUL, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 10000 W. 151ST STREET

City ORLAND PARK	State IL	Zip Code 60462-3140
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) MARQUETTE NATIONAL	Occupation (for Individual) BANKER
---	---------------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
500.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
11		07		2016

Transaction ID : SA11A.476432

Amount of Each Receipt this Period
250.00

Memo Item CONTRIBUTION

B. MCCLAM, JAMES, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 7113 DOSWELL LANE

City AUSTIN	State TX	Zip Code 78739-2042
----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) INFORMATION REQUESTED PER BEST EFFORTS	Occupation (for Individual) INFORMATION REQUESTED PER BE
---	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
500.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
11		08		2016

Transaction ID : SA11A.468014

Amount of Each Receipt this Period
500.00

Memo Item CONTRIBUTION

C. MCCLERREN, ADRIANA, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address PO BOX 49307

City JACKSONVILLE	State FL	Zip Code 32240-9307
----------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) INJURY CARE CENTERS	Occupation (for Individual) ADMINISTRATOR
--	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
750.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
10		28		2016

Transaction ID : SA11A.455942

Amount of Each Receipt this Period
250.00

Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	1000.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2370 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. MCCLERREN, ADRIANA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO BOX 49307

City JACKSONVILLE	State FL	Zip Code 32240-9307
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) INJURY CARE CENTERS	Occupation (for Individual) ADMINISTRATOR
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
750.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 04 / 2016
Transaction ID : SA11A.472595

Amount of Each Receipt this Period
250.00

Memo Item CONTRIBUTION

B. MCCLELLAN, MARIE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3510 N. RIDGE DR.

City WACO	State TX	Zip Code 76710-1249
--------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) SELF EMPLOYED	Occupation (for Individual) MARIE MCCLELLAN
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
800.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 07 / 2016
Transaction ID : SA11A.467904

Amount of Each Receipt this Period
500.00

Memo Item CONTRIBUTION

C. MCCLELLAN, MARIE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3510 N. RIDGE DR.

City WACO	State TX	Zip Code 76710-1249
--------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) SELF EMPLOYED	Occupation (for Individual) MARIE MCCLELLAN
--	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
800.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 07 / 2016
Transaction ID : SA11A.476609

Amount of Each Receipt this Period
100.00

Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	850.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2371 OF 4311
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. MCCLELLAN, MARIE, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 3510 N. RIDGE DR.

City WACO	State TX	Zip Code 76710-1249
--------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) SELF EMPLOYED	Occupation (for Individual) MARIE MCCLELLAN
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
800.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11		07		2016

Transaction ID : SA11A.476625

Amount of Each Receipt this Period
100.00

Memo Item
CONTRIBUTION

B. MCCLELLAN, MARIE, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 3510 N. RIDGE DR.

City WACO	State TX	Zip Code 76710-1249
--------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) SELF EMPLOYED	Occupation (for Individual) MARIE MCCLELLAN
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
800.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11		07		2016

Transaction ID : SA11A.476629

Amount of Each Receipt this Period
100.00

Memo Item
CONTRIBUTION

C. MCCLURE, CRAIG, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 5615 LEGLER

City SHAWNEE	State KS	Zip Code 66217-9665
-----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) UIC	Occupation (for Individual) PHYSICIAN
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Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
300.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11		04		2016

Transaction ID : SA11A.472467

Amount of Each Receipt this Period
100.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	300.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2372 OF 4311
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. MCCLUGGAGE, VICTORIA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4110 WOODLEIGH LANE
 City LA CANADA State CA Zip Code 91011-4055
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) FARMER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 350.00

Date of Receipt 11 / 02 / 2016
Transaction ID : SA11A.469708
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

B. MCCONNELL, MICHAEL, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 115 GROGANS LAKE DRIVE
 City SANDY SPRINGS State GA Zip Code 30350-3115
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) JONES DAY Occupation (for Individual) ATTORNEY
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 10 / 28 / 2016
Transaction ID : SA11A.455577
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

C. MCCORD, DALE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 30 OLD RIDGEWOOD PLACE
 City ATLANTA State GA Zip Code 30327-2462
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) AMERICAN PROFESSIONAL ASSOCIATES Occupation (for Individual) PHYSICIAN
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt 11 / 04 / 2016
Transaction ID : SA11A.473981
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶ 600.00
TOTAL This Period (last page this line number only).....▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2373 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. MCCORMICK, ROBERT, H., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 3939 ERIE AVENUE
 APT 3020

City CINCINNATI State OH Zip Code 45208-1973

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) INFORMATION REQUESTED PER BEST EFFORTS Occupation (for Individual) INFORMATION REQUESTED PER BE

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
 300.00

Date of Receipt
 11 / 10 / 2016
Transaction ID : SA11A.468199

Amount of Each Receipt this Period
 200.00

Memo Item CONTRIBUTION

B. MCCOY, GERALD, K., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 6945 W SURREY AVENUE

City PEORIA State AZ Zip Code 85381-5011

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
 235.00

Date of Receipt
 11 / 03 / 2016
Transaction ID : SA11A.465307

Amount of Each Receipt this Period
 100.00

Memo Item CONTRIBUTION

C. MCCRAY, GREGORY, C., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 9778 MAPLE TRACE CIRCLE

City FAIRFAX State VA Zip Code 22032-1145

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
 1585.00

Date of Receipt
 10 / 30 / 2016
Transaction ID : SA11A.459999

Amount of Each Receipt this Period
 250.00

Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	550.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2374 OF 4311
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. MCCRAY, GREGORY, C., MR.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 9778 MAPLE TRACE CIRCLE

City FAIRFAX	State VA	Zip Code 22032-1145
-----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1585.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	30	/	2016

Transaction ID : SA11A.460001

Amount of Each Receipt this Period
250.00

Memo Item CONTRIBUTION

B. MCCRERY, JIM, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 700 13TH ST NW STE 200 SUITE 200

City WASHINGTON	State DC	Zip Code 20005-3956
--------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) CAPITOL COUNSEL, LLC	Occupation (for Individual) CONSULTANT
---	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
10000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	17	/	2016

Transaction ID : SA11A.468424

Amount of Each Receipt this Period
2500.00

Memo Item CONTRIBUTION

C. MCCREIGHT, MICHAEL, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 11358 NS 3520 RD.

City EARLSBORO	State OK	Zip Code 74840-4405
-------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
225.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	21	/	2016

Transaction ID : SA11A.444605

Amount of Each Receipt this Period
25.00

Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	2775.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2375 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. MCCREIGHT, MICHAEL, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 11358 NS 3520 RD.

City EARLSBORO	State OK	Zip Code 74840-4405
-------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
225.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11		04		2016

Transaction ID : SA11A.472362

Amount of Each Receipt this Period
25.00

Memo Item CONTRIBUTION

B. MCCREIGHT, MICHAEL, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 11358 NS 3520 RD.

City EARLSBORO	State OK	Zip Code 74840-4405
-------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
225.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11		04		2016

Transaction ID : SA11A.473294

Amount of Each Receipt this Period
25.00

Memo Item CONTRIBUTION

C. MCCREARY, RITA, L., ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 2018 CYPRESS STREET

City GAINESVILLE	State TX	Zip Code 76240-3708
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
300.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		25		2016

Transaction ID : SA11A.447389

Amount of Each Receipt this Period
300.00

Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	350.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2376 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. MCCULLOCH, AMOS, , MR., JR.
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2902 STONEGATE
 City TEXARKANA State TX Zip Code 75503-5415
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) WHOLESALE ELECTRIC SUPPLY Occupation (for Individual) OWNER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 10000.00

Date of Receipt 10 / 25 / 2016
Transaction ID : SA11A.445025
 Amount of Each Receipt this Period 10000.00
 Memo Item CONTRIBUTION

B. MCCULLOUGH, MALCOLM, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 51 LAWRENCE AVE
 City MALVERNE State NY Zip Code 11565-1406
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NYS OFFICE MENTAL HEALTH Occupation (for Individual) PSYCHOLOGIST
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 425.00

Date of Receipt 11 / 04 / 2016
Transaction ID : SA11A.472205
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

C. MCCUNN, DRUMMOND, F., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 6840 POCA MONTROYA DRIVE
 City GRANITE BAY State CA Zip Code 95746-7355
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) INFORMATION REQUESTED PER BEST EFFORTS Occupation (for Individual) INFORMATION REQUESTED PER BES
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 11 / 04 / 2016
Transaction ID : SA11A.467577
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶ 10125.00
TOTAL This Period (last page this line number only).....▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2377 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. MCCUTCHEN, ALAN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 6703 110TH AVE NE C3
 C3
 City KIRKLAND State WA Zip Code 98033-7197
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 485.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 05 / 2016
Transaction ID : SA11A.479327
 Amount of Each Receipt this Period
 25.00
 Memo Item
 CONTRIBUTION

B. MCCUTCHEN, ALAN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 6703 110TH AVE NE C3
 C3
 City KIRKLAND State WA Zip Code 98033-7197
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 485.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 05 / 2016
Transaction ID : SA11A.479329
 Amount of Each Receipt this Period
 25.00
 Memo Item
 CONTRIBUTION

C. MCDANIEL, KENT, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1008 S. NELSON
 City MONAHANS State TX Zip Code 79756-6300
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) BRANTLEY TRUCKING Occupation (for Individual) TRUCK DRIVER
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 25 / 2016
Transaction ID : SA11A.448691
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 150.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 2378 OF 4311
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. MCDANIEL, KENT, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1008 S. NELSON

City MONAHANS	State TX	Zip Code 79756-6300
------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) BRANTLEY TRUCKING	Occupation (for Individual) TRUCK DRIVER
--	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
400.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		31		2016

Transaction ID : SA11A.458918

Amount of Each Receipt this Period
50.00

Memo Item CONTRIBUTION

B. MCDANIEL, KENT, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1008 S. NELSON

City MONAHANS	State TX	Zip Code 79756-6300
------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) BRANTLEY TRUCKING	Occupation (for Individual) TRUCK DRIVER
--	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
400.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		31		2016

Transaction ID : SA11A.458922

Amount of Each Receipt this Period
50.00

Memo Item CONTRIBUTION

C. MCDANIEL, MIKE, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 56 DOMEDAY STREET

City WOODBURY	State GA	Zip Code 30293-
------------------	-------------	--------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) MCDANIEL REALTY LLC	Occupation (for Individual) AGENT
--	--------------------------------------

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		25		2016

Transaction ID : SA11A.448721

Amount of Each Receipt this Period
500.00

Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	600.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 2379 OF 4311
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. MCDAVID, STACIE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3340 CAMP BOWE BLVD, SUITE 200
 City FORT WORTH State TX Zip Code 76107-2788
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) MCDAVID COMPANIES Occupation (for Individual) PRESIDENT
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 5000.00

Date of Receipt 10 / 24 / 2016
Transaction ID : SA11A.444071
 Amount of Each Receipt this Period 5000.00
 Memo Item CONTRIBUTION

B. MCDONALD, JOHN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 23 NATIONAL DR.
 City FRANKLIN State MA Zip Code 02038-3243
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) BUSINESSMAN
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 11 / 04 / 2016
Transaction ID : SA11A.470493
 Amount of Each Receipt this Period 500.00
 Memo Item CONTRIBUTION

C. MCDONALD, MYRTH, E., MRS.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 203 CASTLEWAY STREET
 City VICTORIA State TX Zip Code 77904-1744
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 11 / 08 / 2016
Transaction ID : SA11A.467997
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 5600.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2380 OF 4311
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. MCDONALD, SEAN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3203 MAGNOLIA RIDGE RD
 SUITE B
 City ANNAPOLIS State MD Zip Code 21403-4362
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) MEETING PLANNER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.06

Date of Receipt 11 / 01 / 2016
Transaction ID : SA11A.462451
 Amount of Each Receipt this Period 25.03
 Memo Item CONTRIBUTION

B. MCDONALD, SEAN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3203 MAGNOLIA RIDGE RD
 SUITE B
 City ANNAPOLIS State MD Zip Code 21403-4362
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) MEETING PLANNER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.06

Date of Receipt 11 / 01 / 2016
Transaction ID : SA11A.462453
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

C. MCDOWELL, DEREK, A., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 7333 VISTALMAR ST
 City CORAL GABLES State FL Zip Code 33143-6441
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) BOYNE Occupation (for Individual) FARMER
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt 10 / 30 / 2016
Transaction ID : SA11A.460042
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶ 150.03
TOTAL This Period (last page this line number only).....▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2381 OF 4311
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. MCDOWELL, DEREK, A., MR.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 7333 VISTALMAR ST

City CORAL GABLES	State FL	Zip Code 33143-6441
----------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) BOYNE	Occupation (for Individual) FARMER
--	---------------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
400.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11		04		2016

Transaction ID : SA11A.471324

Amount of Each Receipt this Period
100.00

Memo Item CONTRIBUTION

B. MCELHONE, BERNARD, J., MR.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 32 WASHINGTON SQUARE W
UNIT 6E

City NEW YORK	State NY	Zip Code 10011-9217
------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		25		2016

Transaction ID : SA11A.447981

Amount of Each Receipt this Period
500.00

Memo Item CONTRIBUTION

C. MCELHATTAN, JOHN, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1861 HUNTERS POINT LANE

City WESTLAKE	State OH	Zip Code 44145-3651
------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
225.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		25		2016

Transaction ID : SA11A.448813

Amount of Each Receipt this Period
75.00

Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	675.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2382 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. MCELROY, MARGARET, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 102 7TH AVENUE
 City ST PETE BEACH State FL Zip Code 33706-4314
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 10 / 21 / 2016
Transaction ID : SA11A.444086
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

B. MCENIRY, MICHAEL, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1234 WATERFRONT DR.
 City MT. PLEASANT State SC Zip Code 29464-9493
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) DENTIST
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 525.00

Date of Receipt 10 / 29 / 2016
Transaction ID : SA11A.460563
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

C. MCENIRY, MICHAEL, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1234 WATERFRONT DR.
 City MT. PLEASANT State SC Zip Code 29464-9493
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) DENTIST
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 525.00

Date of Receipt 11 / 07 / 2016
Transaction ID : SA11A.475974
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 225.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2383 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. MCEVER, BRUCE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 198 WEATOGUE RD
 City SALISBURY State CT Zip Code 06068-1421
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) BCS Occupation (for Individual) BANKER/WRITER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 3500.00

Date of Receipt 10 / 31 / 2016
Transaction ID : SA11A.464607
 Amount of Each Receipt this Period 500.00
 Memo Item CONTRIBUTION

B. MCEVER, BRUCE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 198 WEATOGUE RD
 City SALISBURY State CT Zip Code 06068-1421
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) BCS Occupation (for Individual) BANKER/WRITER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 3500.00

Date of Receipt 10 / 31 / 2016
Transaction ID : SA11A.464608
 Amount of Each Receipt this Period 500.00
 Memo Item CONTRIBUTION

C. MCEWEN, SCOTT, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 148 LARCHWOOD DR
 City BOWLING GREEN State OH Zip Code 43402-2170
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SCOTT MCEWEN Occupation (for Individual) ENGINEER
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 275.00

Date of Receipt 10 / 30 / 2016
Transaction ID : SA11A.460012
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	1050.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2384 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. MCEWEN, SCOTT, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 148 LARCHWOOD DR
 City BOWLING GREEN State OH Zip Code 43402-2170
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SCOTT MCEWEN Occupation (for Individual) ENGINEER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 275.00

Date of Receipt 11 / 04 / 2016
Transaction ID : SA11A.479580
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

B. MCFADYEN, MARY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO BOX 1336
 City COUPEVILLE State WA Zip Code 98239-1336
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 11 / 03 / 2016
Transaction ID : SA11A.474568
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

C. MCFARLAND, BILLY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 81799 PRISM DR.
 City LA QUINTA State CA Zip Code 92253-7720
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) MUSCO FAMILY OLIVE CO. Occupation (for Individual) VP
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 499.00

Date of Receipt 11 / 04 / 2016
Transaction ID : SA11A.472114
 Amount of Each Receipt this Period 30.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶ 105.00
TOTAL This Period (last page this line number only).....▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2385 OF 4311
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. MCFERRIN, JAMES, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 125 BEVERLY ROAD NE

City ATLANTA	State GA	Zip Code 30309-2655
-----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) U.S. ELECTRIC	Occupation (for Individual) SMALL BUS OWNER
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
650.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	27	/	2016

Transaction ID : SA11A.452609

Amount of Each Receipt this Period
100.00

Memo Item
CONTRIBUTION

B. MCFERRIN, JAMES, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 125 BEVERLY ROAD NE

City ATLANTA	State GA	Zip Code 30309-2655
-----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) U.S. ELECTRIC	Occupation (for Individual) SMALL BUS OWNER
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
650.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	27	/	2016

Transaction ID : SA11A.452623

Amount of Each Receipt this Period
100.00

Memo Item
CONTRIBUTION

C. MCGEE, ODIS, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 3608 RAIDER DR

City HURST	State TX	Zip Code 76053-7908
---------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
600.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	01	/	2016

Transaction ID : SA11A.467315

Amount of Each Receipt this Period
100.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	300.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2386 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. MCGINN, KAREN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5383 TREVINO DRIVE
 City HAYMARKET State VA Zip Code 20169-3160
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 900.00

Date of Receipt 11 / 04 / 2016
Transaction ID : SA11A.473643
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

B. MCGINN, ROBERT, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 18 QUEENS BRIDGE ROAD
 City LEVITTOWN State PA Zip Code 19057-2005
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 220.00

Date of Receipt 10 / 22 / 2016
Transaction ID : SA11A.446869
 Amount of Each Receipt this Period 15.00
 Memo Item CONTRIBUTION

C. MCGINN, ROBERT, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 18 QUEENS BRIDGE ROAD
 City LEVITTOWN State PA Zip Code 19057-2005
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 220.00

Date of Receipt 11 / 04 / 2016
Transaction ID : SA11A.472047
 Amount of Each Receipt this Period 15.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	130.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2387 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
Team Ryan

A. MCGINNIS, WILLIAM, M., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 426 ANDOVER DRIVE
 City LEXINGTON State KY Zip Code 40502-2537
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) CENTRAL DISTRICT INC Occupation (for Individual) ACCOUNTANT
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt 10 / 21 / 2016
Transaction ID : SA11A.443515
 Amount of Each Receipt this Period 1000.00
 Memo Item CONTRIBUTION

B. MCGIRR, GARY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3610 SW WOODVALLEY TERR
 City TOPEKA State KS Zip Code 66614-3551
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) USD 510 Occupation (for Individual) DATA ANALYST
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 350.00

Date of Receipt 11 / 01 / 2016
Transaction ID : SA11A.462326
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

C. MCGIRR, GARY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3610 SW WOODVALLEY TERR
 City TOPEKA State KS Zip Code 66614-3551
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) USD 510 Occupation (for Individual) DATA ANALYST
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 350.00

Date of Receipt 11 / 01 / 2016
Transaction ID : SA11A.462334
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	1050.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2388 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. MCGIRR, GARY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3610 SW WOODVALLEY TERR

City TOPEKA	State KS	Zip Code 66614-3551
----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) USD 510	Occupation (for Individual) DATA ANALYST
--	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
350.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 04 / 2016
Transaction ID : SA11A.471536

Amount of Each Receipt this Period
25.00

Memo Item
CONTRIBUTION

B. MCGIRR, GARY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3610 SW WOODVALLEY TERR

City TOPEKA	State KS	Zip Code 66614-3551
----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) USD 510	Occupation (for Individual) DATA ANALYST
--	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
350.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 04 / 2016
Transaction ID : SA11A.471832

Amount of Each Receipt this Period
25.00

Memo Item
CONTRIBUTION

C. MCGIRR, GARY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3610 SW WOODVALLEY TERR

City TOPEKA	State KS	Zip Code 66614-3551
----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) USD 510	Occupation (for Individual) DATA ANALYST
--	---

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
350.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 08 / 2016
Transaction ID : SA11A.479765

Amount of Each Receipt this Period
25.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	75.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2389 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. MCGOLDRICK, DAVID, , MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 820 A STREET
 STE 600
 City TACOMA State WA Zip Code 98402-5293
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) ATTORNEY
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 400.00

Date of Receipt 10 / 25 / 2016
Transaction ID : SA11A.447432
 Amount of Each Receipt this Period 200.00
 Memo Item CONTRIBUTION

B. MCGRATH, DIANE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1509 15TH ST CT N
 City LAKE ELMO State MN Zip Code 55042-9482
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) 3M Occupation (for Individual) COMPUTER ANALYST
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 300.00

Date of Receipt 10 / 21 / 2016
Transaction ID : SA11A.444607
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

C. MCGRATH, MARY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4351 KLINGLE ST. NW
 City WASHINGTON State DC Zip Code 20016-3576
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) Aggregate Year-to-Date ▼ 800.00

Date of Receipt 10 / 25 / 2016
Transaction ID : SA11A.448972
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	400.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2390 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. MCGRATH, MARY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4351 KLINGLE ST. NW
 City WASHINGTON State DC Zip Code 20016-3576
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 800.00

Date of Receipt 11 / 06 / 2016
Transaction ID : SA11A.478258
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

B. MCGRATH, THOMAS, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1493 IRON BRIDGE ROAD
 City COLUMBIA State PA Zip Code 17512-9620
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) THOMAS J MCGRATH DVM Occupation (for Individual) DONEGAL ANIMAL HOSPITAL
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 10 / 30 / 2016
Transaction ID : SA11A.459418
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

C. MCGRATH, THOMAS, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1493 IRON BRIDGE ROAD
 City COLUMBIA State PA Zip Code 17512-9620
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) THOMAS J MCGRATH DVM Occupation (for Individual) DONEGAL ANIMAL HOSPITAL
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 10 / 30 / 2016
Transaction ID : SA11A.459419
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶ 300.00
TOTAL This Period (last page this line number only).....▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2391 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. MCGRATH, THOMAS, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1493 IRON BRIDGE ROAD
 City COLUMBIA State PA Zip Code 17512-9620
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) THOMAS J MCGRATH DVM Occupation (for Individual) DONEGAL ANIMAL HOSPITAL
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 11 / 01 / 2016
Transaction ID : SA11A.462551
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

B. MCGRATH, THOMAS, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1493 IRON BRIDGE ROAD
 City COLUMBIA State PA Zip Code 17512-9620
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) THOMAS J MCGRATH DVM Occupation (for Individual) DONEGAL ANIMAL HOSPITAL
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 11 / 02 / 2016
Transaction ID : SA11A.469992
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

C. MCGRATH, THOMAS, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1493 IRON BRIDGE ROAD
 City COLUMBIA State PA Zip Code 17512-9620
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) THOMAS J MCGRATH DVM Occupation (for Individual) DONEGAL ANIMAL HOSPITAL
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 11 / 07 / 2016
Transaction ID : SA11A.475897
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	300.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2392 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. MCGREEVY, NORIS, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1102 DUNAWAY DRIVE
 City MCLEAN State VA Zip Code 22101-2206
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) DESIGN BY NORIS Occupation (for Individual) OWNER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 880.00

Date of Receipt **10 / 25 / 2016**
Transaction ID : SA11A.448900
 Amount of Each Receipt this Period 110.00
 Memo Item CONTRIBUTION

B. MCGREEVY, NORIS, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1102 DUNAWAY DRIVE
 City MCLEAN State VA Zip Code 22101-2206
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) DESIGN BY NORIS Occupation (for Individual) OWNER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 880.00

Date of Receipt **11 / 04 / 2016**
Transaction ID : SA11A.471291
 Amount of Each Receipt this Period 110.00
 Memo Item CONTRIBUTION

C. MCGUINNESS, JAMES, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1010 BRIARDALE COURT
 City FAIRVIEW State TX Zip Code 75069-1592
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SEL EMPLOYED Occupation (for Individual) CONSULTANT
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt **10 / 24 / 2016**
Transaction ID : SA11A.446101
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	470.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2393 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. MCGUIRE, THOMAS, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 409 NW44TH STREET
 City KANSAS CITY State MO Zip Code 64116-
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 21 / 2016
Transaction ID : SA11A.444501
 Amount of Each Receipt this Period
 50.00
 Memo Item
 CONTRIBUTION

B. MCGUIRE, THOMAS, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 409 NW44TH STREET
 City KANSAS CITY State MO Zip Code 64116-
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 04 / 2016
Transaction ID : SA11A.471871
 Amount of Each Receipt this Period
 50.00
 Memo Item
 CONTRIBUTION

C. MCINNIS, ELEANOR, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3408 W LYKES AVE
 City TAMPA State FL Zip Code 33609-4626
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 275.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 30 / 2016
Transaction ID : SA11A.459720
 Amount of Each Receipt this Period
 25.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 125.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2394 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
Team Ryan

A. MCINNIS, ELEANOR, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3408 W LYKES AVE
 City TAMPA State FL Zip Code 33609-4626
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 275.00

Date of Receipt 11 / 06 / 2016
Transaction ID : SA11A.477534
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

B. MCINNES, HAROLD, A., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 260 WINDING WAY
 City CAMP HILL State PA Zip Code 17011-8463
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 350.00

Date of Receipt 10 / 26 / 2016
Transaction ID : SA11A.451399
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

C. MCINTOSH, MALLIE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 127 CONNIE DRIVE
 City HENDERSONVILLE State TN Zip Code 37075-4122
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 201.00

Date of Receipt 10 / 25 / 2016
Transaction ID : SA11A.447525
 Amount of Each Receipt this Period 76.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	226.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2395 OF 4311
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. MCINTOSH, MALLIE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 127 CONNIE DRIVE
 City HENDERSONVILLE State TN Zip Code 37075-4122
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 201.00

Date of Receipt 11 / 03 / 2016
Transaction ID : SA11A.465565
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

B. MCKAY, GREGORY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 8805 OLD CREEK RD
 City MEMPHIS State TN Zip Code 38125-4020
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) GRIFFIN, INC Occupation (for Individual) MGR
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 600.00

Date of Receipt 11 / 04 / 2016
Transaction ID : SA11A.471544
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

C. MCKEE, DAVID, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 88 CENTRAL PARK WEST
 City NEW YORK State NY Zip Code 10023-5299
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt 11 / 02 / 2016
Transaction ID : SA11A.466854
 Amount of Each Receipt this Period 1000.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶ 1150.00
TOTAL This Period (last page this line number only).....▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2396 OF 4311
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
A. MCKEEVER, MICHAEL, E., DR., DDS

Mailing Address **7670 PRINCEVALLE ST**

City GILROY	State CA	Zip Code 95020-5022
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) SELF EMPLOYED	Occupation (for Individual) DENTIST
---	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **415.00**

Date of Receipt
10 / 22 / 2016

Transaction ID : SA11A.446731

Amount of Each Receipt this Period
25.00

Memo Item
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
B. MCKENZIE, BONNIE, , ,

Mailing Address **176 STABLEWOOD LANE**

City KERRVILLE	State TX	Zip Code 78028-7647
--------------------------	--------------------	-------------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) ANESTHESIA ASSOCIATES OF KERRVILLE, PL	Occupation (for Individual) ANESTHESIOLOGIST
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **425.00**

Date of Receipt
11 / 02 / 2016

Transaction ID : SA11A.465997

Amount of Each Receipt this Period
50.00

Memo Item
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
C. MCKENZIE, BONNIE, , ,

Mailing Address **176 STABLEWOOD LANE**

City KERRVILLE	State TX	Zip Code 78028-7647
--------------------------	--------------------	-------------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) ANESTHESIA ASSOCIATES OF KERRVILLE, PL	Occupation (for Individual) ANESTHESIOLOGIST
--	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼ **425.00**

Date of Receipt
11 / 05 / 2016

Transaction ID : SA11A.478443

Amount of Each Receipt this Period
25.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	100.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2397 OF 4311		
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14	<input type="checkbox"/> 11c <input type="checkbox"/> 15	<input type="checkbox"/> 12 <input type="checkbox"/> 16

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NAME OF COMMITTEE (In Full)
Team Ryan

A. MCKENNEY, DAVID, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5026 GREEN PINE DRIVE
 City SANDY SPRINGS State GA Zip Code 30342-2402
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 325.00

Date of Receipt 10 / 25 / 2016
Transaction ID : SA11A.448082
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

B. MCKENNEY, DAVID, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5026 GREEN PINE DRIVE
 City SANDY SPRINGS State GA Zip Code 30342-2402
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 325.00

Date of Receipt 11 / 01 / 2016
Transaction ID : SA11A.467217
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

C. MCKEOWN, KAREN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1515 CUMBERLAND RD.
 City TYLER State TX Zip Code 75703-9343
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) WISCONSIN DEPARTMENT OF HEALTH SERVICE Occupation (for Individual) PUBLIC HEALTH
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 10 / 31 / 2016
Transaction ID : SA11A.463410
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	200.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2398 OF 4311
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. MCKEOWN, KATHRYN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1515 CUMBERLAND RD.
 City TYLER State TX Zip Code 75703-9343
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 550.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 28 / 2016
Transaction ID : SA11A.455912
 Amount of Each Receipt this Period
 300.00
 Memo Item
 CONTRIBUTION

B. MCKEOWN, KATHRYN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1515 CUMBERLAND RD.
 City TYLER State TX Zip Code 75703-9343
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 550.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 31 / 2016
Transaction ID : SA11A.458942
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION

C. MCKEON, ROBERT, F., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 18557 S.E. FERLAND CT
 City TEQUESTA State FL Zip Code 33469-1775
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 28 / 2016
Transaction ID : SA11A.455409
 Amount of Each Receipt this Period
 250.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	650.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2399 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. MCKIDDY, CLAUDE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 304 BOATLER RD
 City BIG SPRING State TX Zip Code 79720-7029
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 04 / 2016
Transaction ID : SA11A.473965
 Amount of Each Receipt this Period
 50.00
 Memo Item
 CONTRIBUTION

B. MCKINNEY, KENT, S., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3420 TRACE CIRCLE
 City KERRVILLE State TX Zip Code 78028-8058
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) INFORMATION REQUESTED PER BEST EFFORTS Occupation (for Individual) INFORMATION REQUESTED PER BE
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 2000.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 20 / 2016
Transaction ID : SA11A.433491
 Amount of Each Receipt this Period
 2000.00
 Memo Item
 CONTRIBUTION

C. MCLAUGHLIN, ANDREW, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 750 DOMINIC DRIVE
 City CUYAHOGA FALLS State OH Zip Code 44223-3801
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) FFP Occupation (for Individual) PHYSICIAN
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 22 / 2016
Transaction ID : SA11A.446956
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	2150.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2400 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. MCLAUGHLIN, JOHN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1231 WEST 1870 NORTH
 City PROVO State UT Zip Code 84604-5017
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt 10 / 25 / 2016
Transaction ID : SA11A.448100
 Amount of Each Receipt this Period 1000.00
 Memo Item CONTRIBUTION

B. MCLEAN, DAVID, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2578 ENTERPRISE RD 342
 City ORANGE CITY State FL Zip Code 32763-7904
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 10 / 30 / 2016
Transaction ID : SA11A.459923
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

C. MCLEAN, DAVID, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2578 ENTERPRISE RD 342
 City ORANGE CITY State FL Zip Code 32763-7904
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 11 / 06 / 2016
Transaction ID : SA11A.477527
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	1150.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2401 OF 4311
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. MCLEAN, SUSAN, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 13211 SYCAMORE HEIGHTS ST

City HOUSTON	State TX	Zip Code 77065-3220
-----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) MCLEAN SERVICES, INC	Occupation (for Individual) EDUCATOR
---	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		25		2016

Transaction ID : SA11A.451615

Amount of Each Receipt this Period
250.00

Memo Item
CONTRIBUTION

B. MCLEAN, SUSAN, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 13211 SYCAMORE HEIGHTS ST

City HOUSTON	State TX	Zip Code 77065-3220
-----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) MCLEAN SERVICES, INC	Occupation (for Individual) EDUCATOR
---	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		25		2016

Transaction ID : SA11A.451616

Amount of Each Receipt this Period
250.00

Memo Item
CONTRIBUTION

C. MCLELLAND, SUE, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1200 CR 140

City BURNET	State TX	Zip Code 78611-3414
----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
600.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		31		2016

Transaction ID : SA11A.464595

Amount of Each Receipt this Period
25.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	525.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2402 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. MCLELLAND, SUE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1200 CR 140
 City BURNET State TX Zip Code 78611-3414
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 600.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 10 / 31 / 2016
Transaction ID : SA11A.464604
 Amount of Each Receipt this Period
 25.00
 Memo Item
 CONTRIBUTION

B. MCLELLAND, SUE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1200 CR 140
 City BURNET State TX Zip Code 78611-3414
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 600.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 11 / 04 / 2016
Transaction ID : SA11A.472880
 Amount of Each Receipt this Period
 50.00
 Memo Item
 CONTRIBUTION

C. MCLELLAND, SUE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1200 CR 140
 City BURNET State TX Zip Code 78611-3414
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 600.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 11 / 05 / 2016
Transaction ID : SA11A.478499
 Amount of Each Receipt this Period
 25.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	100.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2403 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
A. MCLOUGHLIN, BARBARA, , ,

Mailing Address **826 NORWAY LANE**

City LOS ANGELES	State CA	Zip Code 90049-1544
----------------------------	--------------------	-------------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
--	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
243.00

Date of Receipt
11 / 01 / 2016

Transaction ID : SA11A.467430

Amount of Each Receipt this Period
25.00

Memo Item CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
B. MCLOUGHLIN, BARBARA, , ,

Mailing Address **826 NORWAY LANE**

City LOS ANGELES	State CA	Zip Code 90049-1544
----------------------------	--------------------	-------------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
--	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
243.00

Date of Receipt
11 / 02 / 2016

Transaction ID : SA11A.469542

Amount of Each Receipt this Period
25.00

Memo Item CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
C. MCMAHAN, ROBERT, , ,

Mailing Address **21 ROBINLAKE LN**

City HOUSTON	State TX	Zip Code 77024-7121
------------------------	--------------------	-------------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
--	---

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
250.00

Date of Receipt
10 / 22 / 2016

Transaction ID : SA11A.449638

Amount of Each Receipt this Period
150.00

Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	200.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2404 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. MCMAHON, WILLIAM, A., , JR.
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 210 CROESUS AVE

City SAN ANTONIO	State TX	Zip Code 78213-4417
---------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
600.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	21	/	2016

Transaction ID : SA11A.444559

Amount of Each Receipt this Period
100.00

Memo Item CONTRIBUTION

B. MCMAHON, WILLIAM, A., , JR.
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 210 CROESUS AVE

City SAN ANTONIO	State TX	Zip Code 78213-4417
---------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
600.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	04	/	2016

Transaction ID : SA11A.472772

Amount of Each Receipt this Period
100.00

Memo Item CONTRIBUTION

C. MCMANUS, JIM, H., MR., JR.
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 88 CHESTNUT ST

City WESTON	State MA	Zip Code 02493-1533
----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) JIM MCMANUS	Occupation (for Individual) COMM. REAL ESTATE
--	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
2150.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	27	/	2016

Transaction ID : SA11A.452865

Amount of Each Receipt this Period
250.00

Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	450.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2405 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. MCMANUS, JIM, H., MR., JR.
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 88 CHESTNUT ST
 City WESTON State MA Zip Code 02493-1533
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) JIM MCMANUS Occupation (for Individual) COMM. REAL ESTATE
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 2150.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 27 / 2016
Transaction ID : SA11A.452867
 Amount of Each Receipt this Period
 250.00
 Memo Item
 CONTRIBUTION

B. MCMANUS, JIM, H., MR., JR.
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 88 CHESTNUT ST
 City WESTON State MA Zip Code 02493-1533
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) JIM MCMANUS Occupation (for Individual) COMM. REAL ESTATE
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 2150.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 27 / 2016
Transaction ID : SA11A.453627
 Amount of Each Receipt this Period
 250.00
 Memo Item
 CONTRIBUTION

C. MCMANUS, JIM, H., MR., JR.
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 88 CHESTNUT ST
 City WESTON State MA Zip Code 02493-1533
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) JIM MCMANUS Occupation (for Individual) COMM. REAL ESTATE
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 2150.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 04 / 2016
Transaction ID : SA11A.470916
 Amount of Each Receipt this Period
 250.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	750.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2406 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
Team Ryan

A. MCMILLAN, DIANNE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 43430 E FLORIDA AVE
 STE F
 City HEMET State CA Zip Code 92544-7224
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 230.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 25 / 2016
Transaction ID : SA11A.448347
 Amount of Each Receipt this Period
 25.00
 Memo Item
 CONTRIBUTION

B. MCMILLAN, DIANNE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 43430 E FLORIDA AVE
 STE F
 City HEMET State CA Zip Code 92544-7224
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 230.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 30 / 2016
Transaction ID : SA11A.460049
 Amount of Each Receipt this Period
 25.00
 Memo Item
 CONTRIBUTION

C. MCMILLAN, DIANNE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 43430 E FLORIDA AVE
 STE F
 City HEMET State CA Zip Code 92544-7224
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 230.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 04 / 2016
Transaction ID : SA11A.471615
 Amount of Each Receipt this Period
 25.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	75.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2407 OF 4311
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. MCMILLAN, DIANNE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 43430 E FLORIDA AVE
 STE F
 City HEMET State CA Zip Code 92544-7224
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 230.00

Date of Receipt 11 / 04 / 2016
Transaction ID : SA11A.472686
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

B. MCMILLAN, DIANNE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 43430 E FLORIDA AVE
 STE F
 City HEMET State CA Zip Code 92544-7224
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 230.00

Date of Receipt 11 / 07 / 2016
Transaction ID : SA11A.475467
 Amount of Each Receipt this Period 5.00
 Memo Item CONTRIBUTION

C. MCMURREY, MARVIN, H., , JR.
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2137 STANMORE DR.
 City HOUSTON State TX Zip Code 77019-5611
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) MCMURREY INVESTMENT ADVISORS Occupation (for Individual) MONEY MANAGER
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 10 / 26 / 2016
Transaction ID : SA11A.450198
 Amount of Each Receipt this Period 500.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 530.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2408 OF 4311
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
Team Ryan

A. MCNAMARA, CASSANDRA, L., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO BOX 316
 City CLIO State CA Zip Code 96106-0316
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) **HOMEMAKER** Occupation (for Individual) **HOMEMAKER**
 Receipt For: Primary General Other (specify) Aggregate Year-to-Date **1900.00**

Date of Receipt **11 / 04 / 2016**
Transaction ID : SA11A.467559
 Amount of Each Receipt this Period **1000.00**
 Memo Item
CONTRIBUTION

B. MCNAMARA, J PAUL, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5512 OAK PLACE
 City BETHESDA State MD Zip Code 20817-3524
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) **INFORMATION REQUESTED PER BEST EFFORTS** Occupation (for Individual) **INFORMATION REQUESTED PER BE**
 Receipt For: Primary General Other (specify) Aggregate Year-to-Date **250.00**

Date of Receipt **10 / 20 / 2016**
Transaction ID : SA11A.433511
 Amount of Each Receipt this Period **250.00**
 Memo Item
CONTRIBUTION

C. MCNEAR, DENMAN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 8300 BURDETTE ROAD, APT 750 APT. 750
 City BETHESDA State MD Zip Code 20817-2837
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) **NONE** Occupation (for Individual) **RETIRED**
 Receipt For: Primary General Other (specify) Aggregate Year-to-Date **600.00**

Date of Receipt **11 / 02 / 2016**
Transaction ID : SA11A.465131
 Amount of Each Receipt this Period **500.00**
 Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... **1750.00**
TOTAL This Period (last page this line number only).....

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2409 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. MCNEEL, RICHARD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 32415 ARCHDALE
 City CHAPEL HILL State NC Zip Code 27517-8398
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1200.00

Date of Receipt 10 / 30 / 2016
Transaction ID : SA11A.460070
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

B. MCNEEL, RICHARD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 32415 ARCHDALE
 City CHAPEL HILL State NC Zip Code 27517-8398
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1200.00

Date of Receipt 11 / 04 / 2016
Transaction ID : SA11A.471735
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

C. MCNEILL-SKORUPAN, CAROL, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1810 THORSTRAND RD
 City MADISON State WI Zip Code 53705-1044
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) STRATEGIC ADVANTAGE SOLUTIONS, INC Occupation (for Individual) PRESIDENT
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 1400.00

Date of Receipt 11 / 04 / 2016
Transaction ID : SA11A.473522
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	250.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2410 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. MCPHERSON, ALEC, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1313 PARNELL AVE, NE
 City LOWELL State MI Zip Code 49331-9768
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 525.00

Date of Receipt 10 / 25 / 2016
Transaction ID : SA11A.448034
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

B. MCPHERSON, ALEC, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1313 PARNELL AVE, NE
 City LOWELL State MI Zip Code 49331-9768
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 525.00

Date of Receipt 10 / 25 / 2016
Transaction ID : SA11A.448035
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

C. MCPHERSON, MAC, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO BOX 2135 205
 City JAMESTOWN State ND Zip Code 58402-2135
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) CHERRINGTON ENTERPRISES Occupation (for Individual) CEO
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 600.00

Date of Receipt 11 / 04 / 2016
Transaction ID : SA11A.473624
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 300.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2411 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. MCPHERSON, MARION, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 205 HILLCREST DR.NE
 City JAMESTOWN State ND Zip Code 58401-3754
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) CHERRINGTON ENTERPRISES INC Occupation (for Individual) CEO
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt 10 / 31 / 2016
Transaction ID : SA11A.458282
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

B. MCPHERSON, MARION, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 205 HILLCREST DR.NE
 City JAMESTOWN State ND Zip Code 58401-3754
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) CHERRINGTON ENTERPRISES INC Occupation (for Individual) CEO
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt 10 / 31 / 2016
Transaction ID : SA11A.458289
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

C. MCQUEEN, MATTHEW, , MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 63 DOWNING ST 9B
 City NEW YORK State NY Zip Code 10014-4331
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) BANK OF AMERICA Occupation (for Individual) MANAGING DIRECTOR
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 10000.00

Date of Receipt 11 / 17 / 2016
Transaction ID : SA11A.480982
 Amount of Each Receipt this Period 10000.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	10200.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2412 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. MCQUEEN, RONALD, K., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 220 GIBRALTER RD STE 350
 City HORSHAM State PA Zip Code 19044-2341
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) INFORMATION REQUESTED PER BEST EFFORTS Occupation (for Individual) INFORMATION REQUESTED PER BE
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 2500.00

Date of Receipt 10 / 28 / 2016
Transaction ID : SA11A.449685
 Amount of Each Receipt this Period 2500.00
 Memo Item CONTRIBUTION

B. MCSPADDEN, FLOYD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4465 THOMAS PARK
 City BEAUMONT State TX Zip Code 77706-7772
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) LAMAR UNIVERSITY Occupation (for Individual) ATTORNEY
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 550.00

Date of Receipt 10 / 26 / 2016
Transaction ID : SA11A.450504
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

C. MCSPADDEN, FLOYD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4465 THOMAS PARK
 City BEAUMONT State TX Zip Code 77706-7772
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) LAMAR UNIVERSITY Occupation (for Individual) ATTORNEY
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 550.00

Date of Receipt 11 / 03 / 2016
Transaction ID : SA11A.468914
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 2650.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 2413 OF 4311 (check only one)
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. MCSPADDEN, FLOYD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4465 THOMAS PARK

City BEAUMONT	State TX	Zip Code 77706-7772
------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) LAMAR UNIVERSITY	Occupation (for Individual) ATTORNEY
---	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
550.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 07 / 2016
Transaction ID : SA11A.476200

Amount of Each Receipt this Period
100.00

Memo Item
CONTRIBUTION

B. MCSPADDEN, JACK, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 140 EAST 72ND STREET
 APT 7B

City NEW YORK	State NY	Zip Code 10021-4382
------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) CITIGRPOUP	Occupation (for Individual) BANKER
---	---------------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
600.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 24 / 2016
Transaction ID : SA11A.445775

Amount of Each Receipt this Period
300.00

Memo Item
CONTRIBUTION

C. MCSPADDEN, JACK, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 140 EAST 72ND STREET
 APT 7B

City NEW YORK	State NY	Zip Code 10021-4382
------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) CITIGRPOUP	Occupation (for Individual) BANKER
---	---------------------------------------

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
600.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 01 / 2016
Transaction ID : SA11A.462417

Amount of Each Receipt this Period
100.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	500.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2414 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. MCSPADDEN, JACK, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 140 EAST 72ND STREET
 APT 7B
 City NEW YORK State NY Zip Code 10021-4382
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) CITIGRPOUP Occupation (for Individual) BANKER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 600.00

Date of Receipt 11 / 01 / 2016
Transaction ID : SA11A.462425
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

B. MCSPADDEN, JACK, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 140 EAST 72ND STREET
 APT 7B
 City NEW YORK State NY Zip Code 10021-4382
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) CITIGRPOUP Occupation (for Individual) BANKER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 600.00

Date of Receipt 11 / 01 / 2016
Transaction ID : SA11A.462426
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

C. MCSWEENEY, DIARMUID, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 7225 GREYSTONE ST.,
 City LAKEWOOD RANCH State FL Zip Code 34202-7931
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 10 / 29 / 2016
Transaction ID : SA11A.460682
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	225.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2415 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. MCSWEENEY, DIARMUID, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 7225 GREYSTONE ST.,
 City LAKEWOOD RANCH State FL Zip Code 34202-7931
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt **10 / 29 / 2016**
Transaction ID : SA11A.460683
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

B. MCSWEENEY, DIARMUID, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 7225 GREYSTONE ST.,
 City LAKEWOOD RANCH State FL Zip Code 34202-7931
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt **11 / 02 / 2016**
Transaction ID : SA11A.465939
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

C. MCSWEENEY, MICHAEL, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5041 LEXINGTON CIRCLE
 City LOOMIS State CA Zip Code 95650-7107
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 750.00

Date of Receipt **11 / 02 / 2016**
Transaction ID : SA11A.466641
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	300.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2416 OF 4311
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. MCSWEENEY, MICHAEL, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 5041 LEXINGTON CIRCLE

City LOOMIS	State CA	Zip Code 95650-7107
----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
750.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	02	/	2016

Transaction ID : SA11A.466652

Amount of Each Receipt this Period
250.00

Memo Item CONTRIBUTION

B. MCWHORTER, NEIL, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 2305 CEDAR SHORES CIRCLE

City JACKSONVILLE	State FL	Zip Code 32210-3909
----------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) AMERICAN AIRLINES	Occupation (for Individual) PILOT
--	--------------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	03	/	2016

Transaction ID : SA11A.468972

Amount of Each Receipt this Period
250.00

Memo Item CONTRIBUTION

C. MCWILLIAMS, ANNE, G., ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address PO BOX 147

City OAKVILLE	State CA	Zip Code 94562-0147
------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) INFORMATION REQUESTED PER BEST EFFORTS	Occupation (for Individual) INFORMATION REQUESTED PER BES
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	24	/	2016

Transaction ID : SA11A.444053

Amount of Each Receipt this Period
500.00

Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	1000.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2418 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. MEADOWS, DAVID, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 117 HERITAGE LANE
 City DEKALB State TX Zip Code 75559-1324
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) BOWIE COUNTY EQUIPMENT Occupation (for Individual) EXECUTIVE
 Receipt For: Primary General Other (specify) Aggregate Year-to-Date 1000.00

Date of Receipt 10 / 24 / 2016
Transaction ID : SA11A.443469
 Amount of Each Receipt this Period 1000.00
 Memo Item CONTRIBUTION

B. MEALEY, GEORGE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 111 RULOFSON STREET
 City SANTA CRUZ State CA Zip Code 95060-2517
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) Aggregate Year-to-Date 1500.00

Date of Receipt 10 / 24 / 2016
Transaction ID : SA11A.443746
 Amount of Each Receipt this Period 1000.00
 Memo Item CONTRIBUTION

C. MECHLING, EUGENE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 700 PORT ST. 4103
 City EASTON State MD Zip Code 21601-8184
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) Aggregate Year-to-Date 225.00

Date of Receipt 10 / 27 / 2016
Transaction ID : SA11A.453851
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... 2025.00
TOTAL This Period (last page this line number only).....

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2419 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. MECHLING, EUGENE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 700 PORT ST.
 4103
 City EASTON State MD Zip Code 21601-8184
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 225.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 02 / 2016
Transaction ID : SA11A.466360
 Amount of Each Receipt this Period
 50.00
 Memo Item
 CONTRIBUTION

B. MECHLING, EUGENE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 700 PORT ST.
 4103
 City EASTON State MD Zip Code 21601-8184
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 225.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 03 / 2016
Transaction ID : SA11A.468918
 Amount of Each Receipt this Period
 50.00
 Memo Item
 CONTRIBUTION

C. MECHLING, EUGENE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 700 PORT ST.
 4103
 City EASTON State MD Zip Code 21601-8184
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 225.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 04 / 2016
Transaction ID : SA11A.473036
 Amount of Each Receipt this Period
 25.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	125.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2420 OF 4311
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name A. MECHLING, EUGENE, , ,		Date of Receipt
Mailing Address 700 PORT ST. 4103		<input type="text" value="11"/> / <input type="text" value="07"/> / <input type="text" value="2016"/>
City EASTON	State MD	Zip Code 21601-8184
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		Transaction ID : SA11A.475867
Name of Employer (for Individual) NONE		Amount of Each Receipt this Period <input type="text" value="50.00"/>
Occupation (for Individual) RETIRED		<input type="checkbox"/> Memo Item CONTRIBUTION
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ <input type="text" value="225.00"/>	

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name B. MEDEL, ROGER, J., DR.,		Date of Receipt
Mailing Address 1301 CONCORD TERRACE		<input type="text" value="10"/> / <input type="text" value="24"/> / <input type="text" value="2016"/>
City SUNRISE	State FL	Zip Code 33323-2843
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		Transaction ID : SA11A.443505
Name of Employer (for Individual) MEDNAX SERVICES, INC.		Amount of Each Receipt this Period <input type="text" value="25000.00"/>
Occupation (for Individual) EXECUTIVE		<input type="checkbox"/> Memo Item CONTRIBUTION
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ <input type="text" value="25000.00"/>	

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name C. MEDFORD, PAT, , ,		Date of Receipt
Mailing Address 13828 STEVEN RD		<input type="text" value="10"/> / <input type="text" value="23"/> / <input type="text" value="2016"/>
City BURNSVILLE	State MN	Zip Code 55337-4226
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		Transaction ID : SA11A.446476
Name of Employer (for Individual) NONE		Amount of Each Receipt this Period <input type="text" value="25.00"/>
Occupation (for Individual) RETIRED		<input type="checkbox"/> Memo Item CONTRIBUTION
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Aggregate Year-to-Date ▼ <input type="text" value="220.00"/>	

SUBTOTAL of Receipts This Page (optional).....	<input type="text" value="25075.00"/>
TOTAL This Period (last page this line number only).....	<input type="text"/>

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2421 OF 4311
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. MEDFORD, PAT, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 13828 STEVEN RD

City BURNSVILLE	State MN	Zip Code 55337-4226
--------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
220.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	28	/	2016

Transaction ID : SA11A.455179

Amount of Each Receipt this Period
25.00

Memo Item CONTRIBUTION

B. MEDFORD, PAT, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 13828 STEVEN RD

City BURNSVILLE	State MN	Zip Code 55337-4226
--------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
220.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	31	/	2016

Transaction ID : SA11A.458701

Amount of Each Receipt this Period
25.00

Memo Item CONTRIBUTION

C. MEDFORD, PAT, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 13828 STEVEN RD

City BURNSVILLE	State MN	Zip Code 55337-4226
--------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
220.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	04	/	2016

Transaction ID : SA11A.470313

Amount of Each Receipt this Period
20.00

Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	70.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2422 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. MEDLIN, MARCIA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 700 ALL UPHILL DR
 City TAYLORSVILLE State NC Zip Code 28681-7165
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 270.00

Date of Receipt: 10 / 27 / 2016
Transaction ID : SA11A.454204
 Amount of Each Receipt this Period: 100.00
 Memo Item CONTRIBUTION

B. MEDLIN, MARCIA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 700 ALL UPHILL DR
 City TAYLORSVILLE State NC Zip Code 28681-7165
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 270.00

Date of Receipt: 10 / 28 / 2016
Transaction ID : SA11A.456071
 Amount of Each Receipt this Period: 25.00
 Memo Item CONTRIBUTION

C. MEDLIN, MARCIA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 700 ALL UPHILL DR
 City TAYLORSVILLE State NC Zip Code 28681-7165
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 270.00

Date of Receipt: 11 / 04 / 2016
Transaction ID : SA11A.472229
 Amount of Each Receipt this Period: 30.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶ 155.00
TOTAL This Period (last page this line number only).....▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2423 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. MEDLIN, MARCIA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 700 ALL UPHILL DR
 City TAYLORSVILLE State NC Zip Code 28681-7165
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 270.00

Date of Receipt
 11 / 07 / 2016
Transaction ID : SA11A.475419
 Amount of Each Receipt this Period 30.00
 Memo Item CONTRIBUTION

B. MEDLIN, MARCIA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 700 ALL UPHILL DR
 City TAYLORSVILLE State NC Zip Code 28681-7165
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 270.00

Date of Receipt
 11 / 07 / 2016
Transaction ID : SA11A.475424
 Amount of Each Receipt this Period 30.00
 Memo Item CONTRIBUTION

C. MEDLIN, SETH, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 611 N 35TH ST
 City MOREHEAD CITY State NC Zip Code 28557-3126
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) DIABETES & ENDOCRINOLOGY CONSULTANTS, Occupation (for Individual) EXECUTIVE
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 750.00

Date of Receipt
 11 / 04 / 2016
Transaction ID : SA11A.473888
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	310.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2424 OF 4311
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. MEECH, SANDRA, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 17 HARVEST GLEN

City EAST LYME	State CT	Zip Code 06333-1556
-------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) PFIZER INC	Occupation (for Individual) CLINICAL RESEARCH
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
225.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	30	/	2016

Transaction ID : SA11A.459637

Amount of Each Receipt this Period
100.00

Memo Item CONTRIBUTION

B. MEECH, SANDRA, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 17 HARVEST GLEN

City EAST LYME	State CT	Zip Code 06333-1556
-------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) PFIZER INC	Occupation (for Individual) CLINICAL RESEARCH
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
225.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	07	/	2016

Transaction ID : SA11A.475988

Amount of Each Receipt this Period
25.00

Memo Item CONTRIBUTION

C. MEEK, W., , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1906 LOST SPRING CT

City LONGWOOD	State FL	Zip Code 32779-4997
------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	04	/	2016

Transaction ID : SA11A.473230

Amount of Each Receipt this Period
50.00

Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	175.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2425 OF 4311
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. MEEKIN, NANCY, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 663 E ROCKS DR
City SANIBEL State FL Zip Code 33957-5317
FEC ID number of contributing federal political committee. **C**
Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 400.00

Date of Receipt
MM / DD / YYYY
10 / 21 / 2016
Transaction ID : SA11A.447101
Amount of Each Receipt this Period
100.00
 Memo Item
CONTRIBUTION

B. MEEKIN, NANCY, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 663 E ROCKS DR
City SANIBEL State FL Zip Code 33957-5317
FEC ID number of contributing federal political committee. **C**
Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 400.00

Date of Receipt
MM / DD / YYYY
10 / 24 / 2016
Transaction ID : SA11A.449468
Amount of Each Receipt this Period
100.00
 Memo Item
CONTRIBUTION

C. MEEKIN, NANCY, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 663 E ROCKS DR
City SANIBEL State FL Zip Code 33957-5317
FEC ID number of contributing federal political committee. **C**
Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 400.00

Date of Receipt
MM / DD / YYYY
11 / 03 / 2016
Transaction ID : SA11A.469114
Amount of Each Receipt this Period
25.00
 Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 225.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2426 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. MEEKIN, NANCY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 663 E ROCKS DR
 City SANIBEL State FL Zip Code 33957-5317
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt
 11 / 07 / 2016
Transaction ID : SA11A.475089
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

B. MEENDSEN, FRED, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 24472 TRICEFIELD COURT
 City SAINT MICHAELS State MD Zip Code 21663-2618
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt
 10 / 27 / 2016
Transaction ID : SA11A.452317
 Amount of Each Receipt this Period 1000.00
 Memo Item CONTRIBUTION

C. MEESE, JACQUELINE, Y., MS.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO BOX 368
 City WESTON State WV Zip Code 26452-0368
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 210.00

Date of Receipt
 10 / 24 / 2016
Transaction ID : SA11A.443756
 Amount of Each Receipt this Period 35.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	1060.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2427 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. MEESE, JACQUELINE, Y., MS.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address PO BOX 368

City WESTON	State WV	Zip Code 26452-0368
FEC ID number of contributing federal political committee. C		
Name of Employer (for Individual) NONE		Occupation (for Individual) RETIRED
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 210.00

Date of Receipt
11 / 08 / 2016
Transaction ID : SA11A.467989

Amount of Each Receipt this Period
35.00

Memo Item
CONTRIBUTION

B. MEIER, ANEASE, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 1614 COUNTRY CLUB RD.

City SAN ANGELO	State TX	Zip Code 76904-9301
FEC ID number of contributing federal political committee. C		
Name of Employer (for Individual) MEIER BUSINESS SYSTEMS, INC.		Occupation (for Individual) OWNER
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 360.00

Date of Receipt
10 / 25 / 2016
Transaction ID : SA11A.447778

Amount of Each Receipt this Period
25.00

Memo Item
CONTRIBUTION

C. MEIER, ANEASE, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 1614 COUNTRY CLUB RD.

City SAN ANGELO	State TX	Zip Code 76904-9301
FEC ID number of contributing federal political committee. C		
Name of Employer (for Individual) MEIER BUSINESS SYSTEMS, INC.		Occupation (for Individual) OWNER
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		Aggregate Year-to-Date ▼ 360.00

Date of Receipt
10 / 25 / 2016
Transaction ID : SA11A.447779

Amount of Each Receipt this Period
25.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	85.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2428 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name A. MEIER, ANEASE, , ,		Date of Receipt M M M / D D D / Y Y Y Y Y Y 10 / 25 / 2016
Mailing Address 1614 COUNTRY CLUB RD.		Transaction ID : SA11A.447811
City SAN ANGELO	State TX	Zip Code 76904-9301
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 30.00
Name of Employer (for Individual) MEIER BUSINESS SYSTEMS, INC.	Occupation (for Individual) OWNER	<input type="checkbox"/> Memo Item CONTRIBUTION
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 360.00	

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name B. MEIER, ANEASE, , ,		Date of Receipt M M M / D D D / Y Y Y Y Y Y 10 / 25 / 2016
Mailing Address 1614 COUNTRY CLUB RD.		Transaction ID : SA11A.447813
City SAN ANGELO	State TX	Zip Code 76904-9301
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 30.00
Name of Employer (for Individual) MEIER BUSINESS SYSTEMS, INC.	Occupation (for Individual) OWNER	<input type="checkbox"/> Memo Item CONTRIBUTION
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 360.00	

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name C. MEIER, ANEASE, , ,		Date of Receipt M M M / D D D / Y Y Y Y Y Y 10 / 31 / 2016
Mailing Address 1614 COUNTRY CLUB RD.		Transaction ID : SA11A.458139
City SAN ANGELO	State TX	Zip Code 76904-9301
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 25.00
Name of Employer (for Individual) MEIER BUSINESS SYSTEMS, INC.	Occupation (for Individual) OWNER	<input type="checkbox"/> Memo Item CONTRIBUTION
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Aggregate Year-to-Date ▼ 360.00	

SUBTOTAL of Receipts This Page (optional).....▶	85.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2429 OF 4311
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. MEIER, ANEASE, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 1614 COUNTRY CLUB RD.
City SAN ANGELO State TX Zip Code 76904-9301
FEC ID number of contributing federal political committee. **C**
Name of Employer (for Individual) MEIER BUSINESS SYSTEMS, INC. Occupation (for Individual) OWNER
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 360.00

Date of Receipt 11 / 01 / 2016
Transaction ID : SA11A.462244
Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

B. MEIER, ANEASE, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 1614 COUNTRY CLUB RD.
City SAN ANGELO State TX Zip Code 76904-9301
FEC ID number of contributing federal political committee. **C**
Name of Employer (for Individual) MEIER BUSINESS SYSTEMS, INC. Occupation (for Individual) OWNER
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 360.00

Date of Receipt 11 / 03 / 2016
Transaction ID : SA11A.468542
Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

C. MEIER, ANEASE, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 1614 COUNTRY CLUB RD.
City SAN ANGELO State TX Zip Code 76904-9301
FEC ID number of contributing federal political committee. **C**
Name of Employer (for Individual) MEIER BUSINESS SYSTEMS, INC. Occupation (for Individual) OWNER
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 360.00

Date of Receipt 11 / 07 / 2016
Transaction ID : SA11A.475985
Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶ 100.00
TOTAL This Period (last page this line number only).....▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2430 OF 4311
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. MEIKE, DONALD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1737 SUSSEX ROAD
 City KAYCEE State WY Zip Code 82639-9625
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 10 / 30 / 2016
Transaction ID : SA11A.460109
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

B. MEIN, CALVIN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 9 SANCTUARY DR
 City SAN ANTONIO State TX Zip Code 78248-1666
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETINAL CONSULTANTS OF SAN ANTONIO Occupation (for Individual) PHYSICIAN
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 10 / 31 / 2016
Transaction ID : SA11A.463694
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

C. MELANSON, GREGORY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3971 GULF SHORE BLVD N 703
 City NAPLES State FL Zip Code 34103-2100
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) MANAGER
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 10 / 28 / 2016
Transaction ID : SA11A.455687
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 400.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2431 OF 4311
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. MELICHAREK, DEBORAH, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 825 MANSFIELD ROAD WEST
 City BORDENTOWN State NJ Zip Code 08505-4512
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) GLORIA NILSON & CO. REAL ESTATE Occupation (for Individual) REALTOR
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 425.00

Date of Receipt **11 / 04 / 2016**
Transaction ID : SA11A.471957
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

B. MELICHAREK, DEBORAH, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 825 MANSFIELD ROAD WEST
 City BORDENTOWN State NJ Zip Code 08505-4512
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) GLORIA NILSON & CO. REAL ESTATE Occupation (for Individual) REALTOR
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 425.00

Date of Receipt **11 / 05 / 2016**
Transaction ID : SA11A.478444
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

C. MELIN, MAROY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 45298 MONTMORENCY MACOMB
 City MACOMB State MI Zip Code 48044-
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt **11 / 04 / 2016**
Transaction ID : SA11A.471706
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶ 175.00
TOTAL This Period (last page this line number only).....▶

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2432 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name A. MELKUS, KENNETH, , ,			Date of Receipt M M M / D D D / Y Y Y Y Y Y 11 / 18 / 2016 Transaction ID : SA11A.480993		
Mailing Address 26 CASTLEWOOD CT			Amount of Each Receipt this Period 5000.00		
City NASHVILLE	State TN	Zip Code 37215-4617	Memo Item <input type="checkbox"/> CONTRIBUTION		
FEC ID number of contributing federal political committee. C					
Name of Employer (for Individual) SELF EMPLOYED		Occupation (for Individual) PRIVATE INVESTOR			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 5000.00			

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name B. MELLEMA, GARY, L., ,			Date of Receipt M M M / D D D / Y Y Y Y Y Y 11 / 10 / 2016 Transaction ID : SA11A.468231		
Mailing Address 2414 PARK HILL DRIVE			Amount of Each Receipt this Period 100.00		
City LONGVIEW	State WA	Zip Code 98632-5764	Memo Item <input type="checkbox"/> CONTRIBUTION		
FEC ID number of contributing federal political committee. C					
Name of Employer (for Individual) INFORMATION REQUESTED PER BEST EFFORTS		Occupation (for Individual) INFORMATION REQUESTED PER BE			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 300.00			

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name C. MELLEMA, JOHN, , ,			Date of Receipt M M M / D D D / Y Y Y Y Y Y 10 / 20 / 2016 Transaction ID : SA11A.444878		
Mailing Address 850 S LIPAN ST			Amount of Each Receipt this Period 250.00		
City DENVER	State CO	Zip Code 80223-2744	Memo Item <input type="checkbox"/> CONTRIBUTION		
FEC ID number of contributing federal political committee. C					
Name of Employer (for Individual) DISSCO		Occupation (for Individual) EXECUTIVE			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		Aggregate Year-to-Date ▼ 250.00			

SUBTOTAL of Receipts This Page (optional).....▶	5350.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2433 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
Team Ryan

A. MELVIN, BRAD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 555 LENOX AVE
 City WESTFIELD State NJ Zip Code 07090-2101
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) AON Occupation (for Individual) REINSURANCE BROKER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 24 / 2016
Transaction ID : SA11A.445987
 Amount of Each Receipt this Period
 250.00
 Memo Item
 CONTRIBUTION

B. MENDOZA, FELIX, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 10 ROCKLEDGE RD APT. 1-A APT 33
 City HARTSDALE State NY Zip Code 10530-3417
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 01 / 2016
Transaction ID : SA11A.462691
 Amount of Each Receipt this Period
 25.00
 Memo Item
 CONTRIBUTION

C. MENDOZA, FELIX, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 10 ROCKLEDGE RD APT. 1-A APT 33
 City HARTSDALE State NY Zip Code 10530-3417
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 01 / 2016
Transaction ID : SA11A.462694
 Amount of Each Receipt this Period
 250.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	525.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2434 OF 4311
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. MENDOZA, ROBERT, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 924 BEDFORD CT W

City HURST	State TX	Zip Code 76053-4102
---------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
217.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	20	/	2016

Transaction ID : SA11A.442072

Amount of Each Receipt this Period
25.00

Memo Item CONTRIBUTION

B. MENDOZA, ROBERT, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 924 BEDFORD CT W

City HURST	State TX	Zip Code 76053-4102
---------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
217.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	07	/	2016

Transaction ID : SA11A.480430

Amount of Each Receipt this Period
25.00

Memo Item CONTRIBUTION

C. MENEELY, CLINT, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1595 SUMMIT SHORES CIRCLE

City BURNSVILLE	State MN	Zip Code 55306-5817
--------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
235.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	26	/	2016

Transaction ID : SA11A.449830

Amount of Each Receipt this Period
25.00

Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	75.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2435 OF 4311
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. MENEELY, CLINT, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1595 SUMMIT SHORES CIRCLE

City BURNSVILLE	State MN	Zip Code 55306-5817
--------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
235.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	04	/	2016

Transaction ID : SA11A.473441

Amount of Each Receipt this Period
25.00

Memo Item CONTRIBUTION

B. MENEELY, CLINT, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1595 SUMMIT SHORES CIRCLE

City BURNSVILLE	State MN	Zip Code 55306-5817
--------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
235.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	07	/	2016

Transaction ID : SA11A.476657

Amount of Each Receipt this Period
10.00

Memo Item CONTRIBUTION

C. MENGEL, JOANNE, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 2 TWIN PINE COURT

City PITTSBURGH	State PA	Zip Code 15215-1564
--------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
350.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	02	/	2016

Transaction ID : SA11A.466734

Amount of Each Receipt this Period
100.00

Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	135.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2436 OF 4311
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. MENTZER, JAMES, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 12 EDGEWOOD AVENUE

City MERRIMACK	State NH	Zip Code 03054-3549
-------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) UNITED METHODIST	Occupation (for Individual) MINISTER
---	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		31		2016

Transaction ID : SA11A.457242

Amount of Each Receipt this Period
500.00

Memo Item
CONTRIBUTION

B. MERCADE, ROBERTO, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 5121 NW 93RD DORAL WAY

City DORAL	State FL	Zip Code 33178-2056
---------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
300.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		31		2016

Transaction ID : SA11A.464769

Amount of Each Receipt this Period
100.00

Memo Item
CONTRIBUTION

C. MERCER, ANGUS, W., ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 4500 CARMEL ESTATES ROAD

City CHARLOTTE	State NC	Zip Code 28226-3417
-------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
305.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		26		2016

Transaction ID : SA11A.447731

Amount of Each Receipt this Period
300.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	900.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2437 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. MERCHENT, ROBERT, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2405 PERCH COVE
 City GAUTIER State MS Zip Code 39553-6709
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) LEADERSHIP CONSULTANT
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt 10 / 21 / 2016
Transaction ID : SA11A.444310
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

B. MERCHENT, ROBERT, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2405 PERCH COVE
 City GAUTIER State MS Zip Code 39553-6709
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) LEADERSHIP CONSULTANT
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt 10 / 21 / 2016
Transaction ID : SA11A.444334
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

C. MERCHENT, ROBERT, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2405 PERCH COVE
 City GAUTIER State MS Zip Code 39553-6709
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) LEADERSHIP CONSULTANT
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt 11 / 04 / 2016
Transaction ID : SA11A.472160
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 600.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2438 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. MERCHANT, ROBERT, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4512 FOXTAIL DRIVE
 City NAZARETH State PA Zip Code 18064-9665
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 600.00

Date of Receipt 11 / 05 / 2016
Transaction ID : SA11A.478480
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

B. MERCHANT, ROBERT, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4512 FOXTAIL DRIVE
 City NAZARETH State PA Zip Code 18064-9665
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 600.00

Date of Receipt 11 / 05 / 2016
Transaction ID : SA11A.478482
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

C. MERCHANT, ROBERT, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4512 FOXTAIL DRIVE
 City NAZARETH State PA Zip Code 18064-9665
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 600.00

Date of Receipt 11 / 07 / 2016
Transaction ID : SA11A.480670
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	300.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2439 OF 4311
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Team Ryan

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
A. MERCHANT, ROBERT, , ,

Mailing Address **4512 FOXTAIL DRIVE**

City NAZARETH	State PA	Zip Code 18064-9665
-------------------------	--------------------	-------------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
--	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **600.00**

Date of Receipt
11 / 07 / 2016

Transaction ID : SA11A.480671

Amount of Each Receipt this Period
100.00

Memo Item CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
B. MERCIER, CHARLES, , ,

Mailing Address **901 N. SAN FERNANDO BLVD.**

City BURBANK	State CA	Zip Code 91504-4326
------------------------	--------------------	-------------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) MERCIER ENTERPRISES	Occupation (for Individual) SELF EMPLOYED
---	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **350.00**

Date of Receipt
10 / 22 / 2016

Transaction ID : SA11A.446949

Amount of Each Receipt this Period
100.00

Memo Item CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
C. MERCIER, CHARLES, , ,

Mailing Address **901 N. SAN FERNANDO BLVD.**

City BURBANK	State CA	Zip Code 91504-4326
------------------------	--------------------	-------------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) MERCIER ENTERPRISES	Occupation (for Individual) SELF EMPLOYED
---	---

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼ **350.00**

Date of Receipt
11 / 04 / 2016

Transaction ID : SA11A.470972

Amount of Each Receipt this Period
100.00

Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	300.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2440 OF 4311
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. MERRILL, LINDA, J., ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 399 LONG RIDGE ROAD

City BEDFORD	State NY	Zip Code 10506-1817
-----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) SELF EMPLOYED	Occupation (for Individual) REAL ESTATE
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	02	/	2016

Transaction ID : SA11A.465122

Amount of Each Receipt this Period
500.00

Memo Item
CONTRIBUTION

B. MERRITT, NORRIS, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 12980 VIA ESPERIA

City DEL MAR	State CA	Zip Code 92014-3723
-----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) SERVICENOW, INC	Occupation (for Individual) PRODUCT ARCHITECT
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	05	/	2016

Transaction ID : SA11A.479179

Amount of Each Receipt this Period
250.00

Memo Item
CONTRIBUTION

C. MERRILL, PAUL, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1074 PALO VERDE AVE

City LONG BEACH	State CA	Zip Code 90815-4663
--------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	31	/	2016

Transaction ID : SA11A.457851

Amount of Each Receipt this Period
25.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	775.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2441 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. MERRILL, PAUL, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1074 PALO VERDE AVE
 City LONG BEACH State CA Zip Code 90815-4663
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 31 / 2016
Transaction ID : SA11A.458203
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION

B. MERRILL, PAUL, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1074 PALO VERDE AVE
 City LONG BEACH State CA Zip Code 90815-4663
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 31 / 2016
Transaction ID : SA11A.458204
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION

C. MERRICK, STEPHEN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 9 ELLE CT
 City BARRINGTON State IL Zip Code 60010-9353
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) CTI INDUSTRIES CORPORATION Occupation (for Individual) PRESIDENT
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 404.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 30 / 2016
Transaction ID : SA11A.460137
 Amount of Each Receipt this Period
 59.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	259.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2442 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. MERRICK, STEPHEN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 9 ELLE CT
 City BARRINGTON State IL Zip Code 60010-9353
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) CTI INDUSTRIES CORPORATION Occupation (for Individual) PRESIDENT
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 404.00

Date of Receipt 11 / 04 / 2016
Transaction ID : SA11A.471265
 Amount of Each Receipt this Period 59.00
 Memo Item CONTRIBUTION

B. MERRITT, WILLIAM, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3009 NATHANIELS GREEN
 City WILLIAMSBURG State VA Zip Code 23185-7505
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 10 / 28 / 2016
Transaction ID : SA11A.456143
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

C. MERRITT, WILLIAM, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3009 NATHANIELS GREEN
 City WILLIAMSBURG State VA Zip Code 23185-7505
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 11 / 04 / 2016
Transaction ID : SA11A.473746
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 159.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2443 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. MERSCH, L., , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5767 REXFORD CT
 City SPRINGFIELD State VA Zip Code 22152-1062
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) FEDEX Occupation (for Individual) SERVICE
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 249.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 24 / 2016
Transaction ID : SA11A.449272
 Amount of Each Receipt this Period
 25.00
 Memo Item
 CONTRIBUTION

B. MERSCH, L., , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5767 REXFORD CT
 City SPRINGFIELD State VA Zip Code 22152-1062
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) FEDEX Occupation (for Individual) SERVICE
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 249.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 05 / 2016
Transaction ID : SA11A.479301
 Amount of Each Receipt this Period
 25.00
 Memo Item
 CONTRIBUTION

C. MESNER WASZAK, SUSAN, M., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 171 NORTH LEE'S WAY
 City PAYSON State AZ Zip Code 85541-2746
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 567.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 20 / 2016
Transaction ID : SA11A.442413
 Amount of Each Receipt this Period
 50.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	100.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2444 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. MESNER WASZAK, SUSAN, M., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 171 NORTH LEE'S WAY
 City PAYSON State AZ Zip Code 85541-2746
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 567.00

Date of Receipt 11 / 04 / 2016
Transaction ID : SA11A.471924
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

B. MESNER WASZAK, SUSAN, M., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 171 NORTH LEE'S WAY
 City PAYSON State AZ Zip Code 85541-2746
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 567.00

Date of Receipt 11 / 04 / 2016
Transaction ID : SA11A.473315
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

C. MESPLE, PAUL, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 7443 N. MILLBROOK AVE
 City FRESNO State CA Zip Code 93720-3234
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) FARMER
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 350.00

Date of Receipt 11 / 03 / 2016
Transaction ID : SA11A.474474
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	175.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2445 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
Team Ryan

A. MESPLE, PAUL, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 7443 N. MILLBROOK AVE
 City FRESNO State CA Zip Code 93720-3234
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) FARMER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 350.00

Date of Receipt 11 / 06 / 2016
Transaction ID : SA11A.477759
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

B. MESSINEO, ROY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4747 S MOUNTAIN VIEW RD
 City FORT MOHAVE State AZ Zip Code 86426-5405
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SIRIUS COMPUTER SOLUTIONS Occupation (for Individual) SALES
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 306.00

Date of Receipt 10 / 25 / 2016
Transaction ID : SA11A.449093
 Amount of Each Receipt this Period 15.00
 Memo Item CONTRIBUTION

C. MESSINEO, ROY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4747 S MOUNTAIN VIEW RD
 City FORT MOHAVE State AZ Zip Code 86426-5405
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SIRIUS COMPUTER SOLUTIONS Occupation (for Individual) SALES
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 306.00

Date of Receipt 10 / 31 / 2016
Transaction ID : SA11A.458652
 Amount of Each Receipt this Period 15.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	280.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2446 OF 4311
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. MESSINEO, ROY, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 4747 S MOUNTAIN VIEW RD

City FORT MOHAVE	State AZ	Zip Code 86426-5405
---------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) SIRIUS COMPUTER SOLUTIONS	Occupation (for Individual) SALES
--	--------------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
306.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11		02		2016

Transaction ID : SA11A.465887

Amount of Each Receipt this Period
25.00

Memo Item
CONTRIBUTION

B. MESSINEO, ROY, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 4747 S MOUNTAIN VIEW RD

City FORT MOHAVE	State AZ	Zip Code 86426-5405
---------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) SIRIUS COMPUTER SOLUTIONS	Occupation (for Individual) SALES
--	--------------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
306.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11		04		2016

Transaction ID : SA11A.473929

Amount of Each Receipt this Period
25.00

Memo Item
CONTRIBUTION

C. METZ, DOROTHY, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 1400 POLY DR
10 CD

City BILLINGS	State MT	Zip Code 59102-8300
------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
1000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11		03		2016

Transaction ID : SA11A.468692

Amount of Each Receipt this Period
1000.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	1050.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2447 OF 4311
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. METZGER, JOHN, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 442 POOL ROCK PLANTATION LN

City HENDERSON	State NC	Zip Code 27537-6477
-------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
225.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	02	/	2016

Transaction ID : SA11A.467036

Amount of Each Receipt this Period
50.00

Memo Item CONTRIBUTION

B. METZGER, JOHN, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 442 POOL ROCK PLANTATION LN

City HENDERSON	State NC	Zip Code 27537-6477
-------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
225.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	04	/	2016

Transaction ID : SA11A.473990

Amount of Each Receipt this Period
25.00

Memo Item CONTRIBUTION

C. METZGER, THOMAS, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 601 NW 12TH AVENUE

City POMPANO BEACH	State FL	Zip Code 33069-2011
-----------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
400.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	01	/	2016

Transaction ID : SA11A.461584

Amount of Each Receipt this Period
200.00

Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	275.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 2448 OF 4311
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. MEURET, NANACY, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address **PO BOX 102214**

City DENVER	State CO	Zip Code 80250-2214
-----------------------	--------------------	-------------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
--	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **248.00**

Date of Receipt
10 / 27 / 2016

Transaction ID : SA11A.452941

Amount of Each Receipt this Period
50.00

Memo Item CONTRIBUTION

B. MEYE, ROBERT, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address **1170 EAST RUBIO**

City ALTADENA	State CA	Zip Code 91001-2027
-------------------------	--------------------	-------------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
--	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **350.00**

Date of Receipt
11 / 04 / 2016

Transaction ID : SA11A.470512

Amount of Each Receipt this Period
100.00

Memo Item CONTRIBUTION

C. MEYERD, GARY, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address **4941 PROMONTORY CT**

City BOULDER	State CO	Zip Code 80304-
------------------------	--------------------	---------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) CBIZ	Occupation (for Individual) BUSINESS UNIT PRESIDENT
--	---

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼ **300.00**

Date of Receipt
11 / 04 / 2016

Transaction ID : SA11A.471351

Amount of Each Receipt this Period
100.00

Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	250.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2449 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. MEYERS, GEORGE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1330 ARGYLL DRIVE
 City ARNOLD State MD Zip Code 21012-2104
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 210.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 26 / 2016
Transaction ID : SA11A.451368
 Amount of Each Receipt this Period
 50.00
 Memo Item
 CONTRIBUTION

B. MEYERS, GEORGE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1330 ARGYLL DRIVE
 City ARNOLD State MD Zip Code 21012-2104
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 210.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 01 / 2016
Transaction ID : SA11A.462283
 Amount of Each Receipt this Period
 30.00
 Memo Item
 CONTRIBUTION

C. MEYERS, GEORGE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1330 ARGYLL DRIVE
 City ARNOLD State MD Zip Code 21012-2104
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 210.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 01 / 2016
Transaction ID : SA11A.462336
 Amount of Each Receipt this Period
 30.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	110.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2450 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
Team Ryan

A. MEYERS, GEORGE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1330 ARGYLL DRIVE
 City ARNOLD State MD Zip Code 21012-2104
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 210.00

Date of Receipt **11 / 01 / 2016**
Transaction ID : SA11A.462351
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

B. MEYER, GEORGE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3 LINDWORTH LANE
 City SAINT LOUIS State MO Zip Code 63124-1415
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) INFORMATION REQUESTED PER BEST EFFORTS Occupation (for Individual) INFORMATION REQUESTED PER BE
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt **11 / 02 / 2016**
Transaction ID : SA11A.465098
 Amount of Each Receipt this Period 1000.00
 Memo Item CONTRIBUTION

C. MEYER, JIMMY, C., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 8103 ROLLING KNOLL COURT
 City SPRINGFIELD State VA Zip Code 22153-2530
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 1125.00

Date of Receipt **10 / 24 / 2016**
Transaction ID : SA11A.443954
 Amount of Each Receipt this Period 375.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	1400.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2451 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. MEYERS, KELLIE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2125 RALSTON AVE
 City HILLSBOROUGH State CA Zip Code 94010-6459
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 10 / 20 / 2016
Transaction ID : SA11A.444861
 Amount of Each Receipt this Period 500.00
 Memo Item CONTRIBUTION

B. MEYERS, LENORE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 13442 N, HEITAGE GATEWAY AVE.
 City MARANA State AZ Zip Code 85658-4005
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 280.00

Date of Receipt 10 / 25 / 2016
Transaction ID : SA11A.451969
 Amount of Each Receipt this Period 30.00
 Memo Item CONTRIBUTION

C. MEYERS, LENORE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 13442 N, HEITAGE GATEWAY AVE.
 City MARANA State AZ Zip Code 85658-4005
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 280.00

Date of Receipt 10 / 29 / 2016
Transaction ID : SA11A.461096
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	580.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2452 OF 4311
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. MEYERS, LENORE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 13442 N, HEITAGE GATEWAY AVE.
 City MARANA State AZ Zip Code 85658-4005
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 280.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 04 / 2016
Transaction ID : SA11A.471493
 Amount of Each Receipt this Period
 50.00
 Memo Item
 CONTRIBUTION

B. MEYERS GORDON, LYNNE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 915 RIVERVIEW PLACE
 City CINCINNATI State OH Zip Code 45202-1622
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) ARTIST
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 01 / 2016
Transaction ID : SA11A.461878
 Amount of Each Receipt this Period
 200.00
 Memo Item
 CONTRIBUTION

C. MEYER, MARK, H., DR., M.D.
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5355 W 85 TH ST
 City KEARNEY State NE Zip Code 68845-1422
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) PLATTE VALLEY MEDICAL GROUP Occupation (for Individual) ORTHOPEDIC SURGEON
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 30 / 2016
Transaction ID : SA11A.464890
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	350.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2453 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. MEYER, MARK, H., DR., M.D.
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5355 W 85 TH ST
 City KEARNEY State NE Zip Code 68845-1422
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) PLATTE VALLEY MEDICAL GROUP Occupation (for Individual) ORTHOPEDIC SURGEON
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 500.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 30 / 2016
Transaction ID : SA11A.464892
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION

B. MEYER, MARK, H., DR., M.D.
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5355 W 85 TH ST
 City KEARNEY State NE Zip Code 68845-1422
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) PLATTE VALLEY MEDICAL GROUP Occupation (for Individual) ORTHOPEDIC SURGEON
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 500.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 02 / 2016
Transaction ID : SA11A.469620
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION

C. MEYER, MARK, H., DR., M.D.
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5355 W 85 TH ST
 City KEARNEY State NE Zip Code 68845-1422
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) PLATTE VALLEY MEDICAL GROUP Occupation (for Individual) ORTHOPEDIC SURGEON
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 500.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 02 / 2016
Transaction ID : SA11A.469621
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	300.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2454 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. MEYER, MARK, H., DR., M.D.
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5355 W 85 TH ST
 City KEARNEY State NE Zip Code 68845-1422
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) PLATTE VALLEY MEDICAL GROUP Occupation (for Individual) ORTHOPEDIC SURGEON
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 500.00

Date of Receipt 11 / 04 / 2016
Transaction ID : SA11A.472425
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

B. MEYER, ORA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 326 3RD AVE SE
 City PACIFIC State WA Zip Code 98047-1436
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) ANALYST Occupation (for Individual) BOEING
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 295.00

Date of Receipt 11 / 04 / 2016
Transaction ID : SA11A.472226
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

C. MEZA, JOAN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4107 BAYSHORE DR
 City BACLIFF State TX Zip Code 77518-1348
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 225.00

Date of Receipt 10 / 25 / 2016
Transaction ID : SA11A.451606
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	100.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2455 OF 4311
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. MEZA, JOAN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4107 BAYSHORE DR
 City BACLIFF State TX Zip Code 77518-1348
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 225.00

Date of Receipt **11 / 04 / 2016**
Transaction ID : SA11A.472474
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

B. MI, HARRY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 12100 KATE DRIVE
 City LOS ALTOS HILLS State CA Zip Code 94022-5147
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) MITTELMAN PLASTIC SURGERY CENTER Occupation (for Individual) FACIAL PLASTIC SURGEON
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt **10 / 20 / 2016**
Transaction ID : SA11A.442084
 Amount of Each Receipt this Period 300.00
 Memo Item CONTRIBUTION

C. MICHAELSEN, JOHN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1580 EL CAMINO DEL TEATRO
 City LA JOLLA State CA Zip Code 92037-6333
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) INFORMATION REQUESTED PER BEST EFFORTS Occupation (for Individual) INFORMATION REQUESTED PER BEST EFFORTS
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt **11 / 02 / 2016**
Transaction ID : SA11A.465092
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 575.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2456 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. MICHAELS, ROBERT, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 38444 LOYOLA AVENUE
 City BEACH PARK State IL Zip Code 60087-1633
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) CSRA Occupation (for Individual) IT TECH
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 207.00

Date of Receipt 10 / 25 / 2016
Transaction ID : SA11A.449058
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

B. MICHAELS, ROBERT, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 38444 LOYOLA AVENUE
 City BEACH PARK State IL Zip Code 60087-1633
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) CSRA Occupation (for Individual) IT TECH
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 207.00

Date of Receipt 10 / 25 / 2016
Transaction ID : SA11A.449059
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

C. MICHAELS, ROBERT, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 38444 LOYOLA AVENUE
 City BEACH PARK State IL Zip Code 60087-1633
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) CSRA Occupation (for Individual) IT TECH
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 207.00

Date of Receipt 10 / 26 / 2016
Transaction ID : SA11A.451338
 Amount of Each Receipt this Period 30.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶ 80.00
TOTAL This Period (last page this line number only).....▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2457 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
A. MICHAELS, ROBERT, , ,

Mailing Address **38444 LOYOLA AVENUE**

City BEACH PARK	State IL	Zip Code 60087-1633
---------------------------	--------------------	-------------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) CSRA	Occupation (for Individual) IT TECH
--	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
207.00

Date of Receipt
11 / 07 / 2016

Transaction ID : SA11A.480151

Amount of Each Receipt this Period
25.00

Memo Item
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
B. MICHALIK, STANISLAVA, , ,

Mailing Address **1536 MAINSAIL DRIVE
2**

City NAPLES	State FL	Zip Code 34114-8881
-----------------------	--------------------	-------------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
--	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
400.00

Date of Receipt
10 / 28 / 2016

Transaction ID : SA11A.45010

Amount of Each Receipt this Period
100.00

Memo Item
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
C. MICHALIK, STANISLAVA, , ,

Mailing Address **1536 MAINSAIL DRIVE
2**

City NAPLES	State FL	Zip Code 34114-8881
-----------------------	--------------------	-------------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
--	---

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
400.00

Date of Receipt
10 / 28 / 2016

Transaction ID : SA11A.455011

Amount of Each Receipt this Period
100.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	225.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2458 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name A. MICHALIK, STANISLAVA, , ,		Date of Receipt MM / DD / YYYY 11 / 03 / 2016 Transaction ID : SA11A.468611
Mailing Address 1536 MAINSAIL DRIVE 2		Amount of Each Receipt this Period 100.00
City NAPLES	State FL	Zip Code 34114-8881
FEC ID number of contributing federal political committee. C		<input type="checkbox"/> Memo Item CONTRIBUTION
Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 400.00	

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name B. MICHALIK, STANISLAVA, , ,		Date of Receipt MM / DD / YYYY 11 / 03 / 2016 Transaction ID : SA11A.468614
Mailing Address 1536 MAINSAIL DRIVE 2		Amount of Each Receipt this Period 50.00
City NAPLES	State FL	Zip Code 34114-8881
FEC ID number of contributing federal political committee. C		<input type="checkbox"/> Memo Item CONTRIBUTION
Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 400.00	

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name C. MICHELSON, MICHAEL, W., ,		Date of Receipt MM / DD / YYYY 11 / 01 / 2016 Transaction ID : SA11A.461915
Mailing Address 2755 CAMPUS DR STE 200		Amount of Each Receipt this Period 10400.00
City SAN MATEO	State CA	Zip Code 94403-2515
FEC ID number of contributing federal political committee. C		<input type="checkbox"/> Memo Item CONTRIBUTION
Name of Employer (for Individual) KKRA & CO	Occupation (for Individual) INVESTOR	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Aggregate Year-to-Date ▼ 10400.00	

SUBTOTAL of Receipts This Page (optional).....▶	10550.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2459 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. MIFFLIN, RICHARD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4135 RUSKIN STREET
 City HOUSTON State TX Zip Code 77005-3514
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) INFORMATION REQUESTED PER BEST EFFORTS Occupation (for Individual) INFORMATION REQUESTED PER BE
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 1100.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 25 / 2016
Transaction ID : SA11A.447559
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION

B. MIFFLIN, RICHARD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4135 RUSKIN STREET
 City HOUSTON State TX Zip Code 77005-3514
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) INFORMATION REQUESTED PER BEST EFFORTS Occupation (for Individual) INFORMATION REQUESTED PER BE
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 1100.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 03 / 2016
Transaction ID : SA11A.465590
 Amount of Each Receipt this Period
 1000.00
 Memo Item
 CONTRIBUTION

C. MIKELSON, DALE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1337 N CASTLEWOOD DRIVE
 City FRANKTOWN State CO Zip Code 80116-9015
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 500.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 05 / 2016
Transaction ID : SA11A.478918
 Amount of Each Receipt this Period
 250.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	1350.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2460 OF 4311
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
Team Ryan

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
A. MIKLOVICH, JOSEPH, , ,

Mailing Address **4991 LAKEAIRE CIRCLE**

City TEMPLE	State TX	Zip Code 76502-6833
-----------------------	--------------------	-------------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
--	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
225.00

Date of Receipt
11 / 04 / 2016

Transaction ID : SA11A.473332

Amount of Each Receipt this Period
100.00

Memo Item CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
B. MIKLOVICH, JOSEPH, , ,

Mailing Address **4991 LAKEAIRE CIRCLE**

City TEMPLE	State TX	Zip Code 76502-6833
-----------------------	--------------------	-------------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
--	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
225.00

Date of Receipt
11 / 06 / 2016

Transaction ID : SA11A.477928

Amount of Each Receipt this Period
25.00

Memo Item CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
C. MILAM, JOAN, G., MRS.,

Mailing Address **2673 CENTER COURT DRIVE**

City WESTON	State FL	Zip Code 33332-1833
-----------------------	--------------------	-------------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) HOMEMAKER
--	---

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
1025.00

Date of Receipt
11 / 03 / 2016

Transaction ID : SA11A.465453

Amount of Each Receipt this Period
375.00

Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	500.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2461 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
Team Ryan

A. MILAM, JOHN, D., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 753 HINSON ROAD
 City EL DORADO State AR Zip Code 71730-9766
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) MILAM CONSTRUCTION Occupation (for Individual) OWNER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt
 11 / 14 / 2016
Transaction ID : SA11A.468261
 Amount of Each Receipt this Period
 500.00
 Memo Item CONTRIBUTION

B. MILAN, THOMAS, L., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 490 FERRY POINT ROAD
 City ANNAPOLIS State MD Zip Code 21403-1348
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt
 10 / 25 / 2016
Transaction ID : SA11A.447384
 Amount of Each Receipt this Period
 100.00
 Memo Item CONTRIBUTION

C. MILAZZO, CYNTHIA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2631 ALTURA
 City EL PASO State TX Zip Code 79930-1710
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 450.00

Date of Receipt
 10 / 24 / 2016
Transaction ID : SA11A.449191
 Amount of Each Receipt this Period
 100.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	700.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2462 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. MILAZZO, CYNTHIA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2631 ALTURA
 City EL PASO State TX Zip Code 79930-1710
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 450.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 24 / 2016
Transaction ID : SA11A.449196
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION

B. MILAZZO, CYNTHIA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2631 ALTURA
 City EL PASO State TX Zip Code 79930-1710
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 450.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 24 / 2016
Transaction ID : SA11A.449197
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION

C. MILAZZO, CYNTHIA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2631 ALTURA
 City EL PASO State TX Zip Code 79930-1710
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 450.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 31 / 2016
Transaction ID : SA11A.457712
 Amount of Each Receipt this Period
 50.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	250.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2463 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. MILLAR, JOHN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 6121 EAST 91ST PLACE
 City TULSA State OK Zip Code 74137-4102
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 755.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 26 / 2016
Transaction ID : SA11A.451238
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION

B. MILLAR, JOHN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 6121 EAST 91ST PLACE
 City TULSA State OK Zip Code 74137-4102
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 755.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 31 / 2016
Transaction ID : SA11A.457984
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION

C. MILLAR, JOHN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 6121 EAST 91ST PLACE
 City TULSA State OK Zip Code 74137-4102
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 755.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 05 / 2016
Transaction ID : SA11A.478950
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	300.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2464 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. MILLAR, JOHN, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 6121 EAST 91ST PLACE

City TULSA	State OK	Zip Code 74137-4102
---------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
755.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
11		05		2016

Transaction ID : SA11A.478952

Amount of Each Receipt this Period
100.00

Memo Item
CONTRIBUTION

B. MILLAR, TED, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 14379 KEIL RD. NE

City AURORA	State OR	Zip Code 97002-9410
----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) WESTWOOD PROPERTY MANAGEMENT INC.	Occupation (for Individual) CORP. EXEC.
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
500.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
11		04		2016

Transaction ID : SA11A.470452

Amount of Each Receipt this Period
250.00

Memo Item
CONTRIBUTION

C. MILLAR, TED, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 14379 KEIL RD. NE

City AURORA	State OR	Zip Code 97002-9410
----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) WESTWOOD PROPERTY MANAGEMENT INC.	Occupation (for Individual) CORP. EXEC.
--	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
500.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
11		04		2016

Transaction ID : SA11A.470454

Amount of Each Receipt this Period
250.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	600.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2465 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name A. MILLER, ANNE, , ,		Date of Receipt M M M / D D D / Y Y Y Y Y Y 10 / 26 / 2016
Mailing Address 6274 WILLOWGATE		Transaction ID : SA11A.450041
City DALLAS	State TX	Zip Code 75230-2219
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 1700.00
Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED	<input type="checkbox"/> Memo Item CONTRIBUTION
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 2700.00	

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name B. MILLER, AUDREY, , ,		Date of Receipt M M M / D D D / Y Y Y Y Y Y 11 / 07 / 2016
Mailing Address 74 PARK LANE		Transaction ID : SA11A.474904
City CONCORD	State MA	Zip Code 01742-1620
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 100.00
Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED	<input type="checkbox"/> Memo Item CONTRIBUTION
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1775.00	

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name C. MILLER, AUDREY, , ,		Date of Receipt M M M / D D D / Y Y Y Y Y Y 11 / 05 / 2016
Mailing Address 74 PARK LANE		Transaction ID : SA11A.479053
City CONCORD	State MA	Zip Code 01742-1620
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 500.00
Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED	<input type="checkbox"/> Memo Item CONTRIBUTION
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Aggregate Year-to-Date ▼ 1775.00	

SUBTOTAL of Receipts This Page (optional).....▶	2300.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2466 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. MILLER, AUDREY, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 74 PARK LANE

City CONCORD	State MA	Zip Code 01742-1620
-----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1775.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11		04		2016

Transaction ID : SA11A.479445

Amount of Each Receipt this Period
100.00

Memo Item
CONTRIBUTION

B. MILLER, AUDREY, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 74 PARK LANE

City CONCORD	State MA	Zip Code 01742-1620
-----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1775.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11		07		2016

Transaction ID : SA11A.479950

Amount of Each Receipt this Period
25.00

Memo Item
CONTRIBUTION

C. MILLER, BARBARA, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 26011 RIDGEWOOD RD.

City CARMEL	State CA	Zip Code 93923-9210
----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
275.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11		05		2016

Transaction ID : SA11A.478557

Amount of Each Receipt this Period
50.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	175.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2467 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. MILLER, CALVIN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 8291 CANOPY TER.
 City PARKLAND State FL Zip Code 33076-4490
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) A/G OF FL. Occupation (for Individual) CEO
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 350.00

Date of Receipt
 11 / 01 / 2016
Transaction ID : SA11A.462471
 Amount of Each Receipt this Period 50.00
 Memo Item
 CONTRIBUTION

B. MILLER, CALVIN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 8291 CANOPY TER.
 City PARKLAND State FL Zip Code 33076-4490
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) A/G OF FL. Occupation (for Individual) CEO
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 350.00

Date of Receipt
 11 / 01 / 2016
Transaction ID : SA11A.462474
 Amount of Each Receipt this Period 50.00
 Memo Item
 CONTRIBUTION

C. MILLER, CALVIN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 8291 CANOPY TER.
 City PARKLAND State FL Zip Code 33076-4490
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) A/G OF FL. Occupation (for Individual) CEO
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 350.00

Date of Receipt
 11 / 04 / 2016
Transaction ID : SA11A.473681
 Amount of Each Receipt this Period 50.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	150.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2468 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. MILLER, CAROLE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 15922 71ST ST. NE
 City ELK RIVER State MN Zip Code 55330-4801
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 790.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 27 / 2016
Transaction ID : SA11A.452929
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION

B. MILLER, CAROLE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 15922 71ST ST. NE
 City ELK RIVER State MN Zip Code 55330-4801
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 790.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 27 / 2016
Transaction ID : SA11A.452930
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION

C. MILLER, CAROLE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 15922 71ST ST. NE
 City ELK RIVER State MN Zip Code 55330-4801
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 790.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 27 / 2016
Transaction ID : SA11A.452940
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	300.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2469 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. MILLER, CAROLE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 15922 71ST ST. NE
 City ELK RIVER State MN Zip Code 55330-4801
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 790.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 27 / 2016
Transaction ID : SA11A.453315
 Amount of Each Receipt this Period
 25.00
 Memo Item CONTRIBUTION

B. MILLER, CAROLE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 15922 71ST ST. NE
 City ELK RIVER State MN Zip Code 55330-4801
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 790.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 27 / 2016
Transaction ID : SA11A.453317
 Amount of Each Receipt this Period
 25.00
 Memo Item CONTRIBUTION

C. MILLER, DAVID, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 7057 CHOKE CHERRY WAY
 City LITTLETON State CO Zip Code 80125-8712
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 214.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 25 / 2016
Transaction ID : SA11A.448256
 Amount of Each Receipt this Period
 31.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 81.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2470 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. MILLER, DAVID, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 7057 CHOKE CHERRY WAY
 City LITTLETON State CO Zip Code 80125-8712
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 214.00

Date of Receipt 10 / 28 / 2016
Transaction ID : SA11A.455681
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

B. MILLER, DON, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1414 BURNSIDE DR. SUITE 105
 City FRANKLIN State TN Zip Code 37067-6458
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 205.00

Date of Receipt 11 / 02 / 2016
Transaction ID : SA11A.467015
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

C. MILLER, DON, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1414 BURNSIDE DR. SUITE 105
 City FRANKLIN State TN Zip Code 37067-6458
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 205.00

Date of Receipt 11 / 02 / 2016
Transaction ID : SA11A.467051
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 75.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2471 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. MILLER, EUGENE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 232 LONG PINE ROAD
 City BLOOMFIELD HILLS State MI Zip Code 48304-3539
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt 10 / 26 / 2016
Transaction ID : SA11A.447687
 Amount of Each Receipt this Period 1000.00
 Memo Item CONTRIBUTION

B. MILLER, JANE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1279 PEACHTREE BATTLE AVE NW
 City ATLANTA State GA Zip Code 30327-1443
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt 10 / 25 / 2016
Transaction ID : SA11A.451790
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

C. MILLER, JOHN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 645 DALE COURT NORTH
 City SHOREVIEW State MN Zip Code 55126-6004
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 305.00

Date of Receipt 10 / 20 / 2016
Transaction ID : SA11A.442079
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 1350.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2472 OF 4311
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name A. MILLER, JOHN, , ,		Date of Receipt M M M / D D D / Y Y Y Y Y Y 10 / 26 / 2016
Mailing Address 645 DALE COURT NORTH		Transaction ID : SA11A.449925
City SHOREVIEW	State MN	Zip Code 55126-6004
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 30.00
Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED	<input type="checkbox"/> Memo Item CONTRIBUTION
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 305.00	

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name B. MILLER, JOHN, , ,		Date of Receipt M M M / D D D / Y Y Y Y Y Y 10 / 29 / 2016
Mailing Address 107 CLUBHOUSE DRIVE 258		Transaction ID : SA11A.460631
City NAPLES	State FL	Zip Code 34105-2940
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 100.00
Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED	<input type="checkbox"/> Memo Item CONTRIBUTION
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 750.00	

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name C. MILLER, JOHN, , ,		Date of Receipt M M M / D D D / Y Y Y Y Y Y 11 / 05 / 2016
Mailing Address 645 DALE COURT NORTH		Transaction ID : SA11A.478806
City SHOREVIEW	State MN	Zip Code 55126-6004
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 50.00
Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED	<input type="checkbox"/> Memo Item CONTRIBUTION
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Aggregate Year-to-Date ▼ 305.00	

SUBTOTAL of Receipts This Page (optional).....▶	180.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2473 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. MILLER, JOHN, C., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1846 GRASSY RIDGE
 City ST LOUIS State MO Zip Code 63122-3508
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) INFORMATION REQUESTED PER BEST EFFORTS Occupation (for Individual) INFORMATION REQUESTED PER BE
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 1000.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 31 / 2016
Transaction ID : SA11A.457333
 Amount of Each Receipt this Period
 1000.00
 Memo Item
 CONTRIBUTION

B. MILLER, JOHN, J., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 112 5TH AVE S APT 501
 City JACKSONVILLE BEACH State FL Zip Code 32250-6795
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SWISHER INTERNATIONAL Occupation (for Individual) EXECUTIVE
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 2000.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 24 / 2016
Transaction ID : SA11A.443484
 Amount of Each Receipt this Period
 2000.00
 Memo Item
 CONTRIBUTION

C. MILLER, JUDITH, A., MRS.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 23060 SHADY KNOLL DRIVE
 City BONITA SPRINGS State FL Zip Code 34135-2034
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 800.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 27 / 2016
Transaction ID : SA11A.453831
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	3100.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2474 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. MILLER, JUDITH, A., MRS.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 23060 SHADY KNOLL DRIVE
 City BONITA SPRINGS State FL Zip Code 34135-2034
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 800.00

Date of Receipt 11 / 03 / 2016
Transaction ID : SA11A.469200
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

B. MILLER, MICHAEL, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1800 WESTVIEW CIR
 City ANCHORAGE State AK Zip Code 99504-2936
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 350.00

Date of Receipt 10 / 27 / 2016
Transaction ID : SA11A.453794
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

C. MILLER, MICHAEL, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1125 GENEVA ST
 City BELLINGHAM State WA Zip Code 98229-2681
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) THE FIRS Occupation (for Individual) BOOKKEEPER
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 340.00

Date of Receipt 11 / 01 / 2016
Transaction ID : SA11A.462820
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	200.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2475 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. MILLER, PAUL, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 202 HERNDON STATION SQUARE
 City HERNDON State VA Zip Code 20170-3756
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) TECHEXEC LLC Occupation (for Individual) CONSULTANT
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 325.00

Date of Receipt 10 / 31 / 2016
Transaction ID : SA11A.457521
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

B. MILLER, PAUL, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 202 HERNDON STATION SQUARE
 City HERNDON State VA Zip Code 20170-3756
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) TECHEXEC LLC Occupation (for Individual) CONSULTANT
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 325.00

Date of Receipt 10 / 31 / 2016
Transaction ID : SA11A.457523
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

C. MILLER, RAYMOND, L., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3373 FLUFANNA TOWNLINE RD.
 City JAMESTOWN State NY Zip Code 14701-9011
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 370.00

Date of Receipt 10 / 30 / 2016
Transaction ID : SA11A.460096
 Amount of Each Receipt this Period 32.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 232.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2476 OF 4311
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. MILLER, RICK, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 969 MOORES CLUB PLACE
City ATLANTA State GA Zip Code 30319-1163
FEC ID number of contributing federal political committee. **C**
Name of Employer (for Individual) BRYAN CAVE LLP Occupation (for Individual) ATTORNEY
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 1000.00

Date of Receipt 10 / 21 / 2016
Transaction ID : SA11A.444144
Amount of Each Receipt this Period 1000.00
 Memo Item CONTRIBUTION

B. MILLER, STEPHEN, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 5732 CLUB OAKS DRIVE
City DALLAS State TX Zip Code 75248-1120
FEC ID number of contributing federal political committee. **C**
Name of Employer (for Individual) DILLON GAGE INC OF DALLAS Occupation (for Individual) CEO
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 231.00

Date of Receipt 10 / 25 / 2016
Transaction ID : SA11A.451868
Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

C. MILLER, WILLIAM, C., , IV
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 515 MADISON AVENUE
City NEW YORK State NY Zip Code 10022-5403
FEC ID number of contributing federal political committee. **C**
Name of Employer (for Individual) INFORMATION REQUESTED PER BEST EFFORTS Occupation (for Individual) INFORMATION REQUESTED PER BEST EFFORTS
Receipt For: Primary General Other (specify)
Aggregate Year-to-Date ▼ 550.00

Date of Receipt 10 / 25 / 2016
Transaction ID : SA11A.447553
Amount of Each Receipt this Period 500.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 1600.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2477 OF 4311
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. MILLGARD, KATHLEEN, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 485 JAGUAR ROAD

City GOODMAN	State MO	Zip Code 64843-9193
-----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) SELF EMPLOYED	Occupation (for Individual) CONSULTANT
--	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
650.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	03	/	2016

Transaction ID : SA11A.468981

Amount of Each Receipt this Period
100.00

Memo Item
CONTRIBUTION

B. MILLIGAN, DAVID, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 775 S GREEN BAY RD

City LAKE FOREST	State IL	Zip Code 60045-3069
---------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) SELF EMPLOYED	Occupation (for Individual) CONSULTANT
--	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
5000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	04	/	2016

Transaction ID : SA11A.473028

Amount of Each Receipt this Period
2500.00

Memo Item
CONTRIBUTION

C. MILLS, B, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 2650 S. HANLEY RD.
SUITE 200

City ST. LOUIS	State MO	Zip Code 63144-2559
-------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) MILLS PROPERTIES	Occupation (for Individual) REAL ESTATE
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
1000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	24	/	2016

Transaction ID : SA11A.445631

Amount of Each Receipt this Period
1000.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	3600.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2478 OF 4311
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Team Ryan

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name A. MILLS, BRUCE, , ,		Date of Receipt
Mailing Address 2650 S. HANLEY RD. SUITE 200		<input type="text" value="11"/> / <input type="text" value="04"/> / <input type="text" value="2016"/>
City ST. LOUIS	State MO	Zip Code 63144-2559
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		Transaction ID : SA11A.471670
Name of Employer (for Individual) MILLS PROPERTIES		Amount of Each Receipt this Period <input type="text" value="1000.00"/>
Occupation (for Individual) REAL ESTATE		<input type="checkbox"/> Memo Item CONTRIBUTION
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ <input type="text" value="3250.00"/>	

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name B. MILLS, COOPER, , ,		Date of Receipt
Mailing Address 3140 BRANDY STA SE		<input type="text" value="11"/> / <input type="text" value="04"/> / <input type="text" value="2016"/>
City ATLANTA	State GA	Zip Code 30339-4406
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		Transaction ID : SA11A.467453
Name of Employer (for Individual) SELF EMPLOYED		Amount of Each Receipt this Period <input type="text" value="250.00"/>
Occupation (for Individual) INVESTMENT BANKER		<input type="checkbox"/> Memo Item CONTRIBUTION
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ <input type="text" value="250.00"/>	

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name C. MILLS, MARY, , ,		Date of Receipt
Mailing Address 322 WHITE AVENUE SE		<input type="text" value="10"/> / <input type="text" value="24"/> / <input type="text" value="2016"/>
City LIVE OAK	State FL	Zip Code 32064-3313
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		Transaction ID : SA11A.446177
Name of Employer (for Individual) NONE		Amount of Each Receipt this Period <input type="text" value="20.00"/>
Occupation (for Individual) RETIRED		<input type="checkbox"/> Memo Item CONTRIBUTION
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Aggregate Year-to-Date ▼ <input type="text" value="295.00"/>	

SUBTOTAL of Receipts This Page (optional).....	<input type="text" value="1270.00"/>
TOTAL This Period (last page this line number only).....	<input type="text"/>

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2479 OF 4311
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. MILLS, MARY, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 322 WHITE AVENUE SE

City LIVE OAK	State FL	Zip Code 32064-3313
------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
295.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		25		2016

Transaction ID : SA11A.448579

Amount of Each Receipt this Period
30.00

Memo Item CONTRIBUTION

B. MILLS, MARY, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 322 WHITE AVENUE SE

City LIVE OAK	State FL	Zip Code 32064-3313
------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
295.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11		04		2016

Transaction ID : SA11A.470977

Amount of Each Receipt this Period
20.00

Memo Item CONTRIBUTION

C. MILLS, MARY, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 322 WHITE AVENUE SE

City LIVE OAK	State FL	Zip Code 32064-3313
------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
295.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11		07		2016

Transaction ID : SA11A.475207

Amount of Each Receipt this Period
25.00

Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	75.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2480 OF 4311
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. MILLS, PATRICIA, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 20895 JO MARIE WAY

City CALLAWAY State MD Zip Code 20620-2307

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) DOD Occupation (for Individual) CIVILIAN

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 455.00

Date of Receipt 10 / 23 / 2016
Transaction ID : SA11A.446307

Amount of Each Receipt this Period 50.00

Memo Item CONTRIBUTION

B. MILOS, TED, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1836 SOUTH WABASH AVENUE

City CHICAGO State IL Zip Code 60616-1615

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 475.00

Date of Receipt 11 / 01 / 2016
Transaction ID : SA11A.462449

Amount of Each Receipt this Period 100.00

Memo Item CONTRIBUTION

C. MILTON, JOHN, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1517 ANACOSTIA

City MOUNT PLEASANT State SC Zip Code 29466-7510

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 800.00

Date of Receipt 10 / 28 / 2016
Transaction ID : SA11A.456145

Amount of Each Receipt this Period 100.00

Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 250.00

TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2481 OF 4311
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. MILTON, JOHN, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 1517 ANACOSTIA
City MOUNT PLEASANT State SC Zip Code 29466-7510
FEC ID number of contributing federal political committee. **C**
Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 800.00

Date of Receipt **11 / 04 / 2016**
Transaction ID : SA11A.470732
Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

B. MINER, GAIL, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 500 W SHORE TRL 10E
City SPARTA State NJ Zip Code 07871-1434
FEC ID number of contributing federal political committee. **C**
Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 275.00

Date of Receipt **10 / 24 / 2016**
Transaction ID : SA11A.445606
Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

C. MINER, GAIL, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 500 W SHORE TRL 10E
City SPARTA State NJ Zip Code 07871-1434
FEC ID number of contributing federal political committee. **C**
Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 275.00

Date of Receipt **11 / 06 / 2016**
Transaction ID : SA11A.477491
Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 200.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2482 OF 4311
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. MINERVINI, MARIA, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 76413 PALA PALMS DRIVE

City INDIAN WELLS	State CA	Zip Code 92210-8849
----------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) INFORMATION REQUESTED PER BEST EFFORTS	Occupation (for Individual) INFORMATION REQUESTED PER BE
---	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1100.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
11		10		2016

Transaction ID : SA11A.468194

Amount of Each Receipt this Period
500.00

Memo Item
CONTRIBUTION

B. MINERVINI, MARIA, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 76413 PALA PALMS DRIVE

City INDIAN WELLS	State CA	Zip Code 92210-8849
----------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) INFORMATION REQUESTED PER BEST EFFORTS	Occupation (for Individual) INFORMATION REQUESTED PER BE
---	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1100.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
11		10		2016

Transaction ID : SA11A.468442

Amount of Each Receipt this Period
600.00

Memo Item
CONTRIBUTION

C. MINESINGER, KEN, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 17301 AVENLEIGH DRIVE

City ASHTON	State MD	Zip Code 20861-3634
----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) GREENBERG TRAURIG	Occupation (for Individual) ATTORNEY
--	---

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
300.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
10		24		2016

Transaction ID : SA11A.446016

Amount of Each Receipt this Period
25.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	1125.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2483 OF 4311
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. MINICHELLO, CAROLYN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 16440 W HOLLY ST
 City GOODYEAR State AZ Zip Code 85395-1894
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 225.00

Date of Receipt 11 / 01 / 2016
Transaction ID : SA11A.462249
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

B. MINKOFF, GEORGE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 26 ROWE RD
 City GREAT BARRINGTON State MA Zip Code 01230-8902
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) RARE BOOK DEALER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 10 / 23 / 2016
Transaction ID : SA11A.449631
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

C. MINNELLA, TODD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 12743 TEXANA ST
 City SAN DIEGO State CA Zip Code 92129-3616
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SOASTA, INC. Occupation (for Individual) IT DIRECTOR
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 10 / 20 / 2016
Transaction ID : SA11A.442216
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶ 375.00
TOTAL This Period (last page this line number only).....▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2484 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name A. MINOTT, DAVID, , ,			Date of Receipt M M M / D D D / Y Y Y Y Y Y 10 / 28 / 2016
Mailing Address 20 ROCKWOOD LANE			Transaction ID : SA11A.456117
City GROTON	State MA	Zip Code 01450-1146	Amount of Each Receipt this Period 50.00
FEC ID number of contributing federal political committee. C			<input type="checkbox"/> Memo Item CONTRIBUTION
Name of Employer (for Individual) ARC5 ENVIRONMENTAL CONSULTING LLC		Occupation (for Individual) ENVIRONMENTAL CONSULTANT	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 300.00	

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name B. MINOTT, DAVID, , ,			Date of Receipt M M M / D D D / Y Y Y Y Y Y 11 / 04 / 2016
Mailing Address 20 ROCKWOOD LANE			Transaction ID : SA11A.471168
City GROTON	State MA	Zip Code 01450-1146	Amount of Each Receipt this Period 50.00
FEC ID number of contributing federal political committee. C			<input type="checkbox"/> Memo Item CONTRIBUTION
Name of Employer (for Individual) ARC5 ENVIRONMENTAL CONSULTING LLC		Occupation (for Individual) ENVIRONMENTAL CONSULTANT	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 300.00	

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name C. MIRA, JOAQUIN, , ,			Date of Receipt M M M / D D D / Y Y Y Y Y Y 10 / 25 / 2016
Mailing Address 22626 E RANGE			Transaction ID : SA11A.447781
City SAN ANTONIO	State TX	Zip Code 78255-2135	Amount of Each Receipt this Period 35.00
FEC ID number of contributing federal political committee. C			<input type="checkbox"/> Memo Item CONTRIBUTION
Name of Employer (for Individual) SELF EMPLOYED		Occupation (for Individual) PHYSICIAN	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		Aggregate Year-to-Date ▼ 365.00	

SUBTOTAL of Receipts This Page (optional).....	135.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2485 OF 4311
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. MIRA, JOAQUIN, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 22626 E RANGE

City SAN ANTONIO	State TX	Zip Code 78255-2135
---------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) SELF EMPLOYED	Occupation (for Individual) PHYSICIAN
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
365.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		25		2016

Transaction ID : SA11A.447790

Amount of Each Receipt this Period
30.00

Memo Item
CONTRIBUTION

B. MIRA, JOAQUIN, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 22626 E RANGE

City SAN ANTONIO	State TX	Zip Code 78255-2135
---------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) SELF EMPLOYED	Occupation (for Individual) PHYSICIAN
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
365.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		29		2016

Transaction ID : SA11A.461075

Amount of Each Receipt this Period
25.00

Memo Item
CONTRIBUTION

C. MIRA, JOAQUIN, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 22626 E RANGE

City SAN ANTONIO	State TX	Zip Code 78255-2135
---------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) SELF EMPLOYED	Occupation (for Individual) PHYSICIAN
--	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
365.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11		04		2016

Transaction ID : SA11A.470314

Amount of Each Receipt this Period
25.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	80.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2486 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. MIRA, JOAQUIN, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 22626 E RANGE

City SAN ANTONIO	State TX	Zip Code 78255-2135
---------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) SELF EMPLOYED	Occupation (for Individual) PHYSICIAN
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
365.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11		04		2016

Transaction ID : SA11A.472492

Amount of Each Receipt this Period
25.00

Memo Item
CONTRIBUTION

B. MIRANDA, SUSAN, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 33 SUMMER HOUSE

City IRVINE	State CA	Zip Code 92603-0211
----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) MIRANDA ACCOUNTUNG CORP	Occupation (for Individual) CPA
--	------------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
275.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11		02		2016

Transaction ID : SA11A.466409

Amount of Each Receipt this Period
50.00

Memo Item
CONTRIBUTION

C. MIRANDA, SUSAN, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 33 SUMMER HOUSE

City IRVINE	State CA	Zip Code 92603-0211
----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) MIRANDA ACCOUNTUNG CORP	Occupation (for Individual) CPA
--	------------------------------------

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
275.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11		02		2016

Transaction ID : SA11A.466410

Amount of Each Receipt this Period
50.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	125.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2487 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. MIRANDA, SUSAN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 33 SUMMER HOUSE
 City IRVINE State CA Zip Code 92603-0211
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) MIRANDA ACCOUNTUNG CORP Occupation (for Individual) CPA
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 275.00

Date of Receipt 11 / 04 / 2016
Transaction ID : SA11A.471681
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

B. MIRELES, TONY, A., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 20607 HIGHLAND LAKE LOOP THE COVE
 City LAGO VISTA State TX Zip Code 78645-7501
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) A. A. MIRELES Occupation (for Individual) AAM CHALLENGER ENTERPRISES, I
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 638.00

Date of Receipt 10 / 20 / 2016
Transaction ID : SA11A.442445
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

C. MIRELES, TONY, A., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 20607 HIGHLAND LAKE LOOP THE COVE
 City LAGO VISTA State TX Zip Code 78645-7501
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) A. A. MIRELES Occupation (for Individual) AAM CHALLENGER ENTERPRISES, L
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 638.00

Date of Receipt 10 / 31 / 2016
Transaction ID : SA11A.457303
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	150.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2488 OF 4311
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. MIRELES, TONY, A., MR.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 20607 HIGHLAND LAKE LOOP
THE COVE

City LAGO VISTA	State TX	Zip Code 78645-7501
--------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) A. A. MIRELES	Occupation (for Individual) AAM CHALLENGER ENTERPRISES, L
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
638.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		31		2016

Transaction ID : SA11A.459294

Amount of Each Receipt this Period
50.00

Memo Item CONTRIBUTION

B. MIRELES, TONY, A., MR.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 20607 HIGHLAND LAKE LOOP
THE COVE

City LAGO VISTA	State TX	Zip Code 78645-7501
--------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) A. A. MIRELES	Occupation (for Individual) AAM CHALLENGER ENTERPRISES, I
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
638.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		31		2016

Transaction ID : SA11A.459295

Amount of Each Receipt this Period
50.00

Memo Item CONTRIBUTION

C. MIRELES, TONY, A., MR.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 20607 HIGHLAND LAKE LOOP
THE COVE

City LAGO VISTA	State TX	Zip Code 78645-7501
--------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) A. A. MIRELES	Occupation (for Individual) AAM CHALLENGER ENTERPRISES, L
--	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
638.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11		04		2016

Transaction ID : SA11A.473787

Amount of Each Receipt this Period
25.00

Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	125.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2489 OF 4311
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. MIRELES, TONY, A., MR.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 20607 HIGHLAND LAKE LOOP
THE COVE

City LAGO VISTA State TX Zip Code 78645-7501

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) A. A. MIRELES Occupation (for Individual) AAM CHALLENGER ENTERPRISES, L

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 638.00

Date of Receipt 11 / 07 / 2016
Transaction ID : SA11A.480170

Amount of Each Receipt this Period 20.00

Memo Item CONTRIBUTION

B. MISCH, ALETHA., , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 6154 WOODSIDE DR

City CASS CITY State MI Zip Code 48726-9013

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 225.00

Date of Receipt 10 / 29 / 2016
Transaction ID : SA11A.461199

Amount of Each Receipt this Period 25.00

Memo Item CONTRIBUTION

C. MISCH, ALETHA., , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 6154 WOODSIDE DR

City CASS CITY State MI Zip Code 48726-9013

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 225.00

Date of Receipt 11 / 04 / 2016
Transaction ID : SA11A.471551

Amount of Each Receipt this Period 25.00

Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 70.00

TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2490 OF 4311
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. MISCH, ALETHA., , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 6154 WOODSIDE DR

City CASS CITY	State MI	Zip Code 48726-9013
-------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
225.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11		04		2016

Transaction ID : SA11A.471722

Amount of Each Receipt this Period
25.00

Memo Item CONTRIBUTION

B. MISCH, ALETHA., , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 6154 WOODSIDE DR

City CASS CITY	State MI	Zip Code 48726-9013
-------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
225.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11		04		2016

Transaction ID : SA11A.472352

Amount of Each Receipt this Period
25.00

Memo Item CONTRIBUTION

C. MISKA, EDWARD, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 745 THIRD STREET

City LAKE OSWEGO	State OR	Zip Code 97034-2349
---------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
400.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11		04		2016

Transaction ID : SA11A.473583

Amount of Each Receipt this Period
100.00

Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	150.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2491 OF 4311
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. MISSEL, JEROME, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 583 HARRIS AVE.

City WOONSOCKET	State RI	Zip Code 02895-1872
--------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) SELF EMPLOYED	Occupation (for Individual) PHYSICIAN
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
650.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		26		2016

Transaction ID : SA11A.450264

Amount of Each Receipt this Period
250.00

Memo Item
CONTRIBUTION

B. MISSEL, JEROME, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 583 HARRIS AVE.

City WOONSOCKET	State RI	Zip Code 02895-1872
--------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) SELF EMPLOYED	Occupation (for Individual) PHYSICIAN
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
650.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11		02		2016

Transaction ID : SA11A.469371

Amount of Each Receipt this Period
200.00

Memo Item
CONTRIBUTION

C. MISSEL, JEROME, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 583 HARRIS AVE.

City WOONSOCKET	State RI	Zip Code 02895-1872
--------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) SELF EMPLOYED	Occupation (for Individual) PHYSICIAN
--	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
650.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11		07		2016

Transaction ID : SA11A.479953

Amount of Each Receipt this Period
100.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	550.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2492 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. MITCHELL, BARBARA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 270 E. PEARSON ST.
 1401
 City CHICAGO State IL Zip Code 60611-2686
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 06 / 2016
Transaction ID : SA11A.478112
 Amount of Each Receipt this Period
 250.00
 Memo Item CONTRIBUTION

B. MITCHELL, GEORGE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 424 EAST WASHINGTON STREET
 City ATHENS State AL Zip Code 35611-2726
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 225.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 31 / 2016
Transaction ID : SA11A.463388
 Amount of Each Receipt this Period
 25.00
 Memo Item CONTRIBUTION

C. MITCHELL, GEORGE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 424 EAST WASHINGTON STREET
 City ATHENS State AL Zip Code 35611-2726
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 225.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 07 / 2016
Transaction ID : SA11A.475629
 Amount of Each Receipt this Period
 25.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	300.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2493 OF 4311
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. MITCHELL, GEORGE, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 424 EAST WASHINGTON STREET

City ATHENS	State AL	Zip Code 35611-2726
----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
225.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	07	/	2016

Transaction ID : SA11A.475814

Amount of Each Receipt this Period
25.00

Memo Item CONTRIBUTION

B. MITCHELL, SUZAN, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 30130 AVENIDA TRANQUILA

City RANCHO PALOS VERDE	State CA	Zip Code 90275-4517
----------------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1300.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	01	/	2016

Transaction ID : SA11A.467319

Amount of Each Receipt this Period
100.00

Memo Item CONTRIBUTION

C. MITCHELL, WILLIAM, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 696 ARLINGTON DR

City PROVO	State UT	Zip Code 84606-6669
---------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	26	/	2016

Transaction ID : SA11A.450205

Amount of Each Receipt this Period
50.00

Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	175.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2494 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. MITCHELL, WILLIAM, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 696 ARLINGTON DR
 City PROVO State UT Zip Code 84606-6669
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 26 / 2016
Transaction ID : SA11A.450212
 Amount of Each Receipt this Period
 50.00
 Memo Item
 CONTRIBUTION

B. MITCHELL, WILLIAM, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 696 ARLINGTON DR
 City PROVO State UT Zip Code 84606-6669
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 31 / 2016
Transaction ID : SA11A.464578
 Amount of Each Receipt this Period
 50.00
 Memo Item
 CONTRIBUTION

C. MITRAKAS, GREG, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 297 EAST MAINST
 City MARLBOROUGH State MA Zip Code 01752-5421
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 29 / 2016
Transaction ID : SA11A.461101
 Amount of Each Receipt this Period
 50.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	150.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2495 OF 4311
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. MITRAKAS, GREG, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 297 EAST MAINST

City MARLBOROUGH State MA Zip Code 01752-5421

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 400.00

Date of Receipt 11 / 04 / 2016
Transaction ID : SA11A.470904

Amount of Each Receipt this Period 50.00

Memo Item CONTRIBUTION

B. MITSCH, MARILYN, J., MRS.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 4 CHARLEY LAKE COURT

City NORTH OAKS State MN Zip Code 55127-6219

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 400.00

Date of Receipt 10 / 30 / 2016
Transaction ID : SA11A.459626

Amount of Each Receipt this Period 100.00

Memo Item CONTRIBUTION

C. MITSCH, MARILYN, J., MRS.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 4 CHARLEY LAKE COURT

City NORTH OAKS State MN Zip Code 55127-6219

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 400.00

Date of Receipt 11 / 02 / 2016
Transaction ID : SA11A.466269

Amount of Each Receipt this Period 100.00

Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 250.00

TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2496 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. MIXON, RANDY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3731 MAYFAIR RD NE
 City ATLANTA State GA Zip Code 30342-4531
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 25 / 2016
Transaction ID : SA11A.451602
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION

B. MIXON, RANDY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3731 MAYFAIR RD NE
 City ATLANTA State GA Zip Code 30342-4531
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 07 / 2016
Transaction ID : SA11A.476287
 Amount of Each Receipt this Period
 25.00
 Memo Item
 CONTRIBUTION

C. MIXON, RANDY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3731 MAYFAIR RD NE
 City ATLANTA State GA Zip Code 30342-4531
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 07 / 2016
Transaction ID : SA11A.476293
 Amount of Each Receipt this Period
 25.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 150.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2497 OF 4311
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. MOBLEY, JEANETTE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4 BATON ROUGE
 City IRVINE State CA Zip Code 92604-1904
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) INDP. CONTRACTOR
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 680.00

Date of Receipt 10 / 23 / 2016
Transaction ID : SA11A.446418
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

B. MOBLEY, JEANETTE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4 BATON ROUGE
 City IRVINE State CA Zip Code 92604-1904
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) INDP. CONTRACTOR
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 680.00

Date of Receipt 10 / 25 / 2016
Transaction ID : SA11A.448047
 Amount of Each Receipt this Period 30.00
 Memo Item CONTRIBUTION

C. MOBLEY, JEANETTE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4 BATON ROUGE
 City IRVINE State CA Zip Code 92604-1904
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) INDP. CONTRACTOR
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 680.00

Date of Receipt 10 / 27 / 2016
Transaction ID : SA11A.452988
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶ 80.00
TOTAL This Period (last page this line number only).....▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2498 OF 4311
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. MOBLEY, JEANETTE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4 BATON ROUGE
 City IRVINE State CA Zip Code 92604-1904
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) INDP. CONTRACTOR
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 680.00

Date of Receipt 10 / 28 / 2016
Transaction ID : SA11A.455349
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

B. MOBLEY, JEANETTE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4 BATON ROUGE
 City IRVINE State CA Zip Code 92604-1904
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) INDP. CONTRACTOR
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 680.00

Date of Receipt 10 / 30 / 2016
Transaction ID : SA11A.459479
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

C. MOBLEY, JEANETTE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4 BATON ROUGE
 City IRVINE State CA Zip Code 92604-1904
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) INDP. CONTRACTOR
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 680.00

Date of Receipt 10 / 29 / 2016
Transaction ID : SA11A.460415
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 75.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2499 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name A. MOBLEY, JEANETTE, , ,			Date of Receipt M M M / D D D / Y Y Y Y Y Y 11 / 02 / 2016 Transaction ID : SA11A.469638
Mailing Address 4 BATON ROUGE			Amount of Each Receipt this Period 25.00
City IRVINE	State CA	Zip Code 92604-1904	<input type="checkbox"/> Memo Item CONTRIBUTION
FEC ID number of contributing federal political committee. C			
Name of Employer (for Individual) SELF EMPLOYED	Occupation (for Individual) INDP. CONTRACTOR		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 680.00		

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name B. MOBLEY, JEANETTE, , ,			Date of Receipt M M M / D D D / Y Y Y Y Y Y 11 / 07 / 2016 Transaction ID : SA11A.475850
Mailing Address 4 BATON ROUGE			Amount of Each Receipt this Period 25.00
City IRVINE	State CA	Zip Code 92604-1904	<input type="checkbox"/> Memo Item CONTRIBUTION
FEC ID number of contributing federal political committee. C			
Name of Employer (for Individual) SELF EMPLOYED	Occupation (for Individual) INDP. CONTRACTOR		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 680.00		

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name C. MOBLEY, JEANETTE, , ,			Date of Receipt M M M / D D D / Y Y Y Y Y Y 11 / 06 / 2016 Transaction ID : SA11A.477040
Mailing Address 4 BATON ROUGE			Amount of Each Receipt this Period 25.00
City IRVINE	State CA	Zip Code 92604-1904	<input type="checkbox"/> Memo Item CONTRIBUTION
FEC ID number of contributing federal political committee. C			
Name of Employer (for Individual) SELF EMPLOYED	Occupation (for Individual) INDP. CONTRACTOR		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Aggregate Year-to-Date ▼ 680.00		

SUBTOTAL of Receipts This Page (optional).....▶	75.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2500 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. MOBLEY, JEANETTE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4 BATON ROUGE
 City IRVINE State CA Zip Code 92604-1904
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) INDP. CONTRACTOR
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 680.00

Date of Receipt 11 / 06 / 2016
Transaction ID : SA11A.477653
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

B. MOBLEY, JEANETTE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4 BATON ROUGE
 City IRVINE State CA Zip Code 92604-1904
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) INDP. CONTRACTOR
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 680.00

Date of Receipt 11 / 05 / 2016
Transaction ID : SA11A.478398
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

C. MOBLEY, JEANETTE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4 BATON ROUGE
 City IRVINE State CA Zip Code 92604-1904
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) INDP. CONTRACTOR
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 680.00

Date of Receipt 11 / 05 / 2016
Transaction ID : SA11A.478850
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 75.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2501 OF 4311
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. MOBLEY, JEANETTE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4 BATON ROUGE
 City IRVINE State CA Zip Code 92604-1904
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) INDP. CONTRACTOR
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 680.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 07 / 2016
Transaction ID : SA11A.480026
 Amount of Each Receipt this Period
 25.00
 Memo Item
 CONTRIBUTION

B. MOBLEY, JULIA, PECK, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 19 DOGWOOD LAKE DR
 City TEXARKANA State TX Zip Code 75503-1703
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) COMMERCIAL NATIONAL BANK OF TEXARKANA Occupation (for Individual) BANKER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 10000.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 24 / 2016
Transaction ID : SA11A.443460
 Amount of Each Receipt this Period
 10000.00
 Memo Item
 CONTRIBUTION

C. MOE, VERNETTA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address W4181 CERESA DRIVE
 City WEST SALEM State WI Zip Code 54669-9555
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 257.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 24 / 2016
Transaction ID : SA11A.449156
 Amount of Each Receipt this Period
 25.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	10050.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2502 OF 4311
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. MOEDE, WALTER, M., MR.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 506 ANGELITA DRIVE
City CORONA DEL MAR State CA Zip Code 92625-1913
FEC ID number of contributing federal political committee. **C**
Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 275.00

Date of Receipt 11 / 01 / 2016
Transaction ID : SA11A.467394
Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

B. MOEHRKE, MARTHA, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 103112 N. VERSAILLES CT.
City MEQUON State WI Zip Code 53092-
FEC ID number of contributing federal political committee. **C**
Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 425.00

Date of Receipt 10 / 26 / 2016
Transaction ID : SA11A.454468
Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

C. MOEHRKE, MARTHA, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 103112 N. VERSAILLES CT.
City MEQUON State WI Zip Code 53092-
FEC ID number of contributing federal political committee. **C**
Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 425.00

Date of Receipt 11 / 02 / 2016
Transaction ID : SA11A.466034
Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶ 125.00
TOTAL This Period (last page this line number only).....▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2503 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. MOEHRKE, MARTHA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 103112 N. VERSAILLES CT.
 City MEQUON State WI Zip Code 53092-
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 425.00

Date of Receipt **11 / 02 / 2016**
Transaction ID : SA11A.466037
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

B. MOFFET, LAVANDA, S., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 6520 LA POZA COURT N/A
 City CITRUS HEIGHTS State CA Zip Code 95621-4363
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1550.00

Date of Receipt **11 / 06 / 2016**
Transaction ID : SA11A.477957
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

C. MOFFET, LAVANDA, S., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 6520 LA POZA COURT N/A
 City CITRUS HEIGHTS State CA Zip Code 95621-4363
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1550.00

Date of Receipt **11 / 06 / 2016**
Transaction ID : SA11A.477959
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	225.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2504 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. MOFFETT, TONY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2510 MILLER WOODS CT
 City VALRICO State FL Zip Code 33594-3819
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 560.00

Date of Receipt 10 / 24 / 2016
Transaction ID : SA11A.449438
 Amount of Each Receipt this Period 80.00
 Memo Item CONTRIBUTION

B. MOFFETT, TONY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2510 MILLER WOODS CT
 City VALRICO State FL Zip Code 33594-3819
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 560.00

Date of Receipt 10 / 24 / 2016
Transaction ID : SA11A.449439
 Amount of Each Receipt this Period 80.00
 Memo Item CONTRIBUTION

C. MOFFETT, TONY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2510 MILLER WOODS CT
 City VALRICO State FL Zip Code 33594-3819
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 560.00

Date of Receipt 11 / 04 / 2016
Transaction ID : SA11A.470922
 Amount of Each Receipt this Period 80.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 240.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2505 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
Team Ryan

A. MOFFETT, TONY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2510 MILLER WOODS CT
 City VALRICO State FL Zip Code 33594-3819
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 560.00

Date of Receipt 11 / 07 / 2016
Transaction ID : SA11A.475065
 Amount of Each Receipt this Period 160.00
 Memo Item CONTRIBUTION

B. MOFFETT, TONY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2510 MILLER WOODS CT
 City VALRICO State FL Zip Code 33594-3819
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 560.00

Date of Receipt 11 / 07 / 2016
Transaction ID : SA11A.475067
 Amount of Each Receipt this Period 160.00
 Memo Item CONTRIBUTION

C. MOHANTY, SANTOSH, K., DR., M.D.
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 8672 DOLPHIN DR.
 City HUNTINGTON BEACH State CA Zip Code 92646-3238
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 455.00

Date of Receipt 10 / 23 / 2016
Transaction ID : SA11A.446256
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	420.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2506 OF 4311
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. MOIR, TIMOTHY, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 440 S BROAD ST
2305

City PHILADELPHIA State PA Zip Code 19146-4901

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) TAG COMMUNICATION SERVICES Occupation (for Individual) CFO

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1000.00

Date of Receipt
10 / 21 / 2016
Transaction ID : SA11A.444263

Amount of Each Receipt this Period
1000.00

Memo Item CONTRIBUTION

B. MOLES, H., L., ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 941 SCENIC RANCH CIRCLE

City MCKINNEY State TX Zip Code 75069-1908

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
300.00

Date of Receipt
11 / 04 / 2016
Transaction ID : SA11A.467591

Amount of Each Receipt this Period
150.00

Memo Item CONTRIBUTION

C. MOLEY, RICHARD, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address PO BOX 4316

City CARMEL BY THE SEA State CA Zip Code 93921-4316

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) INFORMATION REQUESTED PER BEST EFFORTS Occupation (for Individual) INFORMATION REQUESTED PER BEST EFFORTS

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
1000.00

Date of Receipt
11 / 01 / 2016
Transaction ID : SA11A.461857

Amount of Each Receipt this Period
1000.00

Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 2150.00

TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2507 OF 4311
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. MOLINARO, LINDA, A., MRS.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 2130 WALTON WAY

City AUGUSTA State GA Zip Code 30904-4387

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
275.00

Date of Receipt
11 / 03 / 2016
Transaction ID : SA11A.468599

Amount of Each Receipt this Period
25.00

Memo Item CONTRIBUTION

B. MONAHAN, MARGARET, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 6084 EAGLE TRACE LANE

City BANNING State CA Zip Code 92220-5488

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
400.00

Date of Receipt
10 / 26 / 2016
Transaction ID : SA11A.451102

Amount of Each Receipt this Period
100.00

Memo Item CONTRIBUTION

C. MONAHAN, MARGARET, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 6084 EAGLE TRACE LANE

City BANNING State CA Zip Code 92220-5488

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
400.00

Date of Receipt
11 / 04 / 2016
Transaction ID : SA11A.472710

Amount of Each Receipt this Period
100.00

Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 225.00

TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2508 OF 4311
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. MONAHAN, THOMAS, F., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 130 S RIDGE
 City ARCOLA State IL Zip Code 61910-1724
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 234.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 31 / 2016
Transaction ID : SA11A.457701
 Amount of Each Receipt this Period
 50.00
 Memo Item
 CONTRIBUTION

B. MONAHAN, THOMAS, F., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 130 S RIDGE
 City ARCOLA State IL Zip Code 61910-1724
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 234.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 31 / 2016
Transaction ID : SA11A.457703
 Amount of Each Receipt this Period
 50.00
 Memo Item
 CONTRIBUTION

C. MONCARZ, PIOTR, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3255 EMERSON STREET
 City PALO ALTO State CA Zip Code 94306-2943
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) EXPONENT Occupation (for Individual) ENGINEER
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 600.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 01 / 2016
Transaction ID : SA11A.463096
 Amount of Each Receipt this Period
 50.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	150.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2509 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. MONCARZ, PIOTR, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3255 EMERSON STREET
 City PALO ALTO State CA Zip Code 94306-2943
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) EXPONENT Occupation (for Individual) ENGINEER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 600.00

Date of Receipt 11 / 01 / 2016
Transaction ID : SA11A.463097
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

B. MONCARZ, PIOTR, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3255 EMERSON STREET
 City PALO ALTO State CA Zip Code 94306-2943
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) EXPONENT Occupation (for Individual) ENGINEER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 600.00

Date of Receipt 11 / 07 / 2016
Transaction ID : SA11A.480522
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

C. MONCARZ, PIOTR, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3255 EMERSON STREET
 City PALO ALTO State CA Zip Code 94306-2943
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) EXPONENT Occupation (for Individual) ENGINEER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 600.00

Date of Receipt 11 / 07 / 2016
Transaction ID : SA11A.480523
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	250.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2510 OF 4311
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. MONCEK, MICHAEL, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 90 SOUTH WYNSTONE DRIVE
 City NORTH BARRINGTON State IL Zip Code 60010-6942
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) B O X PARTNERS, LLC Occupation (for Individual) PRESIDENT
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt 10 / 20 / 2016
Transaction ID : SA11A.442295
 Amount of Each Receipt this Period 1000.00
 Memo Item CONTRIBUTION

B. MONDA, EMIL, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3 HILLHAVEN RANCH WAY
 City LAGUNA BEACH State CA Zip Code 92651-6859
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 11 / 05 / 2016
Transaction ID : SA11A.478698
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

C. MONDA, EMIL, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3 HILLHAVEN RANCH WAY
 City LAGUNA BEACH State CA Zip Code 92651-6859
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 11 / 05 / 2016
Transaction ID : SA11A.478707
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶ 1200.00
TOTAL This Period (last page this line number only).....▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2511 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. MONDA, EMIL, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3 HILLHAVEN RANCH WAY
 City LAGUNA BEACH State CA Zip Code 92651-6859
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 11 / 05 / 2016
Transaction ID : SA11A.478708
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

B. MONHOLLON, JIMMIE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1815 4TH STREET W
 City ABILENE State TX Zip Code 79605-
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt 11 / 08 / 2016
Transaction ID : SA11A.467947
 Amount of Each Receipt this Period 200.00
 Memo Item CONTRIBUTION

C. MONICA, JOHN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 213 CARINA DRIVE
 City JUPITER State FL Zip Code 33478-5455
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 10 / 26 / 2016
Transaction ID : SA11A.450200
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	350.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2512 OF 4311
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. MONICA, JOHN, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 213 CARINA DRIVE

City JUPITER State FL Zip Code 33478-5455

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 26 / 2016

Transaction ID : SA11A.450870

Amount of Each Receipt this Period
 50.00

Memo Item CONTRIBUTION

B. MONIN, GREGG, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 39047 GRIFFIN LANDING

City LADY LAKE State FL Zip Code 32159-6024

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 28 / 2016

Transaction ID : SA11A.456064

Amount of Each Receipt this Period
 25.00

Memo Item CONTRIBUTION

C. MONIN, GREGG, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 39047 GRIFFIN LANDING

City LADY LAKE State FL Zip Code 32159-6024

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼ 500.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 04 / 2016

Transaction ID : SA11A.470383

Amount of Each Receipt this Period
 25.00

Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶ 100.00

TOTAL This Period (last page this line number only).....▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2513 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name A. MONIN, GREGG, , ,			Date of Receipt MM / DD / YYYY 11 / 04 / 2016 Transaction ID : SA11A.470385		
Mailing Address 39047 GRIFFIN LANDING			Amount of Each Receipt this Period 25.00		
City LADY LAKE	State FL	Zip Code 32159-6024	<input type="checkbox"/> Memo Item CONTRIBUTION		
FEC ID number of contributing federal political committee. C					
Name of Employer (for Individual) NONE		Occupation (for Individual) RETIRED			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 500.00			

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name B. MONIN, GREGG, , ,			Date of Receipt MM / DD / YYYY 11 / 04 / 2016 Transaction ID : SA11A.472062		
Mailing Address 39047 GRIFFIN LANDING			Amount of Each Receipt this Period 25.00		
City LADY LAKE	State FL	Zip Code 32159-6024	<input type="checkbox"/> Memo Item CONTRIBUTION		
FEC ID number of contributing federal political committee. C					
Name of Employer (for Individual) NONE		Occupation (for Individual) RETIRED			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 500.00			

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name C. MONIN, GREGG, , ,			Date of Receipt MM / DD / YYYY 11 / 05 / 2016 Transaction ID : SA11A.478772		
Mailing Address 39047 GRIFFIN LANDING			Amount of Each Receipt this Period 25.00		
City LADY LAKE	State FL	Zip Code 32159-6024	<input type="checkbox"/> Memo Item CONTRIBUTION		
FEC ID number of contributing federal political committee. C					
Name of Employer (for Individual) NONE		Occupation (for Individual) RETIRED			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		Aggregate Year-to-Date ▼ 500.00			

SUBTOTAL of Receipts This Page (optional).....	75.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2514 OF 4311
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. MONKE, SHEILA, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 25392 COUNTY ROAD 18

City NICKERSON	State NE	Zip Code 68044-2531
-------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) SELF EMPLOYED	Occupation (for Individual) AGRICULTURE
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
380.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	21	/	2016

Transaction ID : SA11A.444545

Amount of Each Receipt this Period
50.00

Memo Item
CONTRIBUTION

B. MONKE, SHEILA, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 25392 COUNTY ROAD 18

City NICKERSON	State NE	Zip Code 68044-2531
-------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) SELF EMPLOYED	Occupation (for Individual) AGRICULTURE
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
380.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	04	/	2016

Transaction ID : SA11A.472345

Amount of Each Receipt this Period
50.00

Memo Item
CONTRIBUTION

C. MONKMAN, WILLIAM, R., ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1100 CARILLON POINT

City KIRKLAND	State WA	Zip Code 98033-7412
------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) AERIES ENTERPRISES LLC	Occupation (for Individual) CEO
---	------------------------------------

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
3500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	21	/	2016

Transaction ID : SA11A.444484

Amount of Each Receipt this Period
250.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	350.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2515 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. MONKMAN, WILLIAM, R., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1100 CARILLON POINT
 City KIRKLAND State WA Zip Code 98033-7412
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) AERIES ENTERPRISES LLC Occupation (for Individual) CEO
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 3500.00

Date of Receipt 10 / 27 / 2016
Transaction ID : SA11A.453330
 Amount of Each Receipt this Period 1000.00
 Memo Item
CONTRIBUTION

B. MONKMAN, WILLIAM, R., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1100 CARILLON POINT
 City KIRKLAND State WA Zip Code 98033-7412
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) AERIES ENTERPRISES LLC Occupation (for Individual) CEO
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 3500.00

Date of Receipt 11 / 04 / 2016
Transaction ID : SA11A.471072
 Amount of Each Receipt this Period 1000.00
 Memo Item
CONTRIBUTION

C. MONKMAN, WILLIAM, R., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1100 CARILLON POINT
 City KIRKLAND State WA Zip Code 98033-7412
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) AERIES ENTERPRISES LLC Occupation (for Individual) CEO
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 3500.00

Date of Receipt 11 / 04 / 2016
Transaction ID : SA11A.472783
 Amount of Each Receipt this Period 250.00
 Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	2250.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2516 OF 4311
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. MONNIN, GERALD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 724 INVERNESS DR.
 City DEFIANCE State OH Zip Code 43512-8549
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt **10 / 24 / 2016**
Transaction ID : SA11A.449475
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

B. MONROE, RONALD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1925 WEST LINCOLN RD,
 City STOCKTON State CA Zip Code 95207-2462
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) HOLT OF CALIFORNIA Occupation (for Individual) SALES MANAGER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 700.00

Date of Receipt **11 / 02 / 2016**
Transaction ID : SA11A.466394
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

C. MONSOUR, ROY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 610 WEIKERT RD
 City GETTYSBURG State PA Zip Code 17325-7206
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) ROY E MONSOUR MD PC Occupation (for Individual) PHYSICIAN
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 325.00

Date of Receipt **10 / 20 / 2016**
Transaction ID : SA11A.442248
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 375.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2517 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. MONSOUR, ROY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 610 WEIKERT RD
 City GETTYSBURG State PA Zip Code 17325-7206
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) ROY E MONSOUR MD PC Occupation (for Individual) PHYSICIAN
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 325.00

Date of Receipt 10 / 27 / 2016
Transaction ID : SA11A.453960
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

B. MONSOUR, ROY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 610 WEIKERT RD
 City GETTYSBURG State PA Zip Code 17325-7206
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) ROY E MONSOUR MD PC Occupation (for Individual) PHYSICIAN
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 325.00

Date of Receipt 10 / 27 / 2016
Transaction ID : SA11A.453997
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

C. MONSOUR, ROY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 610 WEIKERT RD
 City GETTYSBURG State PA Zip Code 17325-7206
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) ROY E MONSOUR MD PC Occupation (for Individual) PHYSICIAN
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 325.00

Date of Receipt 11 / 03 / 2016
Transaction ID : SA11A.468739
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 200.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2518 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
Team Ryan

A. MONSOUR, ROY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 610 WEIKERT RD
 City GETTYSBURG State PA Zip Code 17325-7206
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) ROY E MONSOUR MD PC Occupation (for Individual) PHYSICIAN
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 325.00

Date of Receipt 11 / 07 / 2016
Transaction ID : SA11A.474916
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

B. MONTERO, JOSEPH, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 258 S DUNAS ST NONE
 City ORANGE State CA Zip Code 92869-3821
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 355.00

Date of Receipt 10 / 20 / 2016
Transaction ID : SA11A.442111
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

C. MONTERO, JOSEPH, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 258 S DUNAS ST NONE
 City ORANGE State CA Zip Code 92869-3821
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 355.00

Date of Receipt 10 / 27 / 2016
Transaction ID : SA11A.452538
 Amount of Each Receipt this Period 20.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	95.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2519 OF 4311
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. MONTESANO, JOSEPH, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 145 S MERIDEN RD
 City CHESHIRE State CT Zip Code 06410-2973
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NWAP II, INC Occupation (for Individual) PRESIDENT
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt 10 / 26 / 2016
Transaction ID : SA11A.454673
 Amount of Each Receipt this Period 1000.00
 Memo Item
CONTRIBUTION

B. MONTERO, JOSEPH, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 258 S DUNAS ST NONE
 City ORANGE State CA Zip Code 92869-3821
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 355.00

Date of Receipt 11 / 06 / 2016
Transaction ID : SA11A.477509
 Amount of Each Receipt this Period 30.00
 Memo Item
CONTRIBUTION

C. MONTGOMERY, BILL, L., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 16372 WISHINGWELL LANE
 City HUNTINGTON BEACH State CA Zip Code 92647-3563
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 230.00

Date of Receipt 10 / 26 / 2016
Transaction ID : SA11A.450736
 Amount of Each Receipt this Period 25.00
 Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶ 1055.00
TOTAL This Period (last page this line number only).....▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2520 OF 4311
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. MONTGOMERY, BRUCE, G., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 14718 DORSEY MILL ROAD
 City GLENWOOD State MD Zip Code 21738-9316
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SYNTONICS LLC Occupation (for Individual) MANAGER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 31 / 2016
Transaction ID : SA11A.459206
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION

B. MONTGOMERY, BRUCE, G., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 14718 DORSEY MILL ROAD
 City GLENWOOD State MD Zip Code 21738-9316
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SYNTONICS LLC Occupation (for Individual) MANAGER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 04 / 2016
Transaction ID : SA11A.472293
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION

C. MONTGOMERY, DAVID, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 23961 LYNNEWOOD DR
 City ST MICHAELS State MD Zip Code 21663-2501
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 31 / 2016
Transaction ID : SA11A.458535
 Amount of Each Receipt this Period
 250.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	450.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2521 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. MONTGOMERY, GREGORY, F., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2555 KARAWOOD LANE
 City ROCKINGHAM State VA Zip Code 22801-8585
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) PHYSICIAN
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 10 / 25 / 2016
Transaction ID : SA11A.447288
 Amount of Each Receipt this Period 500.00
 Memo Item CONTRIBUTION

B. MONTGOMERY, LESLIE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 24 PADDOCK DR
 City NEW HOPE State PA Zip Code 18938-9614
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) MARKETING Occupation (for Individual) TOURNANT INC
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 425.00

Date of Receipt 10 / 24 / 2016
Transaction ID : SA11A.449283
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

C. MONTGOMERY, LESLIE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 24 PADDOCK DR
 City NEW HOPE State PA Zip Code 18938-9614
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) MARKETING Occupation (for Individual) TOURNANT INC
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 425.00

Date of Receipt 10 / 30 / 2016
Transaction ID : SA11A.459503
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	550.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2522 OF 4311
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. MONTGOMERY, LESLIE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 24 PADDOCK DR
 City NEW HOPE State PA Zip Code 18938-9614
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) MARKETING Occupation (for Individual) TOURNANT INC
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 425.00

Date of Receipt 10 / 30 / 2016
Transaction ID : SA11A.459504
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

B. MONTGOMERY, LESLIE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 24 PADDOCK DR
 City NEW HOPE State PA Zip Code 18938-9614
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) MARKETING Occupation (for Individual) TOURNANT INC
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 425.00

Date of Receipt 11 / 03 / 2016
Transaction ID : SA11A.469068
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

C. MONTGOMERY, LESLIE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 24 PADDOCK DR
 City NEW HOPE State PA Zip Code 18938-9614
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) MARKETING Occupation (for Individual) TOURNANT INC
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 425.00

Date of Receipt 11 / 03 / 2016
Transaction ID : SA11A.469149
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶ 75.00
TOTAL This Period (last page this line number only).....▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2523 OF 4311
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. MONTGOMERY, LESLIE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 24 PADDOCK DR
 City NEW HOPE State PA Zip Code 18938-9614
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) MARKETING Occupation (for Individual) TOURNANT INC
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 425.00

Date of Receipt 11 / 04 / 2016
Transaction ID : SA11A.479483
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

B. MONTGOMERY, LESLIE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 24 PADDOCK DR
 City NEW HOPE State PA Zip Code 18938-9614
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) MARKETING Occupation (for Individual) TOURNANT INC
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 425.00

Date of Receipt 11 / 07 / 2016
Transaction ID : SA11A.480476
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

C. MONTIJO, MICHAEL, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 109 LORING COURT
 City NASHVILLE State TN Zip Code 37220-1118
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) CONSULTANT
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 575.00

Date of Receipt 10 / 25 / 2016
Transaction ID : SA11A.448607
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶ 100.00
TOTAL This Period (last page this line number only).....▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2524 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
Team Ryan

A. MONTIJO, MICHAEL, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 109 LORING COURT
 City NASHVILLE State TN Zip Code 37220-1118
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) CONSULTANT
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 575.00

Date of Receipt 10 / 28 / 2016
Transaction ID : SA11A.456101
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

B. MONTIJO, MICHAEL, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 109 LORING COURT
 City NASHVILLE State TN Zip Code 37220-1118
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) CONSULTANT
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 575.00

Date of Receipt 10 / 31 / 2016
Transaction ID : SA11A.458508
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

C. MONTIJO, MICHAEL, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 109 LORING COURT
 City NASHVILLE State TN Zip Code 37220-1118
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) CONSULTANT
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 575.00

Date of Receipt 11 / 04 / 2016
Transaction ID : SA11A.470912
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	250.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2525 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. MONTIJO, MICHAEL, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 109 LORING COURT
 City NASHVILLE State TN Zip Code 37220-1118
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) CONSULTANT
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 575.00

Date of Receipt 11 / 07 / 2016
Transaction ID : SA11A.476521
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

B. MOODY III, DAN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3003 W. ALABAMA
 City HOSUTON State TX Zip Code 77098-2001
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) MOODY RAMBIN Occupation (for Individual) REAL ESTATE
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 3000.00

Date of Receipt 11 / 04 / 2016
Transaction ID : SA11A.472957
 Amount of Each Receipt this Period 1000.00
 Memo Item CONTRIBUTION

C. MOODY, JIM, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4260 COOLWATER DR.
 City COLORADO SPRINGS State CO Zip Code 80916-5548
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) Aggregate Year-to-Date ▼ 300.00

Date of Receipt 10 / 27 / 2016
Transaction ID : SA11A.456872
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	1150.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2526 OF 4311
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. MOON, PETER, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 25 VESPER DRIVE

City POCASSET	State MA	Zip Code 02559-2106
------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	28	/	2016

Transaction ID : SA11A.455006

Amount of Each Receipt this Period
50.00

Memo Item CONTRIBUTION

B. MOON, PETER, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 25 VESPER DRIVE

City POCASSET	State MA	Zip Code 02559-2106
------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	02	/	2016

Transaction ID : SA11A.465974

Amount of Each Receipt this Period
25.00

Memo Item CONTRIBUTION

C. MOONEY, EDWARD, P., ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 7038 N BEACH DRIVE

City MILWAUKEE	State WI	Zip Code 53217-3657
-------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
2500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	03	/	2016

Transaction ID : SA11A.465187

Amount of Each Receipt this Period
2500.00

Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	2575.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2527 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. MOORE, ARDON, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1409 THOMAS PL
 City FT WORTH State TX Zip Code 76107-2431
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) LEE M. BASS, INC. Occupation (for Individual) PRESIDENT
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 10000.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 24 / 2016
Transaction ID : SA11A.443487
 Amount of Each Receipt this Period
 10000.00
 Memo Item
 CONTRIBUTION

B. MOORE, DONNA, M., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 7000 SW 130TH AVENUE
 City BEAVERTON State OR Zip Code 97008-5116
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1025.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 26 / 2016
Transaction ID : SA11A.447609
 Amount of Each Receipt this Period
 150.00
 Memo Item
 CONTRIBUTION

C. MOORE, HAL, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1437 CENTRAL AVE APT 1107
 City MEMPHIS State TN Zip Code 38104-4833
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) MEDICAL TRANSCRIPTION Occupation (for Individual) ST. JUDE CRH
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 31 / 2016
Transaction ID : SA11A.464493
 Amount of Each Receipt this Period
 125.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	10275.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2528 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
-----------------------------	-----------------------------	-----------------------------

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NAME OF COMMITTEE (In Full)
Team Ryan

A. MOORE, IRMA, C., MS.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1126 - 46TH STREET
 City SACRAMENTO State CA Zip Code 95819-3725
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) HOMEMAKER Occupation (for Individual) HOMEMAKER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 01 / 2016
Transaction ID : SA11A.461683
 Amount of Each Receipt this Period
 500.00
 Memo Item
 CONTRIBUTION

B. MOORE, JASON, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 180 PROSPECT PARK WEST
 City BROOKLYN State NY Zip Code 11215-5265
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) LAW OFFICES OF JASON A. MOORE Occupation (for Individual) ATTORNEY
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 497.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 29 / 2016
Transaction ID : SA11A.460520
 Amount of Each Receipt this Period
 250.00
 Memo Item
 CONTRIBUTION

C. MOORE, LAURIE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 9837 WESTMINSTER GLEN AVE
 City AUSTIN State TX Zip Code 78730-3413
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 21 / 2016
Transaction ID : SA11A.444128
 Amount of Each Receipt this Period
 250.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	1000.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2529 OF 4311
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. MOORE, LEN, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 16650 SCHOENBORN ST.

City NORTH HILLS	State CA	Zip Code 91343-6106
---------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) MOORE INDUSTRIES	Occupation (for Individual) ENGINEER
---	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		20		2016

Transaction ID : SA11A.442460

Amount of Each Receipt this Period
100.00

Memo Item
CONTRIBUTION

B. MOORE, LEN, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 16650 SCHOENBORN ST.

City NORTH HILLS	State CA	Zip Code 91343-6106
---------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) MOORE INDUSTRIES	Occupation (for Individual) ENGINEER
---	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11		04		2016

Transaction ID : SA11A.473915

Amount of Each Receipt this Period
100.00

Memo Item
CONTRIBUTION

C. MOORE, LINDA, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1856 LAUREL CANYON BLVD

City LOS ANGELES	State CA	Zip Code 90046-2029
---------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) ORACLE	Occupation (for Individual) GLOBAL ENABLEMENT MANAGER
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
550.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11		04		2016

Transaction ID : SA11A.470369

Amount of Each Receipt this Period
50.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	250.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2530 OF 4311
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. MOORE, ROBERT, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 7 JACOBS LANDING

City DANVERS	State MA	Zip Code 01923-3773
-----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) MOORE GMC INC	Occupation (for Individual) TRUCK SALES
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
300.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		26		2016

Transaction ID : SA11A.447746

Amount of Each Receipt this Period
50.00

Memo Item
CONTRIBUTION

B. MOORE, ROBERT, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 7 JACOBS LANDING

City DANVERS	State MA	Zip Code 01923-3773
-----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) MOORE GMC INC	Occupation (for Individual) TRUCK SALES
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
300.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11		07		2016

Transaction ID : SA11A.467838

Amount of Each Receipt this Period
50.00

Memo Item
CONTRIBUTION

C. MOORE, ROSELEEM, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 5140 KACHEMAK DR

City HOMER	State AK	Zip Code 99603-9478
---------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) SELF EMPLOYED	Occupation (for Individual) COMMERCIAL FISHING
--	---

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
600.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11		04		2016

Transaction ID : SA11A.472344

Amount of Each Receipt this Period
100.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	200.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2531 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
Team Ryan

A. MOORE, SAMUEL, G., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO BOX 681446
 City HOUSTON State TX Zip Code 77268-1446
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) MISC CONTRACT
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 415.00

Date of Receipt 11 / 01 / 2016
Transaction ID : SA11A.462942
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

B. MOORE, SAMUEL, G., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO BOX 681446
 City HOUSTON State TX Zip Code 77268-1446
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) MISC CONTRACT
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 415.00

Date of Receipt 11 / 01 / 2016
Transaction ID : SA11A.467320
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

C. MOORE, SAMUEL, G., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO BOX 681446
 City HOUSTON State TX Zip Code 77268-1446
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) MISC CONTRACT
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 415.00

Date of Receipt 11 / 01 / 2016
Transaction ID : SA11A.467326
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 75.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2532 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. MOORE, SAMUEL, G., ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address PO BOX 681446

City HOUSTON	State TX	Zip Code 77268-1446
-----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) SELF EMPLOYED	Occupation (for Individual) MISC CONTRACT
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
415.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
11		07		2016

Transaction ID : SA11A.476476

Amount of Each Receipt this Period
25.00

Memo Item
CONTRIBUTION

B. MOORE, SAMUEL, G., ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address PO BOX 681446

City HOUSTON	State TX	Zip Code 77268-1446
-----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) SELF EMPLOYED	Occupation (for Individual) MISC CONTRACT
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
415.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
11		06		2016

Transaction ID : SA11A.477602

Amount of Each Receipt this Period
50.00

Memo Item
CONTRIBUTION

C. MOORE, SAMUEL, G., ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address PO BOX 681446

City HOUSTON	State TX	Zip Code 77268-1446
-----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) SELF EMPLOYED	Occupation (for Individual) MISC CONTRACT
--	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
415.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
11		08		2016

Transaction ID : SA11A.479689

Amount of Each Receipt this Period
30.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	105.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2533 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. MOORE, SAMUEL, G., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO BOX 681446
 City HOUSTON State TX Zip Code 77268-1446
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) MISC CONTRACT
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 415.00

Date of Receipt 11 / 08 / 2016
Transaction ID : SA11A.479690
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

B. MOORE, SAMUEL, G., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO BOX 681446
 City HOUSTON State TX Zip Code 77268-1446
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) MISC CONTRACT
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 415.00

Date of Receipt 11 / 08 / 2016
Transaction ID : SA11A.479711
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

C. MOORE, SAMUEL, G., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO BOX 681446
 City HOUSTON State TX Zip Code 77268-1446
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) MISC CONTRACT
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 415.00

Date of Receipt 11 / 08 / 2016
Transaction ID : SA11A.479798
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 75.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2534 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
Team Ryan

A. MOORE, SAMUEL, G., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO BOX 681446
 City HOUSTON State TX Zip Code 77268-1446
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) MISC CONTRACT
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 415.00

Date of Receipt 11 / 08 / 2016
Transaction ID : SA11A.479839
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

B. MOORE, SHEILA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 6644 GLADE AVE. 103
 City WOODLAND HILLS State CA Zip Code 91303-2527
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 235.00

Date of Receipt 11 / 03 / 2016
Transaction ID : SA11A.474410
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

C. MOORE, SHEILA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 6644 GLADE AVE. 103
 City WOODLAND HILLS State CA Zip Code 91303-2527
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 235.00

Date of Receipt 11 / 03 / 2016
Transaction ID : SA11A.474411
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 75.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2535 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. MOORES, STEPHEN, A., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 27 CAYNOR COURT
 City NEWARK State DE Zip Code 19711-6103
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) DGS Occupation (for Individual) COGNITIVE BEHAVIORAL THERAPUS
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 325.00

Date of Receipt 11 / 07 / 2016
Transaction ID : SA11A.480074
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

B. MOORES, STEPHEN, A., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 27 CAYNOR COURT
 City NEWARK State DE Zip Code 19711-6103
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) DGS Occupation (for Individual) COGNITIVE BEHAVIORAL THERAPUS
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 325.00

Date of Receipt 11 / 07 / 2016
Transaction ID : SA11A.480075
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

C. MOORE, THOMAS, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1748 VESTWOOD HILLS DRIVE
 City VESTAVIA State AL Zip Code 35216-1366
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) UNIVERSITY OF ALABAMA Occupation (for Individual) PHYSICIAN
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 425.00

Date of Receipt 11 / 03 / 2016
Transaction ID : SA11A.469060
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	300.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2536 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. MOORE, TIMOTHY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 9191 SADDLE HORN COURT
 City PROSPER State TX Zip Code 75078-8826
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NT CAPITAL, LLC Occupation (for Individual) HOTEL REAL ESTATE
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 11 / 06 / 2016
Transaction ID : SA11A.477140
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

B. MOORWOOD, CHARLES, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1041 LANARK CT
 City SUNNYVALE State CA Zip Code 94087-5047
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) ERICSSON Occupation (for Individual) ENGINEER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1900.00

Date of Receipt 10 / 27 / 2016
Transaction ID : SA11A.453660
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

C. MORAN, SHIRLEY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO BOX 385
 City VANDERGRIFT State PA Zip Code 15690-0385
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) MORAN TRANSPORTATION MGT. GROUP Occupation (for Individual) GROUND TRANSPORTATION
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 10 / 31 / 2016
Transaction ID : SA11A.457871
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	450.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2538 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. MOREIRA, DOMINGO, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 8600 SW 52 AVE
 City MIAMI State FL Zip Code 33143-8447
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 5000.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 25 / 2016
Transaction ID : SA11A.447926
 Amount of Each Receipt this Period
 5000.00
 Memo Item
 CONTRIBUTION

B. MORGAN, ANDY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 315 N. KINGSWAY DR.
 City AURORA State IL Zip Code 60506-4522
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RIVER VALLEY Occupation (for Individual) MINISTER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 207.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 01 / 2016
Transaction ID : SA11A.462456
 Amount of Each Receipt this Period
 50.00
 Memo Item
 CONTRIBUTION

C. MORGAN, ANDY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 315 N. KINGSWAY DR.
 City AURORA State IL Zip Code 60506-4522
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RIVER VALLEY Occupation (for Individual) MINISTER
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 207.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 07 / 2016
Transaction ID : SA11A.480240
 Amount of Each Receipt this Period
 25.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	5075.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2539 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
Team Ryan

A. MORGAN, ANDY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 315 N. KINGSWAY DR.
 City AURORA State IL Zip Code 60506-4522
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RIVER VALLEY Occupation (for Individual) MINISTER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 207.00

Date of Receipt 11 / 07 / 2016
Transaction ID : SA11A.480244
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

B. MORGAN, ARTHUR, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3607 MURILLO CIRCLE
 City AUSTIN State TX Zip Code 78703-1547
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt 10 / 21 / 2016
Transaction ID : SA11A.444639
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

C. MORGAN, ARTHUR, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3607 MURILLO CIRCLE
 City AUSTIN State TX Zip Code 78703-1547
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt 11 / 04 / 2016
Transaction ID : SA11A.472477
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	225.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2540 OF 4311
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. MORGAN, ARTHUR, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 3607 MURILLO CIRCLE

City AUSTIN	State TX	Zip Code 78703-1547
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
400.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	04	/	2016

Transaction ID : SA11A.472556

Amount of Each Receipt this Period
100.00

Memo Item
CONTRIBUTION

B. MORGAN, JUDY, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 1 OAKHOLLOW DR

City TEXARKANA	State TX	Zip Code 75503-1727
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) INFORMATION REQUESTED PER BEST EFFORTS	Occupation (for Individual) INFORMATION REQUESTED PER BE
---	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
10000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	24	/	2016

Transaction ID : SA11A.443471

Amount of Each Receipt this Period
10000.00

Memo Item
CONTRIBUTION

C. MORIE, MARY, ELLEN, ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address PO BOX 255

City MAURICETOWN	State NJ	Zip Code 08329-0255
---------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) RETIRED	Occupation (for Individual) RETIRED
--	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
400.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	25	/	2016

Transaction ID : SA11A.447489

Amount of Each Receipt this Period
200.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	10300.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2541 OF 4311
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. MORLEY, FRANCIS, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 7575 PELICAN BAY BLVD.
 UNIT 401
 City NAPLES State FL Zip Code 34108-5533
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 650.00

Date of Receipt **10 / 31 / 2016**
Transaction ID : SA11A.458664
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

B. MORRIS, ANDREW, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 36 WATROUS POINT ROAD
 City OLD SAYBROOK State CT Zip Code 06475-1359
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 320.00

Date of Receipt **11 / 04 / 2016**
Transaction ID : SA11A.473353
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

C. MORRISON, ARTHUR, G., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 12802 TAYLOR ST.
 City GARDEN GROVE State CA Zip Code 92845-2837
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 750.00

Date of Receipt **10 / 24 / 2016**
Transaction ID : SA11A.445930
 Amount of Each Receipt this Period 200.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	325.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2542 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. MORRIS, BELINDA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO BOX 1865
 City LONE GROVE State OK Zip Code 73443-1865
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RUTH YOUNG TRAVEL SERVICE Occupation (for Individual) TOWEL AGENCY OWNER
 Receipt For: Primary General Other (specify) Aggregate Year-to-Date 500.00

Date of Receipt 10 / 24 / 2016
Transaction ID : SA11A.443871
 Amount of Each Receipt this Period 500.00
 Memo Item CONTRIBUTION

B. MORRIS, CHARLES, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4011 FARRALON WAY
 City OXNARD State CA Zip Code 93035-1430
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) Aggregate Year-to-Date 650.00

Date of Receipt 10 / 20 / 2016
Transaction ID : SA11A.444770
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

C. MORRIS, CHARLES, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO BOX 2160
 City FLINT State TX Zip Code 75762-2160
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) MDS Occupation (for Individual) CONSTRUCTION
 Receipt For: Primary General Other (specify) Aggregate Year-to-Date 400.00

Date of Receipt 10 / 24 / 2016
Transaction ID : SA11A.446150
 Amount of Each Receipt this Period 300.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... **900.00**
TOTAL This Period (last page this line number only).....

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2543 OF 4311
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. MORRISON, CHARLES, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1454 WILDERNESS RIDGE TRAIL
 City CROWNSVILLE State MD Zip Code 21032-2123
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 705.00

Date of Receipt 10 / 22 / 2016
Transaction ID : SA11A.446648
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

B. MORRIS, CHARLES, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO BOX 2160
 City FLINT State TX Zip Code 75762-2160
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) MDS Occupation (for Individual) CONSTRUCTION
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt 10 / 28 / 2016
Transaction ID : SA11A.455674
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

C. MORRISON, CHARLES, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1454 WILDERNESS RIDGE TRAIL
 City CROWNSVILLE State MD Zip Code 21032-2123
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 705.00

Date of Receipt 11 / 04 / 2016
Transaction ID : SA11A.473716
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 200.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2544 OF 4311
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. MORRIS, CHARLES, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO BOX 2160
 City FLINT State TX Zip Code 75762-2160
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) MDS Occupation (for Individual) CONSTRUCTION
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt 11 / 06 / 2016
Transaction ID : SA11A.477207
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

B. MORRIS, DEBORAH, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 146 MCDOUGALL ROAD
 City ARGYLE State NY Zip Code 12809-3435
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SCA Occupation (for Individual) PROJ MGR
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 10 / 25 / 2016
Transaction ID : SA11A.447791
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

C. MORRIS, DON, N., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 10 OAKRIDGE CIR
 City TEXARKANA State TX Zip Code 75503-1710
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) OFFENHAUSER & CO Occupation (for Individual) EXECUTIVE
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 10000.00

Date of Receipt 10 / 24 / 2016
Transaction ID : SA11A.443472
 Amount of Each Receipt this Period 10000.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	10150.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2545 OF 4311
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. MORRIS, HARRY, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 520 N. TELEGRAPH

City DEARBORN	State MI	Zip Code 48128-1658
------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) H.G. MORRIS D.D.S.	Occupation (for Individual) DENTIST
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
325.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		21		2016

Transaction ID : SA11A.444602

Amount of Each Receipt this Period
25.00

Memo Item CONTRIBUTION

B. MORRIS, HARRY, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 520 N. TELEGRAPH

City DEARBORN	State MI	Zip Code 48128-1658
------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) H.G. MORRIS D.D.S.	Occupation (for Individual) DENTIST
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
325.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11		04		2016

Transaction ID : SA11A.472393

Amount of Each Receipt this Period
25.00

Memo Item CONTRIBUTION

C. MORRIS, J.L., , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 3035 TIDEWATER CIRCLE

City MADISON	State MS	Zip Code 39110-8980
-----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
247.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		25		2016

Transaction ID : SA11A.448363

Amount of Each Receipt this Period
30.00

Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	80.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2546 OF 4311
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. MORRIS, J.L., , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 3035 TIDEWATER CIRCLE

City MADISON	State MS	Zip Code 39110-8980
-----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
247.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		25		2016

Transaction ID : SA11A.448375

Amount of Each Receipt this Period
30.00

Memo Item CONTRIBUTION

B. MORRIS, J.L., , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 3035 TIDEWATER CIRCLE

City MADISON	State MS	Zip Code 39110-8980
-----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
247.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		27		2016

Transaction ID : SA11A.453844

Amount of Each Receipt this Period
27.00

Memo Item CONTRIBUTION

C. MORRIS, J.L., , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 3035 TIDEWATER CIRCLE

City MADISON	State MS	Zip Code 39110-8980
-----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
247.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11		04		2016

Transaction ID : SA11A.472685

Amount of Each Receipt this Period
27.00

Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	84.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2547 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
-----------------------------	-----------------------------	-----------------------------

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NAME OF COMMITTEE (In Full)
Team Ryan

A. MORRIS, J.L., , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3035 TIDEWATER CIRCLE
 City MADISON State MS Zip Code 39110-8980
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 247.00

Date of Receipt 11 / 07 / 2016
Transaction ID : SA11A.475871
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

B. MORRISON, KENNETH, , MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1578 OLAR COURT
 City THE VILLAGES State FL Zip Code 32162-2205
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 385.00

Date of Receipt 10 / 28 / 2016
Transaction ID : SA11A.455715
 Amount of Each Receipt this Period 30.00
 Memo Item CONTRIBUTION

C. MORRISON, KENNETH, , MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1578 OLAR COURT
 City THE VILLAGES State FL Zip Code 32162-2205
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 385.00

Date of Receipt 10 / 31 / 2016
Transaction ID : SA11A.457980
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	80.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2548 OF 4311
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. MORRIS, LAWRENCE, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 56 LOWERY LANE

City MENDHAM	State NJ	Zip Code 07945-3402
-----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NIELSEN	Occupation (for Individual) DIRECTOR
--	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
741.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11		03		2016

Transaction ID : SA11A.469093

Amount of Each Receipt this Period
250.00

Memo Item CONTRIBUTION

B. MORRIS, ROSE, MARIE, MS.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 4115 CLOVERNOOK LANE

City SEABROOK	State TX	Zip Code 77586-4202
------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
800.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11		03		2016

Transaction ID : SA11A.465537

Amount of Each Receipt this Period
100.00

Memo Item CONTRIBUTION

C. MORRIS, ROSE, MARIE, MS.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 4115 CLOVERNOOK LANE

City SEABROOK	State TX	Zip Code 77586-4202
------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
800.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11		10		2016

Transaction ID : SA11A.468236

Amount of Each Receipt this Period
100.00

Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	450.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2549 OF 4311
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. MORRIS, THOMAS, , MR.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1330 W ROYAL OAKS DR

City SHOREVIEW	State MN	Zip Code 55126-8430
-------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) RETIRED	Occupation (for Individual) RETIRED
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
300.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		27		2016

Transaction ID : SA11A.452357

Amount of Each Receipt this Period
100.00

Memo Item CONTRIBUTION

B. MORROW, JOHN, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 542 SADDLE LANE

City GROSSE POINTE WOOD	State MI	Zip Code 48236-2729
----------------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
309.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		30		2016

Transaction ID : SA11A.459911

Amount of Each Receipt this Period
50.00

Memo Item CONTRIBUTION

C. MORSE, DOROTHY, J., MS.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address P. O. BOX 254671

City SACRAMENTO	State CA	Zip Code 95865-4671
--------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
450.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		21		2016

Transaction ID : SA11A.444595

Amount of Each Receipt this Period
50.00

Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	200.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2550 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. MORSE, DOROTHY, J., MS.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address P. O. BOX 254671
 City SACRAMENTO State CA Zip Code 95865-4671
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 450.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 05 / 2016
Transaction ID : SA11A.478342
 Amount of Each Receipt this Period
 50.00
 Memo Item
 CONTRIBUTION

B. MORSE, DOROTHY, J., MS.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address P. O. BOX 254671
 City SACRAMENTO State CA Zip Code 95865-4671
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 450.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 05 / 2016
Transaction ID : SA11A.478343
 Amount of Each Receipt this Period
 50.00
 Memo Item
 CONTRIBUTION

C. MORSE, EVE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3444 E ASHURST DR.
 City PHOENIX State AZ Zip Code 85048-7852
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 230.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 25 / 2016
Transaction ID : SA11A.451888
 Amount of Each Receipt this Period
 30.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶ 130.00
TOTAL This Period (last page this line number only).....▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2551 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. MORSE, EVE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3444 E ASHURST DR.
 City PHOENIX State AZ Zip Code 85048-7852
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 230.00

Date of Receipt
 11 / 04 / 2016
Transaction ID : SA11A.473115
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

B. MORSE, JANE, C., MS.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3010 S VOSS RD
 City FREEPORT State IL Zip Code 61032-9201
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) THE MORSE GROUP Occupation (for Individual) CEO
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt
 10 / 28 / 2016
Transaction ID : SA11A.453354
 Amount of Each Receipt this Period 500.00
 Memo Item CONTRIBUTION

C. MORTON, NORMAN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 705 NEBRASKA STREET
 City NEMAHA State NE Zip Code 68414-6051
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NORMAN MORTON Occupation (for Individual) TECHNICIAN IRI INC
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt
 10 / 29 / 2016
Transaction ID : SA11A.461078
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	575.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2552 OF 4311
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. MORTON, NORMAN, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 705 NEBRASKA STREET

City NEMAHA	State NE	Zip Code 68414-6051
----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NORMAN MORTON	Occupation (for Individual) TECHNICIAN IRI INC
--	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
400.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	04	/	2016

Transaction ID : SA11A.472281

Amount of Each Receipt this Period
50.00

Memo Item
CONTRIBUTION

B. MOSHIER, DAVID, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 2422 MENOKIN DRIVE, APARTMENT 11

City ALEXANDRIA	State VA	Zip Code 22302-1716
--------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) EDGEHILL COMMUNITY CHURCH	Occupation (for Individual) PASTOR
--	---------------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
230.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	27	/	2016

Transaction ID : SA11A.453196

Amount of Each Receipt this Period
30.00

Memo Item
CONTRIBUTION

C. MOSHIER, DAVID, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 2422 MENOKIN DRIVE, APARTMENT 11

City ALEXANDRIA	State VA	Zip Code 22302-1716
--------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) EDGEHILL COMMUNITY CHURCH	Occupation (for Individual) PASTOR
--	---------------------------------------

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
230.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	31	/	2016

Transaction ID : SA11A.458614

Amount of Each Receipt this Period
25.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	105.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2553 OF 4311
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
Team Ryan

A. MOSHIER, DAVID, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 2422 MENOKIN DRIVE, APARTMENT 11
11

City ALEXANDRIA State VA Zip Code 22302-1716

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) EDGEHILL COMMUNITY CHURCH Occupation (for Individual) PASTOR

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 230.00

Date of Receipt 10 / 31 / 2016
Transaction ID : SA11A.458633

Amount of Each Receipt this Period 25.00

Memo Item CONTRIBUTION

B. MOSHIER, DAVID, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 2422 MENOKIN DRIVE, APARTMENT 11
11

City ALEXANDRIA State VA Zip Code 22302-1716

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) EDGEHILL COMMUNITY CHURCH Occupation (for Individual) PASTOR

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 230.00

Date of Receipt 11 / 04 / 2016
Transaction ID : SA11A.472854

Amount of Each Receipt this Period 25.00

Memo Item CONTRIBUTION

C. MOSICH, NICK, V., MR.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 6433 VIA COLINITA

City RANCHO PALOS VERDE State CA Zip Code 90275-6457

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) SELF Occupation (for Individual) AVIATION SERVICES

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 700.00

Date of Receipt 10 / 27 / 2016
Transaction ID : SA11A.452334

Amount of Each Receipt this Period 500.00

Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 550.00

TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2554 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
Team Ryan

A. MOSS, FRANK, , MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1462 WEST. 1500 SOUTH
 City WOODS CROSS State UT Zip Code 84087-2212
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) MOSS MANAGEMENT INC Occupation (for Individual) MANAGER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 675.00

Date of Receipt **10 / 23 / 2016**
Transaction ID : SA11A.446603
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

B. MOSS, FRANK, , MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1462 WEST. 1500 SOUTH
 City WOODS CROSS State UT Zip Code 84087-2212
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) MOSS MANAGEMENT INC Occupation (for Individual) MANAGER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 675.00

Date of Receipt **11 / 02 / 2016**
Transaction ID : SA11A.466924
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

C. MOSS, FRANK, , MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1462 WEST. 1500 SOUTH
 City WOODS CROSS State UT Zip Code 84087-2212
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) MOSS MANAGEMENT INC Occupation (for Individual) MANAGER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 675.00

Date of Receipt **11 / 04 / 2016**
Transaction ID : SA11A.471932
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	225.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2555 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. MOSS, FRANK, , MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1462 WEST. 1500 SOUTH
 City WOODS CROSS State UT Zip Code 84087-2212
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) MOSS MANAGEMENT INC Occupation (for Individual) MANAGER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 675.00

Date of Receipt 11 / 05 / 2016
Transaction ID : SA11A.478344
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

B. MOSS, FRANK, , MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1462 WEST. 1500 SOUTH
 City WOODS CROSS State UT Zip Code 84087-2212
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) MOSS MANAGEMENT INC Occupation (for Individual) MANAGER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 675.00

Date of Receipt 11 / 05 / 2016
Transaction ID : SA11A.478345
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

C. MOSS, FRANK, , MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1462 WEST. 1500 SOUTH
 City WOODS CROSS State UT Zip Code 84087-2212
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) MOSS MANAGEMENT INC Occupation (for Individual) MANAGER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 675.00

Date of Receipt 11 / 07 / 2016
Transaction ID : SA11A.480604
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶ 125.00
TOTAL This Period (last page this line number only).....▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2556 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
-----------------------------	-----------------------------	-----------------------------

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NAME OF COMMITTEE (In Full)
Team Ryan

A. MOSSY, WILEY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1000 UPTOWN PARK BLVD
 223
 City HOUSTON State TX Zip Code 77056-3251
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 03 / 2016
Transaction ID : SA11A.468826
 Amount of Each Receipt this Period
 1000.00
 Memo Item
 CONTRIBUTION

B. MOTHON, PHILIP, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 7 HAMILTON LN
 City SALEM State NH Zip Code 03079-5604
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) MITRE CORP Occupation (for Individual) SYSTEMS ENGINEER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 225.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 28 / 2016
Transaction ID : SA11A.455741
 Amount of Each Receipt this Period
 50.00
 Memo Item
 CONTRIBUTION

C. MOUELLE, CLARA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3605 W 53RD STREET
 APT # 5
 City CHICAGO State IL Zip Code 60632-3755
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) KINDRED HEALTHCARE Occupation (for Individual) NURSE ASSISTANT
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 225.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 24 / 2016
Transaction ID : SA11A.446193
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	1150.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2557 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. MOUELLE, CLARA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3605 W 53RD STREET
 APT # 5
 City CHICAGO State IL Zip Code 60632-3755
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) KINDRED HEALTHCARE Occupation (for Individual) NURSE ASSISTANT
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 225.00

Date of Receipt
 11 / 06 / 2016
Transaction ID : SA11A.476966
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

B. MOUL, JOEL, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 7976 WHITBURN DR.
 City ADA State MI Zip Code 49301-9398
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) INFORMATION REQUESTED PER BEST EFFORTS Occupation (for Individual) INFORMATION REQUESTED PER BE
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt
 10 / 26 / 2016
Transaction ID : SA11A.454304
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

C. MOYE, HOWARD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3487 S. EVANS STREET
 SUITE C
 City GREENVILLE State NC Zip Code 27834-4536
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) OWNER
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 325.00

Date of Receipt
 10 / 31 / 2016
Transaction ID : SA11A.459001
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 375.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2558 OF 4311
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. MOYNIHAN, GERALDINE, P., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 13500 E CORNELL AVENUE
 APT 207
 City AURORA State CO Zip Code 80014-3696
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Occupation (for Individual)
 INFORMATION REQUESTED PER BEST EFFORTS INFORMATION REQUESTED PER BE
 Receipt For: Primary General
 Other (specify) ▼ Aggregate Year-to-Date ▼
 300.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 31 / 2016
Transaction ID : SA11A.457322
 Amount of Each Receipt this Period
 200.00
 Memo Item
 CONTRIBUTION

B. MOYNIHAN, PAT, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2700 DEVONSHIRE COURT
 City GRAPEVINE State TX Zip Code 76051-6442
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Occupation (for Individual)
 BNSF RAILWAY MARKETING DIRECTOR
 Receipt For: Primary General
 Other (specify) ▼ Aggregate Year-to-Date ▼
 1150.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 04 / 2016
Transaction ID : SA11A.474305
 Amount of Each Receipt this Period
 150.00
 Memo Item
 CONTRIBUTION

C. MUELLER, WENDY, , MRS.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 15212 CALAVERAS DR
 City AUSTIN State TX Zip Code 78717-4635
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Occupation (for Individual)
 STATE FARM INSURANCE CO FIRE OPS MGR
 Receipt For: Primary General
 Other (specify) ▼ Aggregate Year-to-Date ▼
 1839.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 28 / 2016
Transaction ID : SA11A.455282
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	450.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2559 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. MUELLER, WENDY, , MRS.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 15212 CALAVERAS DR
 City AUSTIN State TX Zip Code 78717-4635
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) STATE FARM INSURANCE CO Occupation (for Individual) FIRE OPS MGR
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1839.00

Date of Receipt 11 / 02 / 2016
Transaction ID : SA11A.466169
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

B. MUELLER, WENDY, , MRS.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 15212 CALAVERAS DR
 City AUSTIN State TX Zip Code 78717-4635
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) STATE FARM INSURANCE CO Occupation (for Individual) FIRE OPS MGR
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1839.00

Date of Receipt 11 / 04 / 2016
Transaction ID : SA11A.472192
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

C. MUELLER, WENDY, , MRS.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 15212 CALAVERAS DR
 City AUSTIN State TX Zip Code 78717-4635
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) STATE FARM INSURANCE CO Occupation (for Individual) FIRE OPS MGR
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1839.00

Date of Receipt 11 / 06 / 2016
Transaction ID : SA11A.477018
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	250.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2560 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. MUIR, ROBERT, E., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1314 E. HILLSIDE DRIVE
 City PEORIA State IL Zip Code 61614-3151
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 11 / 04 / 2016
Transaction ID : SA11A.473375
 Amount of Each Receipt this Period
 50.00
 Memo Item CONTRIBUTION

B. MUIR, ROBERT, E., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1314 E. HILLSIDE DRIVE
 City PEORIA State IL Zip Code 61614-3151
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 11 / 03 / 2016
Transaction ID : SA11A.474424
 Amount of Each Receipt this Period
 150.00
 Memo Item CONTRIBUTION

C. MUIRHEAD, KATHY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3710 BRENTWOOD DRIVE
 City SOUTH SIOUX CITY State NE Zip Code 68776-3481
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) BOMGAARS SUPPLY Occupation (for Individual) ACCOUNTING DEPARTMENT SUPER
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 225.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 10 / 24 / 2016
Transaction ID : SA11A.445980
 Amount of Each Receipt this Period
 50.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	250.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2561 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. MUIRHEAD, KATHY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3710 BRENTWOOD DRIVE
 City SOUTH SIOUX CITY State NE Zip Code 68776-3481
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) BOMGAARS SUPPLY Occupation (for Individual) ACCOUNTING DEPARTMENT SUPER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 225.00

Date of Receipt 10 / 24 / 2016
Transaction ID : SA11A.445983
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

B. MUIRHEAD, KATHY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3710 BRENTWOOD DRIVE
 City SOUTH SIOUX CITY State NE Zip Code 68776-3481
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) BOMGAARS SUPPLY Occupation (for Individual) ACCOUNTING DEPARTMENT SUPEF
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 225.00

Date of Receipt 11 / 06 / 2016
Transaction ID : SA11A.477152
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

C. MULCAHY, J., PATRICK, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 9171 E HARVARD AVE
 City DENVER State CO Zip Code 80231-3843
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) ENERGIZER HOLDINGS Occupation (for Individual) CHAIRMAN
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 5000.00

Date of Receipt 11 / 18 / 2016
Transaction ID : SA11A.480992
 Amount of Each Receipt this Period 5000.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 5075.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2562 OF 4311
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. MULKERN, THOMAS, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 150 BLOSSOM STREET

City LYNN	State MA	Zip Code 01902-4551
--------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) INFORMATION REQUESTED PER BEST EFFORTS	Occupation (for Individual) INFORMATION REQUESTED PER BE
---	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	26	/	2016

Transaction ID : SA11A.447708

Amount of Each Receipt this Period
500.00

Memo Item
CONTRIBUTION

B. MULL, KATHERINE, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1857 PORT RENWICK

City NEWPORT BEACH	State CA	Zip Code 92660-6604
-----------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) MULL ACCOUNTING	Occupation (for Individual) ACCOUNTANT
--	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
350.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	06	/	2016

Transaction ID : SA11A.476774

Amount of Each Receipt this Period
50.00

Memo Item
CONTRIBUTION

C. MULLEN, J.D., , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 6820 FOOTHILL DR.

City AMARILLO	State TX	Zip Code 79124-1133
------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
275.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	26	/	2016

Transaction ID : SA11A.451371

Amount of Each Receipt this Period
25.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	575.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2563 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. MULLEN, JIM, E., DR., MD
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 23242 TASMANIA CIRCLE
 City DANA POINT State CA Zip Code 92629-3645
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt **10 / 23 / 2016**
Transaction ID : SA11A.446586
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

B. MULLEN, JIM, E., DR., MD
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 23242 TASMANIA CIRCLE
 City DANA POINT State CA Zip Code 92629-3645
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt **11 / 04 / 2016**
Transaction ID : SA11A.473271
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

C. MULLINS, LYN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 374 NARROWS TRACE
 City XENIA State OH Zip Code 45385-9388
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 225.00

Date of Receipt **10 / 23 / 2016**
Transaction ID : SA11A.446479
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	75.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2564 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. MULLINS, LYN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 374 NARROWS TRACE
 City XENIA State OH Zip Code 45385-9388
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 225.00

Date of Receipt **10 / 26 / 2016**
Transaction ID : SA11A.451109
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

B. MULLINS, LYN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 374 NARROWS TRACE
 City XENIA State OH Zip Code 45385-9388
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 225.00

Date of Receipt **11 / 07 / 2016**
Transaction ID : SA11A.476608
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

C. MULLINS, LYN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 374 NARROWS TRACE
 City XENIA State OH Zip Code 45385-9388
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 225.00

Date of Receipt **11 / 06 / 2016**
Transaction ID : SA11A.478174
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	75.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2565 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
Team Ryan

A. MULLIKIN, WALTER, H., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address P. O. BOX 15
 City PENN VALLEY State CA Zip Code 95946-0015
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 04 / 2016
Transaction ID : SA11A.473382
 Amount of Each Receipt this Period
 25.00
 Memo Item
 CONTRIBUTION

B. MULLINS, WILLIAM, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 10 TWIN OAKS PLACE
 City LAUREL State MS Zip Code 39440-9004
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) HORTMAN HARLOW LAW Occupation (for Individual) ATTORNEY
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 375.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 31 / 2016
Transaction ID : SA11A.464663
 Amount of Each Receipt this Period
 75.00
 Memo Item
 CONTRIBUTION

C. MULVIHILL, DANIEL, F., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address P.O.BOX 85012
 8840 COMPLEX DR.
 City SAN DIEGO State CA Zip Code 92186-5012
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) PACIFIC SOUTHWEST MORTGAGE Occupation (for Individual) PACIFIC SOUTHWEST MORTGAGE
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 1325.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 04 / 2016
Transaction ID : SA11A.472833
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	200.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2566 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. MUNCY, LOTA, E., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 302 WOODMONT CIRCLE
 APT. 105
 City BATESVILLE State AR Zip Code 72501-8387
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 415.00

Date of Receipt
 11 / 04 / 2016
Transaction ID : SA11A.467511
 Amount of Each Receipt this Period
 100.00
 Memo Item CONTRIBUTION

B. MUNCY, LOTA, E., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 302 WOODMONT CIRCLE
 APT. 105
 City BATESVILLE State AR Zip Code 72501-8387
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 415.00

Date of Receipt
 11 / 04 / 2016
Transaction ID : SA11A.467553
 Amount of Each Receipt this Period
 30.00
 Memo Item CONTRIBUTION

C. MUNDKUR, PRAVIN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 9 BELFRY TERRACE
 9 BELFRY TERRACE
 City LEXINGTON State MA Zip Code 02421-4909
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) PROGRAMMER
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 450.00

Date of Receipt
 10 / 31 / 2016
Transaction ID : SA11A.458756
 Amount of Each Receipt this Period
 250.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	380.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2567 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. MUNDY, GEORGE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 13725 BARBERRY WAY
 City SYKESVILLE State MD Zip Code 21784-5702
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) PARSONS Occupation (for Individual) NETWORK SCIENTIST
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 10 / 28 / 2016
Transaction ID : SA11A.455345
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

B. MUNSCH, HARVEY, E., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1215 RITA CIRCLE
 City SAN ANGELO State TX Zip Code 76905-4201
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 350.00

Date of Receipt 10 / 23 / 2016
Transaction ID : SA11A.446553
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

C. MUNSCH, HARVEY, E., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1215 RITA CIRCLE
 City SAN ANGELO State TX Zip Code 76905-4201
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 350.00

Date of Receipt 10 / 25 / 2016
Transaction ID : SA11A.451885
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	325.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2568 OF 4311
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. MUNSCH, HARVEY, E., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1215 RITA CIRCLE
 City SAN ANGELO State TX Zip Code 76905-4201
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 350.00

Date of Receipt 11 / 04 / 2016
Transaction ID : SA11A.472760
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

B. MUNSON, PENNY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1221 W COAST HWY 422
 City NEWPORT BEACH State CA Zip Code 92663-5026
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 275.00

Date of Receipt 10 / 20 / 2016
Transaction ID : SA11A.442439
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

C. MUNSON, PENNY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1221 W COAST HWY 422
 City NEWPORT BEACH State CA Zip Code 92663-5026
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 275.00

Date of Receipt 11 / 04 / 2016
Transaction ID : SA11A.473233
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶ 125.00
TOTAL This Period (last page this line number only).....▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2569 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. MURAD, MEREDITH, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 10350 WILSHIRE BLVD
 City LOS ANGELES State CA Zip Code 90024-4700
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt 10 / 28 / 2016
Transaction ID : SA11A.455798
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

B. MURAD, MEREDITH, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 10350 WILSHIRE BLVD
 City LOS ANGELES State CA Zip Code 90024-4700
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt 11 / 03 / 2016
Transaction ID : SA11A.468976
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

C. MURAD, MEREDITH, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 10350 WILSHIRE BLVD
 City LOS ANGELES State CA Zip Code 90024-4700
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt 11 / 03 / 2016
Transaction ID : SA11A.468995
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	300.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2570 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. MURAD, MEREDITH, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 10350 WILSHIRE BLVD
 City LOS ANGELES State CA Zip Code 90024-4700
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt 11 / 03 / 2016
Transaction ID : SA11A.468996
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

B. MURDOUGH, SAMUEL, C., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5801 BENT PINE DR.
 City CENTER HARBOR State NH Zip Code 03226-
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1500.00

Date of Receipt 10 / 20 / 2016
Transaction ID : SA11A.442447
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

C. MURDOUGH, SAMUEL, C., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5801 BENT PINE DR.
 City CENTER HARBOR State NH Zip Code 03226-
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1500.00

Date of Receipt 11 / 04 / 2016
Transaction ID : SA11A.473343
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	600.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2571 OF 4311
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. MURPHY, ANNE, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 19951 COLLIER ST

City WOODLAND HILLS	State CA	Zip Code 91364-3504
------------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
750.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	21	/	2016

Transaction ID : SA11A.444561

Amount of Each Receipt this Period
25.00

Memo Item
CONTRIBUTION

B. MURPHY, ANNE, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 19951 COLLIER ST

City WOODLAND HILLS	State CA	Zip Code 91364-3504
------------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
750.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	27	/	2016

Transaction ID : SA11A.453168

Amount of Each Receipt this Period
50.00

Memo Item
CONTRIBUTION

C. MURPHY, ANNE, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 19951 COLLIER ST

City WOODLAND HILLS	State CA	Zip Code 91364-3504
------------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
750.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	02	/	2016

Transaction ID : SA11A.465907

Amount of Each Receipt this Period
50.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	125.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2572 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. MURPHY, ANNE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 19951 COLLIER ST
 City WOODLAND HILLS State CA Zip Code 91364-3504
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 750.00

Date of Receipt
 11 / 03 / 2016
Transaction ID : SA11A.469339
 Amount of Each Receipt this Period
 50.00
 Memo Item
 CONTRIBUTION

B. MURPHY, ANNE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 19951 COLLIER ST
 City WOODLAND HILLS State CA Zip Code 91364-3504
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 750.00

Date of Receipt
 11 / 04 / 2016
Transaction ID : SA11A.472840
 Amount of Each Receipt this Period
 25.00
 Memo Item
 CONTRIBUTION

C. MURPHY, ANNE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 19951 COLLIER ST
 City WOODLAND HILLS State CA Zip Code 91364-3504
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 750.00

Date of Receipt
 11 / 07 / 2016
Transaction ID : SA11A.475448
 Amount of Each Receipt this Period
 50.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	125.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2573 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
Team Ryan

A. MURPHY, ANNE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 19951 COLLIER ST
 City WOODLAND HILLS State CA Zip Code 91364-3504
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 750.00

Date of Receipt
 11 / 07 / 2016
Transaction ID : SA11A.475459
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

B. MURPHY, ANNE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 19951 COLLIER ST
 City WOODLAND HILLS State CA Zip Code 91364-3504
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 750.00

Date of Receipt
 11 / 07 / 2016
Transaction ID : SA11A.480084
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

C. MURPHY, DAVID, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3100 PAINTED HORSE DR
 City BYRNES MILL State MO Zip Code 63025-3018
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 550.00

Date of Receipt
 10 / 25 / 2016
Transaction ID : SA11A.448901
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	200.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2574 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. MURPHY, JAMES, W., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 11800 PEBBLEPOINTE PASS
 City CARMEL State IN Zip Code 46033-9671
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1320.00

Date of Receipt **10 / 25 / 2016**
Transaction ID : SA11A.447472
 Amount of Each Receipt this Period 35.00
 Memo Item CONTRIBUTION

B. MURPHY, JAMES, W., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 11800 PEBBLEPOINTE PASS
 City CARMEL State IN Zip Code 46033-9671
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1320.00

Date of Receipt **10 / 27 / 2016**
Transaction ID : SA11A.452436
 Amount of Each Receipt this Period 200.00
 Memo Item CONTRIBUTION

C. MURPHY, JAMES, W., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 11800 PEBBLEPOINTE PASS
 City CARMEL State IN Zip Code 46033-9671
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1320.00

Date of Receipt **11 / 01 / 2016**
Transaction ID : SA11A.461790
 Amount of Each Receipt this Period 200.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	435.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2575 OF 4311
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
Team Ryan

A. MURPHY, JOHN, E., MR.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1823 ARDLEIGH ROAD

City COLUMBUS	State OH	Zip Code 43221-1400
------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) OHIO PROSECUTING ATTORNEY ASSOC	Occupation (for Individual) ATTORNEY
--	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
800.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		27		2016

Transaction ID : SA11A.452253

Amount of Each Receipt this Period
300.00

Memo Item
CONTRIBUTION

B. MURPHY, JOSEPH, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 3412 NANTUCKET DR

City LEXINGTON	State KY	Zip Code 40502-3324
-------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) SELF EMPLOYED	Occupation (for Individual) ATTORNEY
--	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
300.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		21		2016

Transaction ID : SA11A.444337

Amount of Each Receipt this Period
100.00

Memo Item
CONTRIBUTION

C. MURPHY, JOSEPH, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 3412 NANTUCKET DR

City LEXINGTON	State KY	Zip Code 40502-3324
-------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) SELF EMPLOYED	Occupation (for Individual) ATTORNEY
--	---

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
300.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11		04		2016

Transaction ID : SA11A.472331

Amount of Each Receipt this Period
100.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	500.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2576 OF 4311
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
Team Ryan

A. MURPHY, WADE, , MR.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 600 GRANT ST STE 750

City DENVER	State CO	Zip Code 80203-3528
----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) SOURCE ROCK PARTNERS	Occupation (for Individual) OWNER
---	--------------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
50000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		25		2016

Transaction ID : SA11A.445026

Amount of Each Receipt this Period
50000.00

Memo Item
CONTRIBUTION

B. MURRAY, DON, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 442 EAST 20TH ST
7F

City NEW YORK	State NY	Zip Code 10009-8120
------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		25		2016

Transaction ID : SA11A.451642

Amount of Each Receipt this Period
100.00

Memo Item
CONTRIBUTION

C. MURRAY, DON, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 13700 LOST CREEK DRIVE

City EDMOND	State OK	Zip Code 73013-7270
----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) INFORMATION REQUESTED PER BEST EFFORTS	Occupation (for Individual) INFORMATION REQUESTED PER BES
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
1000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		28		2016

Transaction ID : SA11A.454812

Amount of Each Receipt this Period
1000.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	51100.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2577 OF 4311
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. MURRAY, DON, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 442 EAST 20TH ST
7F

City NEW YORK State NY Zip Code 10009-8120

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
500.00

Date of Receipt
10 / 31 / 2016
Transaction ID : SA11A.463385

Amount of Each Receipt this Period
25.00

Memo Item CONTRIBUTION

B. MURRAY, DON, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 442 EAST 20TH ST
7F

City NEW YORK State NY Zip Code 10009-8120

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
500.00

Date of Receipt
11 / 04 / 2016
Transaction ID : SA11A.473175

Amount of Each Receipt this Period
25.00

Memo Item CONTRIBUTION

C. MURRAY, GEORGE, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 370 N MAYFLOWER ROAD

City LAKE FOREST State IL Zip Code 60045-2324

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
500.00

Date of Receipt
11 / 02 / 2016
Transaction ID : SA11A.465095

Amount of Each Receipt this Period
500.00

Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 550.00

TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2578 OF 4311
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. MURRAY, JOHN, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 9108 CHERBOURG DRIVE

City POTOMAC	State MD	Zip Code 20854-3107
-----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
600.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		22		2016

Transaction ID : SA11A.446753

Amount of Each Receipt this Period
250.00

Memo Item CONTRIBUTION

B. MURRAY, JOHN, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 9108 CHERBOURG DRIVE

City POTOMAC	State MD	Zip Code 20854-3107
-----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
600.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		31		2016

Transaction ID : SA11A.459079

Amount of Each Receipt this Period
100.00

Memo Item CONTRIBUTION

C. MURRAY, MICHAEL, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 721 WOODLAND WEST DRIVE

City WOODLAND PARK	State CO	Zip Code 80863-8803
-----------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
240.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		22		2016

Transaction ID : SA11A.447001

Amount of Each Receipt this Period
25.00

Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	375.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2579 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. MURRAY, MICHAEL, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 721 WOODLAND WEST DRIVE
 City WOODLAND PARK State CO Zip Code 80863-8803
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 240.00

Date of Receipt 11 / 04 / 2016
Transaction ID : SA11A.473211
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

B. MURRAY, PATRICK, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3918 TAMPA RD
 City OLDSMAR State FL Zip Code 34677-3118
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) MURRAY MOTIVE Occupation (for Individual) OWNER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 11 / 01 / 2016
Transaction ID : SA11A.462951
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

C. MURRAY, WILLIAM, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 351 VIA TORRENTE DRIVE
 City POINCIANA State FL Zip Code 34759-3139
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 275.00

Date of Receipt 10 / 21 / 2016
Transaction ID : SA11A.444221
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	375.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2580 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. MURRAY, WILLIAM, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 765 ARROYO ROAD
 City LOS ALTOS State CA Zip Code 94024-3111
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) DATAPROSE Occupation (for Individual) DATAPROSE
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 275.00

Date of Receipt 10 / 20 / 2016
Transaction ID : SA11A.444869
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

B. MURRAY, WILLIAM, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 765 ARROYO ROAD
 City LOS ALTOS State CA Zip Code 94024-3111
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) DATAPROSE Occupation (for Individual) DATAPROSE
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 275.00

Date of Receipt 10 / 26 / 2016
Transaction ID : SA11A.450409
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

C. MURRAY, WILLIAM, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 351 VIA TORRENTE DRIVE
 City POINCIANA State FL Zip Code 34759-3139
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 275.00

Date of Receipt 10 / 28 / 2016
Transaction ID : SA11A.455493
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 125.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2581 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
Team Ryan

A. MURRAY, WILLIAM, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 765 ARROYO ROAD
 City LOS ALTOS State CA Zip Code 94024-3111
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) DATAPROSE Occupation (for Individual) DATAPROSE
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 275.00

Date of Receipt 10 / 31 / 2016
Transaction ID : SA11A.457630
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

B. MURRAY, WILLIAM, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 351 VIA TORRENTE DRIVE
 City POINCIANA State FL Zip Code 34759-3139
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 275.00

Date of Receipt 10 / 31 / 2016
Transaction ID : SA11A.464445
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

C. MURRAY, WILLIAM, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 351 VIA TORRENTE DRIVE
 City POINCIANA State FL Zip Code 34759-3139
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 275.00

Date of Receipt 10 / 31 / 2016
Transaction ID : SA11A.464450
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	75.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2582 OF 4311
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. MURRAY, WILLIAM, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 351 VIA TORRENTE DRIVE

City POINCIANA	State FL	Zip Code 34759-3139
-------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
275.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	07	/	2016

Transaction ID : SA11A.474907

Amount of Each Receipt this Period
25.00

Memo Item CONTRIBUTION

B. MURRAY, WILLIAM, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 351 VIA TORRENTE DRIVE

City POINCIANA	State FL	Zip Code 34759-3139
-------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
275.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	07	/	2016

Transaction ID : SA11A.475729

Amount of Each Receipt this Period
25.00

Memo Item CONTRIBUTION

C. MUSCARELLO, DONALD, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 6713 NORMANDY DRIVE

City SPRING GROVE	State IL	Zip Code 60081-8424
----------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
255.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	27	/	2016

Transaction ID : SA11A.453829

Amount of Each Receipt this Period
50.00

Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	100.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2583 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. MUSCARELLO, DONALD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 6713 NORMANDY DRIVE
 City SPRING GROVE State IL Zip Code 60081-8424
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 255.00

Date of Receipt 11 / 04 / 2016
Transaction ID : SA11A.470978
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

B. MUSGRAVE, DEAN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 400 CLAREMONT STREET
 City DEARBORN State MI Zip Code 48124-1308
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) CONSULTING ENGINEER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 550.00

Date of Receipt 10 / 24 / 2016
Transaction ID : SA11A.443701
 Amount of Each Receipt this Period 300.00
 Memo Item CONTRIBUTION

C. MUSIL, JAMES, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2205 PARADISE LANE
 City FLOWER MOUND State TX Zip Code 75022-8131
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 455.00

Date of Receipt 10 / 24 / 2016
Transaction ID : SA11A.449544
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 400.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2584 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. MUSIL, JAMES, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2205 PARADISE LANE
 City FLOWER MOUND State TX Zip Code 75022-8131
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 455.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 02 / 2016
Transaction ID : SA11A.466420
 Amount of Each Receipt this Period
 30.00
 Memo Item
 CONTRIBUTION

B. MUSTAIN, BRUCE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 8080 CRESTWOOD COVE
 City BILOXI State MS Zip Code 39532-8384
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) INGALLS SHIPBUILDING Occupation (for Individual) ENGINEER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 225.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 04 / 2016
Transaction ID : SA11A.473607
 Amount of Each Receipt this Period
 30.00
 Memo Item
 CONTRIBUTION

C. MUSTY MD, MICHAEL, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 10710 PINE BEACH PENINSULA LOOP
 City EAST GULL LAKE State MN Zip Code 56401-2027
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) PHYSICIAN
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 325.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 24 / 2016
Transaction ID : SA11A.449405
 Amount of Each Receipt this Period
 25.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	85.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2585 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
Team Ryan

A. MUSTY MD, MICHAEL, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 10710 PINE BEACH PENINSULA LOOP
 O
 City EAST GULL LAKE State MN Zip Code 56401-2027
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) PHYSICIAN
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 325.00

Date of Receipt **10 / 24 / 2016**
Transaction ID : SA11A.449406
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

B. MUSTY MD, MICHAEL, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 10710 PINE BEACH PENINSULA LOOP
 O
 City EAST GULL LAKE State MN Zip Code 56401-2027
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) PHYSICIAN
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 325.00

Date of Receipt **11 / 04 / 2016**
Transaction ID : SA11A.470928
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

C. MUSTY MD, MICHAEL, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 10710 PINE BEACH PENINSULA LOOP
 O
 City EAST GULL LAKE State MN Zip Code 56401-2027
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) PHYSICIAN
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 325.00

Date of Receipt **11 / 04 / 2016**
Transaction ID : SA11A.473996
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	150.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2586 OF 4311
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. MUTCH, WILLIAM, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 2200 FAR HILLS AVE
6

City DAYTON State OH Zip Code 45419-2567

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
285.00

Date of Receipt
10 / 24 / 2016
Transaction ID : SA11A.449516

Amount of Each Receipt this Period
25.00

Memo Item CONTRIBUTION

B. MUTH, PETER, T., ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 56 REMENSCHNEIDER ROAD

City JEFFERSONVILLE State NY Zip Code 12748-6029

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) U S COAST GUARD Occupation (for Individual) CAPTAIN USCG RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
325.00

Date of Receipt
10 / 24 / 2016
Transaction ID : SA11A.445656

Amount of Each Receipt this Period
25.00

Memo Item CONTRIBUTION

C. MUTH, PETER, T., ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 56 REMENSCHNEIDER ROAD

City JEFFERSONVILLE State NY Zip Code 12748-6029

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) U S COAST GUARD Occupation (for Individual) CAPTAIN USCG RETIRED

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
325.00

Date of Receipt
10 / 31 / 2016
Transaction ID : SA11A.458840

Amount of Each Receipt this Period
50.00

Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶ 100.00

TOTAL This Period (last page this line number only).....▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2587 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
MUTH, PETER, T., ,

Mailing Address **56 REMENSCHNEIDER ROAD**

City JEFFERSONVILLE	State NY	Zip Code 12748-6029
-------------------------------	--------------------	-------------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) U S COAST GUARD	Occupation (for Individual) CAPTAIN USCG RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
325.00

Date of Receipt
11 / 07 / 2016

Transaction ID : SA11A.476357

Amount of Each Receipt this Period
25.00

Memo Item CONTRIBUTION

B. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
MUTH, PETER, T., ,

Mailing Address **56 REMENSCHNEIDER ROAD**

City JEFFERSONVILLE	State NY	Zip Code 12748-6029
-------------------------------	--------------------	-------------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) U S COAST GUARD	Occupation (for Individual) CAPTAIN USCG RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
325.00

Date of Receipt
11 / 06 / 2016

Transaction ID : SA11A.476963

Amount of Each Receipt this Period
10.00

Memo Item CONTRIBUTION

C. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
MUTH, PETER, T., ,

Mailing Address **56 REMENSCHNEIDER ROAD**

City JEFFERSONVILLE	State NY	Zip Code 12748-6029
-------------------------------	--------------------	-------------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) U S COAST GUARD	Occupation (for Individual) CAPTAIN USCG RETIRED
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Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
325.00

Date of Receipt
11 / 06 / 2016

Transaction ID : SA11A.477637

Amount of Each Receipt this Period
25.00

Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	60.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2588 OF 4311
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. MUTH, PETER, T., ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 56 REMENSCHNEIDER ROAD

City JEFFERSONVILLE	State NY	Zip Code 12748-6029
------------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) U S COAST GUARD	Occupation (for Individual) CAPTAIN USCG RETIRED
--	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
325.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	07	/	2016

Transaction ID : SA11A.480568

Amount of Each Receipt this Period
25.00

Memo Item CONTRIBUTION

B. MYERS, JANET, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 26 S GRANT STREET

City WAYNESBORO	State PA	Zip Code 17268-1516
--------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
300.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	26	/	2016

Transaction ID : SA11A.447728

Amount of Each Receipt this Period
100.00

Memo Item CONTRIBUTION

C. MYERS, JANET, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 26 S GRANT STREET

City WAYNESBORO	State PA	Zip Code 17268-1516
--------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
300.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	02	/	2016

Transaction ID : SA11A.465078

Amount of Each Receipt this Period
100.00

Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	225.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2589 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. MYERS, JERALD, W., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1021 AVONDALE DRIVE

City LAS CRUCES	State NM	Zip Code 88005-1251
--------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) RETIRED	Occupation (for Individual) RETIRED USN
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
310.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 21 / 2016
Transaction ID : SA11A.443617

Amount of Each Receipt this Period
 30.00

Memo Item CONTRIBUTION

B. MYERS, JOHN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4411 OLIVER LANE

City DOUGLASVILLE	State GA	Zip Code 30135-1960
----------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
450.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 06 / 2016
Transaction ID : SA11A.478245

Amount of Each Receipt this Period
 100.00

Memo Item CONTRIBUTION

C. MYERS, TED, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 21852 SE 266TH PL

City MAPLE VALLEY	State WA	Zip Code 98038-6133
----------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
330.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 21 / 2016
Transaction ID : SA11A.444524

Amount of Each Receipt this Period
 30.00

Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	160.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2590 OF 4311
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. MYERS, TED, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 21852 SE 266TH PL

City MAPLE VALLEY	State WA	Zip Code 98038-6133
----------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
330.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	21	/	2016

Transaction ID : SA11A.447085

Amount of Each Receipt this Period
25.00

Memo Item CONTRIBUTION

B. MYERS, TED, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 21852 SE 266TH PL

City MAPLE VALLEY	State WA	Zip Code 98038-6133
----------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
330.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	04	/	2016

Transaction ID : SA11A.471736

Amount of Each Receipt this Period
30.00

Memo Item CONTRIBUTION

C. MYOTTE, ROBERT, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 11383 SOMERSET TRAIL

City PAINESVILLE	State OH	Zip Code 44077-2364
---------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) INFORMATION REQUESTED PER BEST EFFORTS	Occupation (for Individual) INFORMATION REQUESTED PER BES
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	04	/	2016

Transaction ID : SA11A.467660

Amount of Each Receipt this Period
100.00

Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	155.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2591 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. MYRICK, STEVEN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 200 BRIARCLIFF CIRCLE
 City SEBASTIAN State FL Zip Code 32958-8693
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 212.00

Date of Receipt 10 / 29 / 2016
Transaction ID : SA11A.460514
 Amount of Each Receipt this Period 30.00
 Memo Item CONTRIBUTION

B. MYSLIWIEC, JOSEPH, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4212 WILLOW LANE DR NE
 City GRAND RAPIDS State MI Zip Code 49525-7206
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 11 / 02 / 2016
Transaction ID : SA11A.469376
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

C. MYSLIWIEC, JOSEPH, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4212 WILLOW LANE DR NE
 City GRAND RAPIDS State MI Zip Code 49525-7206
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 11 / 06 / 2016
Transaction ID : SA11A.476900
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶ 80.00
TOTAL This Period (last page this line number only).....▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2592 OF 4311
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. MYSLIWIEC, JOSEPH, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4212 WILLOW LANE DR NE
 City GRAND RAPIDS State MI Zip Code 49525-7206
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 11 / 06 / 2016
Transaction ID : SA11A.476901
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

B. MYSLIWIEC, JOSEPH, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4212 WILLOW LANE DR NE
 City GRAND RAPIDS State MI Zip Code 49525-7206
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 11 / 06 / 2016
Transaction ID : SA11A.476906
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

C. NAGLE, RICHARD, J., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 949 PALMER ROAD APT 6E
 City BRONXVILLE State NY Zip Code 10708-3504
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) UNEMPLOYED Occupation (for Individual) UNEMPLOYED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 220.00

Date of Receipt 10 / 20 / 2016
Transaction ID : SA11A.433520
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶ 125.00
TOTAL This Period (last page this line number only).....▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2593 OF 4311
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. NAGY, PAUL, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1325 ORCHARD ST.

City MIDDLETOWN	State OH	Zip Code 45044-6433
--------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
275.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	26	/	2016

Transaction ID : SA11A.450935

Amount of Each Receipt this Period
25.00

Memo Item
CONTRIBUTION

B. NAGY, PAUL, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1325 ORCHARD ST.

City MIDDLETOWN	State OH	Zip Code 45044-6433
--------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
275.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	02	/	2016

Transaction ID : SA11A.469451

Amount of Each Receipt this Period
25.00

Memo Item
CONTRIBUTION

C. NAGY, PAUL, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1325 ORCHARD ST.

City MIDDLETOWN	State OH	Zip Code 45044-6433
--------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
275.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	05	/	2016

Transaction ID : SA11A.479314

Amount of Each Receipt this Period
25.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	75.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2594 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. NAHMIAS, NATHAN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 16530 VENTURA BLVD
 SUITE 309
 City ENCINO State CA Zip Code 91436-4597
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) MAB Occupation (for Individual) MAB
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 10 / 24 / 2016
Transaction ID : SA11A.445586
 Amount of Each Receipt this Period 50.00
 Memo Item
CONTRIBUTION

B. NAHMIAS, NATHAN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 16530 VENTURA BLVD
 SUITE 309
 City ENCINO State CA Zip Code 91436-4597
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) MAB Occupation (for Individual) MAB
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 10 / 24 / 2016
Transaction ID : SA11A.445587
 Amount of Each Receipt this Period 50.00
 Memo Item
CONTRIBUTION

C. NAHMIAS, NATHAN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 16530 VENTURA BLVD
 SUITE 309
 City ENCINO State CA Zip Code 91436-4597
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) MAB Occupation (for Individual) MAB
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 10 / 25 / 2016
Transaction ID : SA11A.452148
 Amount of Each Receipt this Period 50.00
 Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	150.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2595 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. NALAGATLA, ANIL, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 6581 GOVE COURT
 City MADON State OH Zip Code 45040-5712
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) JOHNSON AND JOHNSON Occupation (for Individual) FELLOW
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 700.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 04 / 2016
Transaction ID : SA11A.472118
 Amount of Each Receipt this Period
 100.00
 Memo Item CONTRIBUTION

B. NALLY, TERESA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1265 S GRAND AV
 City PASADENA State CA Zip Code 91105-2835
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 29 / 2016
Transaction ID : SA11A.460723
 Amount of Each Receipt this Period
 100.00
 Memo Item CONTRIBUTION

C. NALLY, TERESA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1265 S GRAND AV
 City PASADENA State CA Zip Code 91105-2835
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 29 / 2016
Transaction ID : SA11A.460724
 Amount of Each Receipt this Period
 100.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	300.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2596 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
Team Ryan

A. NAMY, JEROME, N., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3648 GRANTS LANDING
 City FT WORTH State TX Zip Code 76179-3822
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) OIL AND GAS
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 10400.00

Date of Receipt 10 / 25 / 2016
Transaction ID : SA11A.447285
 Amount of Each Receipt this Period 10400.00
 Memo Item CONTRIBUTION

B. NANIA, JOHN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4200 CANTERA DR. SUITE 219
 City WARRENVILLE State IL Zip Code 60555-3040
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) SALES
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 700.00

Date of Receipt 11 / 04 / 2016
Transaction ID : SA11A.473050
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

C. NANIA, JOHN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4200 CANTERA DR. SUITE 219
 City WARRENVILLE State IL Zip Code 60555-3040
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) SALES
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 700.00

Date of Receipt 11 / 04 / 2016
Transaction ID : SA11A.473524
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	10600.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2597 OF 4311
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. NARD, WALLACE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1003 LEXINGTON STREET
 City WHEATON State IL Zip Code 60187-3846
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NOVAFLEX, INC Occupation (for Individual) SALES
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 750.00

Date of Receipt 11 / 04 / 2016
Transaction ID : SA11A.472417
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

B. NASIR, MUHAMMAD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 11403-NORTH FAIR OAKS AVE
 City PASADENA State CA Zip Code 91103-
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NORTH LAKE REHAB AND MEDICAL CENTER Occupation (for Individual) PHYSICIAN
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 11 / 07 / 2016
Transaction ID : SA11A.476617
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

C. NASON, NICOLE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 495 HOLLOW TREE RIDGE ROAD
 City DARIEN State CT Zip Code 06820-2726
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) PROJECT KOE Occupation (for Individual) FOUNDER
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 750.00

Date of Receipt 10 / 31 / 2016
Transaction ID : SA11A.459224
 Amount of Each Receipt this Period 500.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶ 1000.00
TOTAL This Period (last page this line number only).....▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2598 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
-----------------------------	-----------------------------	-----------------------------

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NAME OF COMMITTEE (In Full)
Team Ryan

A. NASON, NICOLE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 495 HOLLOW TREE RIDGE ROAD
 City DARIEN State CT Zip Code 06820-2726
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) PROJECT KOE Occupation (for Individual) FOUNDER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 750.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 05 / 2016
Transaction ID : SA11A.479095
 Amount of Each Receipt this Period
 250.00
 Memo Item
 CONTRIBUTION

B. NATHMAN, BARBARA, , MS.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 18072 W 947 ROAD
 City VIAN State OK Zip Code 74962-2504
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 31 / 2016
Transaction ID : SA11A.459203
 Amount of Each Receipt this Period
 50.00
 Memo Item
 CONTRIBUTION

C. NATHMAN, BARBARA, , MS.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 18072 W 947 ROAD
 City VIAN State OK Zip Code 74962-2504
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 28 / 2016
Transaction ID : SA11A.461406
 Amount of Each Receipt this Period
 25.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	325.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2599 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. NATHMAN, BARBARA, , MS.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 18072 W 947 ROAD
 City VIAN State OK Zip Code 74962-2504
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 28 / 2016
Transaction ID : SA11A.461407
 Amount of Each Receipt this Period
 25.00
 Memo Item
 CONTRIBUTION

B. NATHMAN, BARBARA, , MS.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 18072 W 947 ROAD
 City VIAN State OK Zip Code 74962-2504
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 04 / 2016
Transaction ID : SA11A.473959
 Amount of Each Receipt this Period
 50.00
 Memo Item
 CONTRIBUTION

C. NAUMOFF, MARY, H., MS.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address #1102 430 ORRVILLA DRIVE
 City ORRVILLE State OH Zip Code 44667-2434
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 210.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 24 / 2016
Transaction ID : SA11A.445749
 Amount of Each Receipt this Period
 25.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	100.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2600 OF 4311
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. NAUMOFF, MARY, H., MS.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address #1102 430 ORRVILLA DRIVE

City ORRVILLE	State OH	Zip Code 44667-2434
------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
210.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		24		2016

Transaction ID : SA11A.445750

Amount of Each Receipt this Period
25.00

Memo Item CONTRIBUTION

B. NAUMOFF, MARY, H., MS.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address #1102 430 ORRVILLA DRIVE

City ORRVILLE	State OH	Zip Code 44667-2434
------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
210.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		27		2016

Transaction ID : SA11A.453059

Amount of Each Receipt this Period
30.00

Memo Item CONTRIBUTION

C. NAUMOFF, MARY, H., MS.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address #1102 430 ORRVILLA DRIVE

City ORRVILLE	State OH	Zip Code 44667-2434
------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
210.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		27		2016

Transaction ID : SA11A.453060

Amount of Each Receipt this Period
30.00

Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	85.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2601 OF 4311
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. NAUSS, SHIRLEY, B., MRS.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 4555 NE 66TH AVENUE
APT. 179

City VANCOUVER State WA Zip Code 98661-3183

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
205.00

Date of Receipt
11 / 01 / 2016
Transaction ID : SA11A.461662

Amount of Each Receipt this Period
50.00

Memo Item CONTRIBUTION

B. NAVADA, SHIV, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 527 MEDICAL PARK DRIVE
STE 107

City BRIDGEPORT State WV Zip Code 26330-9009

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) INFORMATION REQUESTED PER BEST EFFORTS Occupation (for Individual) INFORMATION REQUESTED PER BE

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
500.00

Date of Receipt
10 / 24 / 2016
Transaction ID : SA11A.443901

Amount of Each Receipt this Period
500.00

Memo Item CONTRIBUTION

C. NEAL, LINDA, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 5629 S BLACKSTONE AVE

City CHICAGO State IL Zip Code 60637-1827

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
250.00

Date of Receipt
11 / 06 / 2016
Transaction ID : SA11A.477621

Amount of Each Receipt this Period
250.00

Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 800.00

TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2602 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. NECKER, MARSHA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2710 WEST 19TH STREET
 City GREELEY State CO Zip Code 80634-5702
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 475.00

Date of Receipt 10 / 24 / 2016
Transaction ID : SA11A.446077
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

B. NECKER, MARSHA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2710 WEST 19TH STREET
 City GREELEY State CO Zip Code 80634-5702
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 475.00

Date of Receipt 10 / 24 / 2016
Transaction ID : SA11A.446086
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

C. NEEL, RICHARD, , MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 333 E 68TH STREET APT. 12A
 City NEW YORK State NY Zip Code 10065-5604
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 450.00

Date of Receipt 11 / 07 / 2016
Transaction ID : SA11A.467745
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	450.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2603 OF 4311
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. NEELON, DANIEL, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 325 COTUIT RD.

City MARSTONS MILLS	State MA	Zip Code 02648-1838
------------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) BOSTON INTERNATIONAL LAW GROUP	Occupation (for Individual) ATTORNEY
---	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		27		2016

Transaction ID : SA11A.456538

Amount of Each Receipt this Period
750.00

Memo Item
CONTRIBUTION

B. NEFF, SCOTT, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 9520 MILLS PKWY

City WEST DES MOINES	State IA	Zip Code 50266-3841
-------------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) BMC	Occupation (for Individual) SURGEON
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
650.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		31		2016

Transaction ID : SA11A.459216

Amount of Each Receipt this Period
100.00

Memo Item
CONTRIBUTION

C. NEFF, SCOTT, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 9520 MILLS PKWY

City WEST DES MOINES	State IA	Zip Code 50266-3841
-------------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) BMC	Occupation (for Individual) SURGEON
--	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
650.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11		04		2016

Transaction ID : SA11A.471712

Amount of Each Receipt this Period
100.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	950.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2604 OF 4311
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. NEFF, SCOTT, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 9520 MILLS PKWY

City WEST DES MOINES	State IA	Zip Code 50266-3841
-------------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) BMC	Occupation (for Individual) SURGEON
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
650.00

Date of Receipt

M M / D D / Y Y Y Y Y
11 / 05 / 2016

Transaction ID : SA11A.478365

Amount of Each Receipt this Period
50.00

Memo Item
CONTRIBUTION

B. NEFF, SCOTT, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 9520 MILLS PKWY

City WEST DES MOINES	State IA	Zip Code 50266-3841
-------------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) BMC	Occupation (for Individual) SURGEON
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
650.00

Date of Receipt

M M / D D / Y Y Y Y Y
11 / 05 / 2016

Transaction ID : SA11A.478367

Amount of Each Receipt this Period
50.00

Memo Item
CONTRIBUTION

C. NELSON, EDWARD, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 8830 MCAVOY DR

City HOUSTON	State TX	Zip Code 77074-7310
-----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) LIB ERTY MUTUAL	Occupation (for Individual) AGENT
--	--------------------------------------

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
800.00

Date of Receipt

M M / D D / Y Y Y Y Y
10 / 21 / 2016

Transaction ID : SA11A.444230

Amount of Each Receipt this Period
50.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	150.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2605 OF 4311
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. NELSON, EDWARD, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 8830 MCAVOY DR

City HOUSTON	State TX	Zip Code 77074-7310
-----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) LIB ERTY MUTUAL	Occupation (for Individual) AGENT
--	--------------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
800.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	21	/	2016

Transaction ID : SA11A.444231

Amount of Each Receipt this Period
50.00

Memo Item
CONTRIBUTION

B. NELSON, EDWARD, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 8830 MCAVOY DR

City HOUSTON	State TX	Zip Code 77074-7310
-----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) LIB ERTY MUTUAL	Occupation (for Individual) AGENT
--	--------------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
800.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	27	/	2016

Transaction ID : SA11A.453886

Amount of Each Receipt this Period
100.00

Memo Item
CONTRIBUTION

C. NELSON, EDWARD, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 8830 MCAVOY DR

City HOUSTON	State TX	Zip Code 77074-7310
-----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) LIB ERTY MUTUAL	Occupation (for Individual) AGENT
--	--------------------------------------

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
800.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	03	/	2016

Transaction ID : SA11A.468597

Amount of Each Receipt this Period
100.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	250.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2606 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. NELSON, EDWARD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 8830 MCAVOY DR
 City HOUSTON State TX Zip Code 77074-7310
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) LIB ERTY MUTUAL Occupation (for Individual) AGENT
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 800.00

Date of Receipt 11 / 04 / 2016
Transaction ID : SA11A.474039
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

B. NELSON, EDWARD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 8830 MCAVOY DR
 City HOUSTON State TX Zip Code 77074-7310
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) LIB ERTY MUTUAL Occupation (for Individual) AGENT
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 800.00

Date of Receipt 11 / 07 / 2016
Transaction ID : SA11A.475032
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

C. NELSON, GARY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 24821 PARKLAND CT
 City WILDOMAR State CA Zip Code 92595-7857
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) PASTOR Occupation (for Individual) PASTOR
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 530.00

Date of Receipt 10 / 25 / 2016
Transaction ID : SA11A.448531
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	300.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2607 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. NELSON, GARY, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 24821 PARKLAND CT

City WILDOMAR	State CA	Zip Code 92595-7857
------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) PASTOR	Occupation (for Individual) PASTOR
---	---------------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
530.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		25		2016

Transaction ID : SA11A.448554

Amount of Each Receipt this Period
100.00

Memo Item
CONTRIBUTION

B. NELSON, GARY, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 24821 PARKLAND CT

City WILDOMAR	State CA	Zip Code 92595-7857
------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) PASTOR	Occupation (for Individual) PASTOR
---	---------------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
530.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		25		2016

Transaction ID : SA11A.448557

Amount of Each Receipt this Period
100.00

Memo Item
CONTRIBUTION

C. NELSON, GARY, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 24821 PARKLAND CT

City WILDOMAR	State CA	Zip Code 92595-7857
------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) PASTOR	Occupation (for Individual) PASTOR
---	---------------------------------------

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
530.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		31		2016

Transaction ID : SA11A.457754

Amount of Each Receipt this Period
50.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	250.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2608 OF 4311
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. NELSON, GARY, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 24821 PARKLAND CT

City WILDOMAR	State CA	Zip Code 92595-7857
------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) PASTOR	Occupation (for Individual) PASTOR
---	---------------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
530.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		31		2016

Transaction ID : SA11A.457755

Amount of Each Receipt this Period
50.00

Memo Item
CONTRIBUTION

B. NELSON, GARY, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 24821 PARKLAND CT

City WILDOMAR	State CA	Zip Code 92595-7857
------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) PASTOR	Occupation (for Individual) PASTOR
---	---------------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
530.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11		07		2016

Transaction ID : SA11A.476060

Amount of Each Receipt this Period
30.00

Memo Item
CONTRIBUTION

C. NELSON, GARY, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 24821 PARKLAND CT

City WILDOMAR	State CA	Zip Code 92595-7857
------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) PASTOR	Occupation (for Individual) PASTOR
---	---------------------------------------

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
530.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11		07		2016

Transaction ID : SA11A.476094

Amount of Each Receipt this Period
25.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	105.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2609 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
-----------------------------	-----------------------------	-----------------------------

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NAME OF COMMITTEE (In Full)
Team Ryan

A. NELSON, GARY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 24821 PARKLAND CT
 City WILDOMAR State CA Zip Code 92595-7857
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) PASTOR Occupation (for Individual) PASTOR
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 530.00

Date of Receipt
 11 / 07 / 2016
Transaction ID : SA11A.476097
 Amount of Each Receipt this Period 25.00
 Memo Item
 CONTRIBUTION

B. NELSON, JEAN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1100 N BAY AVE 4N
 City BEACH HAVEN State NJ Zip Code 08008-2109
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 225.00

Date of Receipt
 10 / 24 / 2016
Transaction ID : SA11A.449505
 Amount of Each Receipt this Period 25.00
 Memo Item
 CONTRIBUTION

C. NELSON, JEAN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1100 N BAY AVE 4N
 City BEACH HAVEN State NJ Zip Code 08008-2109
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 225.00

Date of Receipt
 10 / 24 / 2016
Transaction ID : SA11A.449507
 Amount of Each Receipt this Period 25.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	75.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2610 OF 4311
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. NELSON, JEAN, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1100 N BAY AVE
4N

City BEACH HAVEN State NJ Zip Code 08008-2109

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
225.00

Date of Receipt
10 / 31 / 2016
Transaction ID : SA11A.464726

Amount of Each Receipt this Period
25.00

Memo Item
CONTRIBUTION

B. NELSON, JEAN, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1100 N BAY AVE
4N

City BEACH HAVEN State NJ Zip Code 08008-2109

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
225.00

Date of Receipt
10 / 31 / 2016
Transaction ID : SA11A.464741

Amount of Each Receipt this Period
25.00

Memo Item
CONTRIBUTION

C. NELSON, JEAN, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1100 N BAY AVE
4N

City BEACH HAVEN State NJ Zip Code 08008-2109

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
225.00

Date of Receipt
11 / 07 / 2016
Transaction ID : SA11A.480736

Amount of Each Receipt this Period
25.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 75.00

TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2611 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
Team Ryan

A. NELSON, JEAN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1100 N BAY AVE
 4N
 City BEACH HAVEN State NJ Zip Code 08008-2109
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 225.00

Date of Receipt
 11 / 07 / 2016
Transaction ID : SA11A.480738
 Amount of Each Receipt this Period
 25.00
 Memo Item CONTRIBUTION

B. NELSON, JEANNE, E., MRS.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 7834 HIXON RD
 City MINOCQUA State WI Zip Code 54548-9112
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 750.00

Date of Receipt
 10 / 26 / 2016
Transaction ID : SA11A.451044
 Amount of Each Receipt this Period
 100.00
 Memo Item CONTRIBUTION

C. NELSON, JEANNE, E., MRS.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 7834 HIXON RD
 City MINOCQUA State WI Zip Code 54548-9112
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 750.00

Date of Receipt
 11 / 04 / 2016
Transaction ID : SA11A.472788
 Amount of Each Receipt this Period
 100.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	225.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2612 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
Team Ryan

A. NELSON, LARRY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 14106 BENSON STREET
 City OVERLAND PARK State KS Zip Code 66221-2109
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 847.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 25 / 2016
Transaction ID : SA11A.448874
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION

B. NELSON, LARRY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 14106 BENSON STREET
 City OVERLAND PARK State KS Zip Code 66221-2109
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 847.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 04 / 2016
Transaction ID : SA11A.471284
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION

C. NELSON, MARIAN, H., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 11425 AQUILLA ROAD
 City CHARDON State OH Zip Code 44024-7925
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) INFORMATION REQUESTED PER BEST EFFORTS Occupation (for Individual) INFORMATION REQUESTED PER BEST EFFORTS
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 450.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 08 / 2016
Transaction ID : SA11A.468031
 Amount of Each Receipt this Period
 200.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	400.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2613 OF 4311
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
NELSON, PATRICK, , ,

Mailing Address **5009 S ELDERBERRY CIRCLE**

City SIOUX FALLS	State SD	Zip Code 57108-2847
----------------------------	--------------------	-------------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) AVERA	Occupation (for Individual) RADIOLOGY
---	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
300.00

Date of Receipt
10 / 22 / 2016

Transaction ID : SA11A.446626

Amount of Each Receipt this Period
300.00

Memo Item CONTRIBUTION

B. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
NELSON, PETER, R., MR.,

Mailing Address **907 SPAR CT**

City NEW BERN	State NC	Zip Code 28560-9758
-------------------------	--------------------	-------------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
--	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1225.00

Date of Receipt
10 / 21 / 2016

Transaction ID : SA11A.444234

Amount of Each Receipt this Period
75.00

Memo Item CONTRIBUTION

C. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
NELSON, PETER, R., MR.,

Mailing Address **907 SPAR CT**

City NEW BERN	State NC	Zip Code 28560-9758
-------------------------	--------------------	-------------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
--	---

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
1225.00

Date of Receipt
10 / 24 / 2016

Transaction ID : SA11A.445942

Amount of Each Receipt this Period
100.00

Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	475.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2614 OF 4311
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. NELSON, PETER, R., MR.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 907 SPAR CT

City NEW BERN	State NC	Zip Code 28560-9758
------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1225.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		31		2016

Transaction ID : SA11A.458415

Amount of Each Receipt this Period
50.00

Memo Item
CONTRIBUTION

B. NELSON, PETER, R., MR.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 907 SPAR CT

City NEW BERN	State NC	Zip Code 28560-9758
------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1225.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11		01		2016

Transaction ID : SA11A.462477

Amount of Each Receipt this Period
50.00

Memo Item
CONTRIBUTION

C. NELSON, PETER, R., MR.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 907 SPAR CT

City NEW BERN	State NC	Zip Code 28560-9758
------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
1225.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11		01		2016

Transaction ID : SA11A.462479

Amount of Each Receipt this Period
50.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	150.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2615 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
Team Ryan

A. NELSON, ROBERT, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 18655 W BERNARDO DR #560
 560
 City SAN DIEGO State CA Zip Code 92127-3006
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 20 / 2016
Transaction ID : SA11A.442588
 Amount of Each Receipt this Period
 50.00
 Memo Item
 CONTRIBUTION

B. NELSON, ROBERT, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 18655 W BERNARDO DR #560
 560
 City SAN DIEGO State CA Zip Code 92127-3006
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 20 / 2016
Transaction ID : SA11A.442589
 Amount of Each Receipt this Period
 50.00
 Memo Item
 CONTRIBUTION

C. NELSON, ROBERT, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 23043 SNAPPER LANE
 City CUDJOE KEY State FL Zip Code 33042-4331
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 559.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 31 / 2016
Transaction ID : SA11A.463925
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	200.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2616 OF 4311
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. NELSON, ROBERT, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 23043 SNAPPER LANE
 City CUDJOE KEY State FL Zip Code 33042-4331
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 559.00

Date of Receipt 11 / 04 / 2016
Transaction ID : SA11A.472456
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

B. NELSON, SANDRA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5009 S. ELDERBERRY CIRCLE
 City SIOUX FALLS State SD Zip Code 57108-2847
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 550.00

Date of Receipt 10 / 24 / 2016
Transaction ID : SA11A.449502
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

C. NERVIG, OLAF, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 85 W 200 N PO. BOX 678
 City MILLVILLE State UT Zip Code 84326-0678
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt 10 / 24 / 2016
Transaction ID : SA11A.449117
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	400.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2617 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. NERVIG, OLAF, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 85 W 200 N PO. BOX 678

City MILLVILLE	State UT	Zip Code 84326-0678
-------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
400.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		27		2016

Transaction ID : SA11A.452980

Amount of Each Receipt this Period
100.00

Memo Item
CONTRIBUTION

B. NERVIG, OLAF, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 85 W 200 N PO. BOX 678

City MILLVILLE	State UT	Zip Code 84326-0678
-------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
400.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11		04		2016

Transaction ID : SA11A.470956

Amount of Each Receipt this Period
50.00

Memo Item
CONTRIBUTION

C. NERVIG, OLAF, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 85 W 200 N PO. BOX 678

City MILLVILLE	State UT	Zip Code 84326-0678
-------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
400.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11		04		2016

Transaction ID : SA11A.479601

Amount of Each Receipt this Period
50.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	200.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2618 OF 4311
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. NESS, CHARLES, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 685 SE. 23 LN
City HOMESTEAD State FL Zip Code 33033-5238
FEC ID number of contributing federal political committee. **C**
Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 500.00

Date of Receipt 10 / 29 / 2016
Transaction ID : SA11A.460376
Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

B. NESS, CHARLES, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 685 SE. 23 LN
City HOMESTEAD State FL Zip Code 33033-5238
FEC ID number of contributing federal political committee. **C**
Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 500.00

Date of Receipt 11 / 04 / 2016
Transaction ID : SA11A.472259
Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

C. NESTER, FOREST, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 716 BRINSON ARCH
City VIRGINIA BEACH State VA Zip Code 23455-5810
FEC ID number of contributing federal political committee. **C**
Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 475.00

Date of Receipt 11 / 02 / 2016
Transaction ID : SA11A.465128
Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 550.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2619 OF 4311
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. NESTER, FOREST, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 716 BRINSON ARCH

City VIRGINIA BEACH	State VA	Zip Code 23455-5810
------------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
475.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	04	/	2016

Transaction ID : SA11A.473186

Amount of Each Receipt this Period
25.00

Memo Item CONTRIBUTION

B. NETHERCUT, WILLIAM, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1003 THE HIGH ROAD

City AUSTIN	State TX	Zip Code 78746-2224
----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) UNIVERSITY OF TEXAS AT AUSTIN	Occupation (for Individual) PROFESSOR
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
350.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	21	/	2016

Transaction ID : SA11A.444483

Amount of Each Receipt this Period
75.00

Memo Item CONTRIBUTION

C. NEUHOFF, PAUL, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 2918 MARSHALL BLVD

City SULLIVANS ISLAND	State SC	Zip Code 29482-9637
--------------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) GSP MARKETING TECHNOLOGIES, INC.	Occupation (for Individual) CHAIRMAN/FOUNDER
---	---

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
750.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	30	/	2016

Transaction ID : SA11A.464936

Amount of Each Receipt this Period
250.00

Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	350.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2620 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. NEUHOFF, PAUL, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2918 MARSHALL BLVD
 City SULLIVANS ISLAND State SC Zip Code 29482-9637
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) GSP MARKETING TECHNOLOGIES, INC. Occupation (for Individual) CHAIRMAN/FOUNDER
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 750.00

Date of Receipt **11 / 04 / 2016**
Transaction ID : SA11A.470985
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

B. NEUMANN, MARC, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 438 UPLAND RD
 City MEDINA State WA Zip Code 98039-5321
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 900.00

Date of Receipt **10 / 31 / 2016**
Transaction ID : SA11A.457457
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

C. NEUMANN, MARC, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 438 UPLAND RD
 City MEDINA State WA Zip Code 98039-5321
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 900.00

Date of Receipt **10 / 31 / 2016**
Transaction ID : SA11A.457473
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	450.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2621 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. NEUMANN, MARC, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 438 UPLAND RD
 City MEDINA State WA Zip Code 98039-5321
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 900.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 31 / 2016
Transaction ID : SA11A.457476
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION

B. NEUMANN, MARC, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 438 UPLAND RD
 City MEDINA State WA Zip Code 98039-5321
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 900.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 04 / 2016
Transaction ID : SA11A.473718
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION

C. NEUPERT, PETER, M., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1603 EVERGREEN POINT RD
 City MEDINA State WA Zip Code 98039-2326
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NEUPERT ON HEALTH LLC Occupation (for Individual) CEO
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 10000.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 31 / 2016
Transaction ID : SA11A.464609
 Amount of Each Receipt this Period
 5000.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	5200.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2622 OF 4311
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
Team Ryan

A. NEUWIRTH, HAROLD, F., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1950 45TH AVENUE NE #209
 APT 209
 City SALEM State OR Zip Code 97305-2486
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 01 / 2016
Transaction ID : SA11A.461686
 Amount of Each Receipt this Period
 500.00
 Memo Item
 CONTRIBUTION

B. NEWCOMB, MARTIN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 229 RIDGE DRIVE
 City JACKSON State MS Zip Code 39216-4112
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) INFORMATION REQUESTED PER BEST EFFORTS Occupation (for Individual) INFORMATION REQUESTED PER BE
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 01 / 2016
Transaction ID : SA11A.461845
 Amount of Each Receipt this Period
 500.00
 Memo Item
 CONTRIBUTION

C. NEWELL, SHIRLEY, B., MS.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5801 SUNLAKES BOULEVARD
 APT 201
 City BANNING State CA Zip Code 92220-6507
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 31 / 2016
Transaction ID : SA11A.457254
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	1100.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2623 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. NEWHOUSE, STEPHAN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 600 COCONUT PALM ROAD
 City VERO BEACH State FL Zip Code 32963-3713
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 2000.00

Date of Receipt 10 / 28 / 2016
Transaction ID : SA11A.456226
 Amount of Each Receipt this Period 2000.00
 Memo Item CONTRIBUTION

B. NEWKIRK, JACK, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 215 MULBERRY ST.
 City INDEPENDENCE State KS Zip Code 67301-1843
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 325.00

Date of Receipt 10 / 25 / 2016
Transaction ID : SA11A.448881
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

C. NEWKIRK, JACK, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 215 MULBERRY ST.
 City INDEPENDENCE State KS Zip Code 67301-1843
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 325.00

Date of Receipt 11 / 04 / 2016
Transaction ID : SA11A.471064
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 2050.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2624 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. NEWKIRK, MARILEE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address P O BOX 545
 City WARSAW State MO Zip Code 65355-0545
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 776.00

Date of Receipt 10 / 20 / 2016
Transaction ID : SA11A.444733
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

B. NEWKIRK, MARILEE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address P O BOX 545
 City WARSAW State MO Zip Code 65355-0545
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 776.00

Date of Receipt 10 / 28 / 2016
Transaction ID : SA11A.461397
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

C. NEWKIRK, MARILEE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address P O BOX 545
 City WARSAW State MO Zip Code 65355-0545
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 776.00

Date of Receipt 10 / 31 / 2016
Transaction ID : SA11A.464506
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶ 100.00
TOTAL This Period (last page this line number only).....▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2625 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. NEWKIRK, MARILEE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address P O BOX 545
 City WARSAW State MO Zip Code 65355-0545
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 776.00

Date of Receipt
 11 / 06 / 2016
Transaction ID : SA11A.477480
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

B. NEWMAN, DALLYN, M., MRS.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1452 RANCHITA COURT
 City LOS ALTOS State CA Zip Code 94024-5751
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 235.00

Date of Receipt
 11 / 01 / 2016
Transaction ID : SA11A.461643
 Amount of Each Receipt this Period 200.00
 Memo Item CONTRIBUTION

C. NEWTON, ELAINE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 72 STONE RIDGE LANE
 City DALEVILLE State VA Zip Code 24083-3086
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 225.00

Date of Receipt
 10 / 31 / 2016
Transaction ID : SA11A.463850
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	250.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2626 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. NEWTON, LINDA, D., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address P.O. BOX 248
 City MIDDLEBURG State VA Zip Code 20118-0248
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 10 / 21 / 2016
Transaction ID : SA11A.444343
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

B. NEWTON, LINDA, D., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address P.O. BOX 248
 City MIDDLEBURG State VA Zip Code 20118-0248
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 10 / 21 / 2016
Transaction ID : SA11A.444344
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

C. NEWTON, RONALD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 479 STEELE WOOD DR
 City RICHMOND HILL State GA Zip Code 31324-4746
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) GULFSTREAM Occupation (for Individual) PILOT
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 10 / 25 / 2016
Transaction ID : SA11A.452244
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	250.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2627 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. NEWTON, RONALD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 479 STEELE WOOD DR
 City RICHMOND HILL State GA Zip Code 31324-4746
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) GULFSTREAM Occupation (for Individual) PILOT
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 10 / 25 / 2016
Transaction ID : SA11A.452245
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

B. NEWTON, WARREN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 401 GRANDVILLE
 City CHAPEL HILL State NC Zip Code 27514-2723
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) UNC Occupation (for Individual) PHYSICIAN
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 10 / 31 / 2016
Transaction ID : SA11A.459273
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

C. NEYER, JAY, S., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 11 DRIFTWOOD LANE
 City PALM COAST State FL Zip Code 32137-3366
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 850.00

Date of Receipt 10 / 21 / 2016
Transaction ID : SA11A.443567
 Amount of Each Receipt this Period 200.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	500.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2628 OF 4311
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. NGUYEN, PHUNGANH, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 9215 SANTAYA DRIVE
 City FAIRFAX State VA Zip Code 22031-3068
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 616.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 27 / 2016
Transaction ID : SA11A.456697
 Amount of Each Receipt this Period
 5.00
 Memo Item
 CONTRIBUTION

B. NGUYEN, PHUNGANH, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 9215 SANTAYA DRIVE
 City FAIRFAX State VA Zip Code 22031-3068
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 616.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 27 / 2016
Transaction ID : SA11A.456698
 Amount of Each Receipt this Period
 5.00
 Memo Item
 CONTRIBUTION

C. NGUYEN, PHUNGANH, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 9215 SANTAYA DRIVE
 City FAIRFAX State VA Zip Code 22031-3068
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 616.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 30 / 2016
Transaction ID : SA11A.460030
 Amount of Each Receipt this Period
 15.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶ 25.00
TOTAL This Period (last page this line number only).....▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2629 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. NGUYEN, PHUNGANH, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 9215 SANTAYA DRIVE
 City FAIRFAX State VA Zip Code 22031-3068
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 616.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 01 / 2016
Transaction ID : SA11A.462197
 Amount of Each Receipt this Period
 1.00
 Memo Item
 CONTRIBUTION

B. NGUYEN, PHUNGANH, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 9215 SANTAYA DRIVE
 City FAIRFAX State VA Zip Code 22031-3068
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 616.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 02 / 2016
Transaction ID : SA11A.466970
 Amount of Each Receipt this Period
 5.00
 Memo Item
 CONTRIBUTION

C. NGUYEN, PHUNGANH, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 9215 SANTAYA DRIVE
 City FAIRFAX State VA Zip Code 22031-3068
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 616.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 02 / 2016
Transaction ID : SA11A.466974
 Amount of Each Receipt this Period
 5.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	11.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2630 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. NGUYEN, PHUNGANH, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 9215 SANTAYA DRIVE
 City FAIRFAX State VA Zip Code 22031-3068
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 616.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 02 / 2016
Transaction ID : SA11A.469940
 Amount of Each Receipt this Period
 5.00
 Memo Item
 CONTRIBUTION

B. NGUYEN, PHUNGANH, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 9215 SANTAYA DRIVE
 City FAIRFAX State VA Zip Code 22031-3068
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 616.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 02 / 2016
Transaction ID : SA11A.470174
 Amount of Each Receipt this Period
 10.00
 Memo Item
 CONTRIBUTION

C. NGUYEN, PHUNGANH, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 9215 SANTAYA DRIVE
 City FAIRFAX State VA Zip Code 22031-3068
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 616.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 04 / 2016
Transaction ID : SA11A.470399
 Amount of Each Receipt this Period
 5.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	20.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2631 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. NGUYEN, PHUNGANH, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 9215 SANTAYA DRIVE
 City FAIRFAX State VA Zip Code 22031-3068
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 616.00

Date of Receipt
 11 / 07 / 2016
Transaction ID : SA11A.474906
 Amount of Each Receipt this Period 5.00
 Memo Item CONTRIBUTION

B. NGUYEN, PHUNGANH, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 9215 SANTAYA DRIVE
 City FAIRFAX State VA Zip Code 22031-3068
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 616.00

Date of Receipt
 11 / 07 / 2016
Transaction ID : SA11A.480137
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

C. NGUYEN, PHUNGANH, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 9215 SANTAYA DRIVE
 City FAIRFAX State VA Zip Code 22031-3068
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 616.00

Date of Receipt
 11 / 07 / 2016
Transaction ID : SA11A.480483
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	55.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2632 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. NICHOLS, ANNA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 900 BEACH ROAD
 APT 185
 City VERO BEACH State FL Zip Code 32963-3396
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 350.00

Date of Receipt 10 / 28 / 2016
Transaction ID : SA11A.461326
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

B. NICHOLSON, CHARLOTTE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3400 BARROW ISLAND RD
 City JUPITER State FL Zip Code 33477-1379
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 2700.00

Date of Receipt 10 / 20 / 2016
Transaction ID : SA11A.442256
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

C. NICHOLSON, CHARLOTTE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3400 BARROW ISLAND RD
 City JUPITER State FL Zip Code 33477-1379
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 2700.00

Date of Receipt 10 / 20 / 2016
Transaction ID : SA11A.442257
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	750.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2633 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
Team Ryan

A. NICHOLS, CHARLES, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 928 ALCALA DR.
 City ST. AUGUSTINE State FL Zip Code 32086-7167
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) DFS, INC Occupation (for Individual) OWNER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 850.00

Date of Receipt 10 / 28 / 2016
Transaction ID : SA11A.456268
 Amount of Each Receipt this Period 100.00
 Memo Item
 CONTRIBUTION

B. NICHOLS, GARY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 207 S. BROADWAY POBOX 426
 City CHECOTAH State OK Zip Code 74426-3807
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) GLN INC Occupation (for Individual) GROCER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1450.00

Date of Receipt 10 / 21 / 2016
Transaction ID : SA11A.444238
 Amount of Each Receipt this Period 100.00
 Memo Item
 CONTRIBUTION

C. NICHOLS, GARY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 207 S. BROADWAY POBOX 426
 City CHECOTAH State OK Zip Code 74426-3807
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) GLN INC Occupation (for Individual) GROCER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1450.00

Date of Receipt 10 / 21 / 2016
Transaction ID : SA11A.444540
 Amount of Each Receipt this Period 100.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	300.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2634 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
Team Ryan

A. NICHOLS, GARY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 207 S. BROADWAY
 POBOX 426
 City CHECOTAH State OK Zip Code 74426-3807
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) GLN INC Occupation (for Individual) GROCER
 Receipt For: Primary General Other (specify) Aggregate Year-to-Date 1450.00

Date of Receipt 11 / 04 / 2016
Transaction ID : SA11A.472859
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

B. NICHOLSON, J., , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5626 STEEPLECHASE DRIVE
 City WAUNAKEE State WI Zip Code 53597-8605
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) Aggregate Year-to-Date 400.00

Date of Receipt 11 / 04 / 2016
Transaction ID : SA11A.472720
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

C. NICHOLS, JAMES, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 17 ARGOS
 City LAGUNA NIGUEL State CA Zip Code 92677-9001
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) WJA ASSET MANAGEMENT Occupation (for Individual) FUND MANAGER
 Receipt For: Primary General Other (specify) Aggregate Year-to-Date 300.00

Date of Receipt 10 / 23 / 2016
Transaction ID : SA11A.446578
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	300.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2635 OF 4311
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. NICHOLAS, JAMES, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 3923 COOK VALLEY BOULEVARD SE

City GRAND RAPIDS	State MI	Zip Code 49546-8335
----------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		26		2016

Transaction ID : SA11A.447706

Amount of Each Receipt this Period
1000.00

Memo Item CONTRIBUTION

B. NICHOL, JAMES, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 520 WELLINGTON COURT

City WEST FARGO	State ND	Zip Code 58078-4237
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) SELF EMPLOYED	Occupation (for Individual) ENGINEERING
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
354.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		30		2016

Transaction ID : SA11A.460203

Amount of Each Receipt this Period
59.00

Memo Item CONTRIBUTION

C. NICHOLS, JAMES, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 17 ARGOS

City LAGUNA NIGUEL	State CA	Zip Code 92677-9001
-----------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) WJA ASSET MANAGEMENT	Occupation (for Individual) FUND MANAGER
---	---

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
300.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11		04		2016

Transaction ID : SA11A.473349

Amount of Each Receipt this Period
100.00

Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	1159.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2636 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
Team Ryan

A. NICHOL, JAMES, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 520 WELLINGTON COURT
 City WEST FARGO State ND Zip Code 58078-4237
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) ENGINEERING
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 354.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 04 / 2016
Transaction ID : SA11A.474230
 Amount of Each Receipt this Period
 59.00
 Memo Item
 CONTRIBUTION

B. NICHOLSON, LAURA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 165 NORTH HIDDENBROOKE DRIVE
 City ADVANCE State NC Zip Code 27006-7299
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 255.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 26 / 2016
Transaction ID : SA11A.449793
 Amount of Each Receipt this Period
 25.00
 Memo Item
 CONTRIBUTION

C. NICHOLSON, LAURA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 165 NORTH HIDDENBROOKE DRIVE
 City ADVANCE State NC Zip Code 27006-7299
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 255.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 27 / 2016
Transaction ID : SA11A.454181
 Amount of Each Receipt this Period
 30.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	114.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2637 OF 4311
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
Team Ryan

A. NICHOLAS, PHYLLIS, W., MS.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 40 HOWARD ROAD

City GREENWICH	State CT	Zip Code 06831-3104
-------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
2050.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		20		2016

Transaction ID : SA11A.442346

Amount of Each Receipt this Period
100.00

Memo Item
CONTRIBUTION

B. NICHOLAS, PHYLLIS, W., MS.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 40 HOWARD ROAD

City GREENWICH	State CT	Zip Code 06831-3104
-------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
2050.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		27		2016

Transaction ID : SA11A.453950

Amount of Each Receipt this Period
200.00

Memo Item
CONTRIBUTION

C. NICHOLAS, PHYLLIS, W., MS.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 40 HOWARD ROAD

City GREENWICH	State CT	Zip Code 06831-3104
-------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
2050.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		27		2016

Transaction ID : SA11A.453976

Amount of Each Receipt this Period
100.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	400.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2638 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. NICHOLAS, PHYLLIS, W., MS.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 40 HOWARD ROAD
 City GREENWICH State CT Zip Code 06831-3104
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 2050.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 27 / 2016
Transaction ID : SA11A.453979
 Amount of Each Receipt this Period
 100.00
 Memo Item CONTRIBUTION

B. NICHOLAS, PHYLLIS, W., MS.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 40 HOWARD ROAD
 City GREENWICH State CT Zip Code 06831-3104
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 2050.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 31 / 2016
Transaction ID : SA11A.464070
 Amount of Each Receipt this Period
 100.00
 Memo Item CONTRIBUTION

C. NICHOLAS, PHYLLIS, W., MS.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 40 HOWARD ROAD
 City GREENWICH State CT Zip Code 06831-3104
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 2050.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 31 / 2016
Transaction ID : SA11A.464078
 Amount of Each Receipt this Period
 100.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	300.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2639 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. NICHOLAS, PHYLLIS, W., MS.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 40 HOWARD ROAD
 City GREENWICH State CT Zip Code 06831-3104
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 2050.00

Date of Receipt **11 / 03 / 2016**
Transaction ID : SA11A.469066
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

B. NICHOLAS, PHYLLIS, W., MS.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 40 HOWARD ROAD
 City GREENWICH State CT Zip Code 06831-3104
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 2050.00

Date of Receipt **11 / 02 / 2016**
Transaction ID : SA11A.469782
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

C. NICHOLAS, PHYLLIS, W., MS.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 40 HOWARD ROAD
 City GREENWICH State CT Zip Code 06831-3104
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 2050.00

Date of Receipt **11 / 06 / 2016**
Transaction ID : SA11A.477631
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	300.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2640 OF 4311
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. NICHOLS, THOMAS, J., ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 14555 JUNEAU BOULEVARD

City ELM GROVE	State WI	Zip Code 53122-1667
-------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) MEISSNER,TIERNEY FISHER,NICHOL	Occupation (for Individual) PARTNER
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
2500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	03	/	2016

Transaction ID : SA11A.465183

Amount of Each Receipt this Period
2500.00

Memo Item CONTRIBUTION

B. NICKEL, JAMES, L., MR.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address P. O. BOX 60679

City BAKERSFIELD	State CA	Zip Code 93386-0679
---------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NICKEL FAMILY LLC	Occupation (for Individual) FARMER
--	---------------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
2250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	31	/	2016

Transaction ID : SA11A.464767

Amount of Each Receipt this Period
1000.00

Memo Item CONTRIBUTION

C. NICKERSON, STUART, C., MR.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 2503 HUTCHINSON COURT

City BURLINGTON	State NC	Zip Code 27215-9831
--------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
450.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	04	/	2016

Transaction ID : SA11A.473872

Amount of Each Receipt this Period
100.00

Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	3600.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2641 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
Team Ryan

A. NICKOLL, JOHN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 10800 WILSHIRE BLVD APT 1503
 1503
 City LOS ANGELES State CA Zip Code 90024-4220
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 900.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 31 / 2016
Transaction ID : SA11A.457927
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION

B. NICKOLL, JOHN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 10800 WILSHIRE BLVD APT 1503
 1503
 City LOS ANGELES State CA Zip Code 90024-4220
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 900.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 31 / 2016
Transaction ID : SA11A.464176
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION

C. NICKOLL, JOHN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 10800 WILSHIRE BLVD APT 1503
 1503
 City LOS ANGELES State CA Zip Code 90024-4220
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 900.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 31 / 2016
Transaction ID : SA11A.464246
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	300.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2642 OF 4311
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. NICKOLL, JOHN, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 10800 WILSHIRE BLVD APT 1503
1503

City LOS ANGELES State CA Zip Code 90024-4220

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
900.00

Date of Receipt
11 / 02 / 2016
Transaction ID : SA11A.469686

Amount of Each Receipt this Period
100.00

Memo Item CONTRIBUTION

B. NICOLL, SHARON, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 7703 VERNA WAY

City LUCERNE State CA Zip Code 95458-8593

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
400.00

Date of Receipt
10 / 24 / 2016
Transaction ID : SA11A.449151

Amount of Each Receipt this Period
100.00

Memo Item CONTRIBUTION

C. NICLOUD, GEORGE, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 3559 MT. DIABLO BLVD
2

City LAFAYETTE State CA Zip Code 94549-8302

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) GIBSON, DUNN & CRUTCHER LLP Occupation (for Individual) ATTORNEY

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
500.00

Date of Receipt
10 / 22 / 2016
Transaction ID : SA11A.446617

Amount of Each Receipt this Period
250.00

Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 450.00

TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2643 OF 4311
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
Team Ryan

A. NIELSON, DENNIS, L., MR.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address **PO BOX 387 505 JOHNSON AV**

City CLINTON	State WI	Zip Code 53525-0387
------------------------	--------------------	-------------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) BRABAZON TITLE CO., INC.	Occupation (for Individual) OFFICE MANAGER
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **205.00**

Date of Receipt
10 / 26 / 2016

Transaction ID : SA11A.450638

Amount of Each Receipt this Period
30.00

Memo Item
CONTRIBUTION

B. NIELSON, DENNIS, L., MR.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address **PO BOX 387 505 JOHNSON AV**

City CLINTON	State WI	Zip Code 53525-0387
------------------------	--------------------	-------------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) BRABAZON TITLE CO., INC.	Occupation (for Individual) OFFICE MANAGER
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **205.00**

Date of Receipt
10 / 31 / 2016

Transaction ID : SA11A.458835

Amount of Each Receipt this Period
25.00

Memo Item
CONTRIBUTION

C. NIELSEN, JAMES, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address **55510 GLEN AIKEN CREEK RD**

City COQUILLE	State OR	Zip Code 97423-8787
-------------------------	--------------------	-------------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
--	---

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼ **500.00**

Date of Receipt
10 / 24 / 2016

Transaction ID : SA11A.445637

Amount of Each Receipt this Period
100.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	155.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2644 OF 4311
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. NIELSEN, JOHN, S., MR.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 11821 ABERDEEN LANDING TERRACE

City MIDLOTHIAN	State VA	Zip Code 23113-1396
--------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) THETFORD FINANCIAL SERVICES	Occupation (for Individual) INVESTMENT ADVISOR
--	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		20		2016

Transaction ID : SA11A.433388

Amount of Each Receipt this Period
500.00

Memo Item
CONTRIBUTION

B. NIELSEN, KEITH, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 5118 LEE CLINE RD.

City CONOVER	State NC	Zip Code 28613-8735
-----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
275.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		31		2016

Transaction ID : SA11A.458322

Amount of Each Receipt this Period
50.00

Memo Item
CONTRIBUTION

C. NIELSEN, KEITH, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 5118 LEE CLINE RD.

City CONOVER	State NC	Zip Code 28613-8735
-----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
275.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		31		2016

Transaction ID : SA11A.458348

Amount of Each Receipt this Period
50.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	600.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2645 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13 <input type="checkbox"/> 11b <input type="checkbox"/> 14 <input type="checkbox"/> 11c <input type="checkbox"/> 15 <input type="checkbox"/> 12 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. NIELSEN, KEITH, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5118 LEE CLINE RD.
 City CONOVER State NC Zip Code 28613-8735
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 275.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 31 / 2016
Transaction ID : SA11A.458355
 Amount of Each Receipt this Period
 50.00
 Memo Item
 CONTRIBUTION

B. NIELSEN, KEITH, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5118 LEE CLINE RD.
 City CONOVER State NC Zip Code 28613-8735
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 275.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 29 / 2016
Transaction ID : SA11A.460728
 Amount of Each Receipt this Period
 50.00
 Memo Item
 CONTRIBUTION

C. NIELSEN, KEITH, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5118 LEE CLINE RD.
 City CONOVER State NC Zip Code 28613-8735
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 275.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 05 / 2016
Transaction ID : SA11A.479157
 Amount of Each Receipt this Period
 50.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	150.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2646 OF 4311
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. NIKLASON, LOREN, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address PO BOX 81

City TETONIA State ID Zip Code 83452-0081

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 1175.00

Date of Receipt 10 / 31 / 2016
Transaction ID : SA11A.458222

Amount of Each Receipt this Period 25.00

Memo Item CONTRIBUTION

B. NIKLASON, LOREN, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address PO BOX 81

City TETONIA State ID Zip Code 83452-0081

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 1175.00

Date of Receipt 10 / 30 / 2016
Transaction ID : SA11A.459961

Amount of Each Receipt this Period 100.00

Memo Item CONTRIBUTION

C. NIKLASON, LOREN, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address PO BOX 81

City TETONIA State ID Zip Code 83452-0081

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 1175.00

Date of Receipt 11 / 07 / 2016
Transaction ID : SA11A.475337

Amount of Each Receipt this Period 100.00

Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 225.00

TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2647 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. NIKLASON, LOREN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO BOX 81
 City TETONIA State ID Zip Code 83452-0081
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1175.00

Date of Receipt
 11 / 07 / 2016
Transaction ID : SA11A.480245
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION

B. NIMMER, SANDRA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 6717 NE 181ST ST STE#201 SUITE 201
 City KENMORE State WA Zip Code 98028-4837
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) PROPERTY MANAGEMENT
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 3800.00

Date of Receipt
 10 / 24 / 2016
Transaction ID : SA11A.445840
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION

C. NIMMER, SANDRA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 6717 NE 181ST ST STE#201 SUITE 201
 City KENMORE State WA Zip Code 98028-4837
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) PROPERTY MANAGEMENT
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 3800.00

Date of Receipt
 10 / 24 / 2016
Transaction ID : SA11A.445841
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 300.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2648 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
-----------------------------	-----------------------------	-----------------------------

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NAME OF COMMITTEE (In Full)
Team Ryan

A. NIMMER, SANDRA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 6717 NE 181ST ST STE#201
 SUITE 201
 City KENMORE State WA Zip Code 98028-4837
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) PROPERTY MANAGEMENT
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 3800.00

Date of Receipt 10 / 22 / 2016
Transaction ID : SA11A.446759
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

B. NIMMER, SANDRA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 6717 NE 181ST ST STE#201
 SUITE 201
 City KENMORE State WA Zip Code 98028-4837
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) PROPERTY MANAGEMENT
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 3800.00

Date of Receipt 10 / 26 / 2016
Transaction ID : SA11A.450180
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

C. NIMMER, SANDRA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 6717 NE 181ST ST STE#201
 SUITE 201
 City KENMORE State WA Zip Code 98028-4837
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) PROPERTY MANAGEMENT
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 3800.00

Date of Receipt 10 / 31 / 2016
Transaction ID : SA11A.458085
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	300.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2649 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. NIMMER, SANDRA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 6717 NE 181ST ST STE#201
 SUITE 201
 City KENMORE State WA Zip Code 98028-4837
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) PROPERTY MANAGEMENT
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 3800.00

Date of Receipt 10 / 31 / 2016
Transaction ID : SA11A.458086
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

B. NIMMER, SANDRA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 6717 NE 181ST ST STE#201
 SUITE 201
 City KENMORE State WA Zip Code 98028-4837
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) PROPERTY MANAGEMENT
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 3800.00

Date of Receipt 11 / 02 / 2016
Transaction ID : SA11A.466329
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

C. NIMMER, SANDRA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 6717 NE 181ST ST STE#201
 SUITE 201
 City KENMORE State WA Zip Code 98028-4837
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) PROPERTY MANAGEMENT
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 3800.00

Date of Receipt 11 / 01 / 2016
Transaction ID : SA11A.467405
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 300.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2650 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. NIMMER, SANDRA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 6717 NE 181ST ST STE#201
 SUITE 201
 City KENMORE State WA Zip Code 98028-4837
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) PROPERTY MANAGEMENT
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 3800.00

Date of Receipt 11 / 04 / 2016
Transaction ID : SA11A.471612
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

B. NIMMER, SANDRA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 6717 NE 181ST ST STE#201
 SUITE 201
 City KENMORE State WA Zip Code 98028-4837
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) PROPERTY MANAGEMENT
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 3800.00

Date of Receipt 11 / 07 / 2016
Transaction ID : SA11A.475407
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

C. NIMMER, SANDRA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 6717 NE 181ST ST STE#201
 SUITE 201
 City KENMORE State WA Zip Code 98028-4837
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) PROPERTY MANAGEMENT
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 3800.00

Date of Receipt 11 / 07 / 2016
Transaction ID : SA11A.475416
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 300.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2651 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. NIMMER, SANDRA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 6717 NE 181ST ST STE#201
 SUITE 201
 City KENMORE State WA Zip Code 98028-4837
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) PROPERTY MANAGEMENT
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 3800.00

Date of Receipt 11 / 07 / 2016
Transaction ID : SA11A.475417
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

B. NIMMER, SANDRA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 6717 NE 181ST ST STE#201
 SUITE 201
 City KENMORE State WA Zip Code 98028-4837
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) PROPERTY MANAGEMENT
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 3800.00

Date of Receipt 11 / 07 / 2016
Transaction ID : SA11A.480335
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

C. NIMMER, SANDRA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 6717 NE 181ST ST STE#201
 SUITE 201
 City KENMORE State WA Zip Code 98028-4837
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) PROPERTY MANAGEMENT
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 3800.00

Date of Receipt 11 / 07 / 2016
Transaction ID : SA11A.480336
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 300.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2652 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. NIMMER, SANDRA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 6717 NE 181ST ST STE#201
 SUITE 201
 City KENMORE State WA Zip Code 98028-4837
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) PROPERTY MANAGEMENT
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 3800.00

Date of Receipt 11 / 05 / 2016
Transaction ID : SA11A.480961
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

B. NINE, JOHN, E., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 11134 ESTANCIA WAY
 City CARMEL State IN Zip Code 46032-9612
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 225.00

Date of Receipt 11 / 08 / 2016
Transaction ID : SA11A.479768
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

C. NIST, SYLVIA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO BOX 453
 City MAPLE VALLEY State WA Zip Code 98038-0453
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) Aggregate Year-to-Date ▼ 215.00

Date of Receipt 10 / 25 / 2016
Transaction ID : SA11A.448287
 Amount of Each Receipt this Period 30.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 155.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2653 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. NIST, SYLVIA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO BOX 453
 City MAPLE VALLEY State WA Zip Code 98038-0453
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 215.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 04 / 2016
Transaction ID : SA11A.472806
 Amount of Each Receipt this Period
 30.00
 Memo Item
 CONTRIBUTION

B. NIX, BRENDA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO BOX 1541
 City ATHENS State TX Zip Code 75751-1541
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) RANCH/FARMING/INVESTMENTS
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 650.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 20 / 2016
Transaction ID : SA11A.442075
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION

C. NIX, BRENDA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO BOX 1541
 City ATHENS State TX Zip Code 75751-1541
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) RANCH/FARMING/INVESTMENTS
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 650.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 02 / 2016
Transaction ID : SA11A.469926
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	230.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2654 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
Team Ryan

A. NIX, BRENDA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO BOX 1541
 City ATHENS State TX Zip Code 75751-1541
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) RANCH/FARMING/INVESTMENTS
 Receipt For: Primary General Other (specify) Aggregate Year-to-Date 650.00

Date of Receipt 11 / 02 / 2016
Transaction ID : SA11A.469941
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

B. NIXON, ELIZABETH, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1127 LOS CAMPANEROS
 City SAN MARCOS State CA Zip Code 92078-5225
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) TRAVEL THE WORLD INC Occupation (for Individual) TRAVEL ADVISOR
 Receipt For: Primary General Other (specify) Aggregate Year-to-Date 225.00

Date of Receipt 10 / 24 / 2016
Transaction ID : SA11A.449440
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

C. NIXON, ELIZABETH, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1127 LOS CAMPANEROS
 City SAN MARCOS State CA Zip Code 92078-5225
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) TRAVEL THE WORLD INC Occupation (for Individual) TRAVEL ADVISOR
 Receipt For: Primary General Other (specify) Aggregate Year-to-Date 225.00

Date of Receipt 11 / 04 / 2016
Transaction ID : SA11A.470971
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	300.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2655 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. NOBLE, ELIZABETH, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4015 OAK HARBOUR CIR
 City GAINESVILLE State GA Zip Code 30506-3061
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) INDEPENDENT CONSULTANT
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 975.00

Date of Receipt 10 / 31 / 2016
Transaction ID : SA11A.459148
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

B. NOBLE, ELIZABETH, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4015 OAK HARBOUR CIR
 City GAINESVILLE State GA Zip Code 30506-3061
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) INDEPENDENT CONSULTANT
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 975.00

Date of Receipt 10 / 30 / 2016
Transaction ID : SA11A.459337
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

C. NOBLE, ELIZABETH, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4015 OAK HARBOUR CIR
 City GAINESVILLE State GA Zip Code 30506-3061
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) INDEPENDENT CONSULTANT
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 975.00

Date of Receipt 10 / 30 / 2016
Transaction ID : SA11A.459338
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	100.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2656 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
A. NOBLE, ELIZABETH, , ,

Mailing Address 4015 OAK HARBOUR CIR

City GAINESVILLE	State GA	Zip Code 30506-3061
---------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) SELF EMPLOYED	Occupation (for Individual) INDEPENDENT CONSULTANT
--	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
975.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 30 / 2016

Transaction ID : SA11A.459346

Amount of Each Receipt this Period
100.00

Memo Item
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
B. NOBLE, ELIZABETH, , ,

Mailing Address 4015 OAK HARBOUR CIR

City GAINESVILLE	State GA	Zip Code 30506-3061
---------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) SELF EMPLOYED	Occupation (for Individual) INDEPENDENT CONSULTANT
--	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
975.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 01 / 2016

Transaction ID : SA11A.462636

Amount of Each Receipt this Period
50.00

Memo Item
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
C. NOBLE, ELIZABETH, , ,

Mailing Address 4015 OAK HARBOUR CIR

City GAINESVILLE	State GA	Zip Code 30506-3061
---------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) SELF EMPLOYED	Occupation (for Individual) INDEPENDENT CONSULTANT
--	---

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
975.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 02 / 2016

Transaction ID : SA11A.469420

Amount of Each Receipt this Period
50.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	200.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2657 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
Team Ryan

A. NOBLE, ELIZABETH, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4015 OAK HARBOUR CIR
 City GAINESVILLE State GA Zip Code 30506-3061
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) INDEPENDENT CONSULTANT
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 975.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 11 / 02 / 2016
Transaction ID : SA11A.469433
 Amount of Each Receipt this Period
 50.00
 Memo Item
 CONTRIBUTION

B. NOBLE, ELIZABETH, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4015 OAK HARBOUR CIR
 City GAINESVILLE State GA Zip Code 30506-3061
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) INDEPENDENT CONSULTANT
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 975.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 11 / 04 / 2016
Transaction ID : SA11A.471358
 Amount of Each Receipt this Period
 50.00
 Memo Item
 CONTRIBUTION

C. NOBLE, ROBERT, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 574 N GOWER ST
 City LOS ANGELES State CA Zip Code 90004-1302
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 10 / 26 / 2016
Transaction ID : SA11A.451339
 Amount of Each Receipt this Period
 150.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	250.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2658 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. NOBLE, ROBERT, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 574 N GOWER ST
 City LOS ANGELES State CA Zip Code 90004-1302
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 11 / 07 / 2016
Transaction ID : SA11A.475853
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

B. NOBLE, SUSAN, T., MS.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO BOX 3793
 City HAYDEN State ID Zip Code 83835-5048
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NORTH IDAHO CHRISTIAN SCHOOL Occupation (for Individual) PART TIME TUTOR
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt 10 / 28 / 2016
Transaction ID : SA11A.455596
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

C. NOBREGA, FRED, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1118 SKYLINE DR SW
 City ROCHESTER State MN Zip Code 55902-0950
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 285.00

Date of Receipt 10 / 26 / 2016
Transaction ID : SA11A.450854
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	250.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2659 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
Team Ryan

A. NOBREGA, FRED, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1118 SKYLINE DR SW
 City ROCHESTER State MN Zip Code 55902-0950
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 285.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 26 / 2016
Transaction ID : SA11A.450856
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION

B. NOEL, WALTER, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO BOX 1555
 City GREENWICH State CT Zip Code 06836-1555
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 22 / 2016
Transaction ID : SA11A.446913
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION

C. NOEL, WALTER, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO BOX 1555
 City GREENWICH State CT Zip Code 06836-1555
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 04 / 2016
Transaction ID : SA11A.472368
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	300.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2660 OF 4311
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. NOLAN, DIANA, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 2183 CRESTVIEW DRIVE

City LAGUNA BEACH	State CA	Zip Code 92651-3448
----------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		27		2016

Transaction ID : SA11A.454008

Amount of Each Receipt this Period
50.00

Memo Item CONTRIBUTION

B. NOLAN, LYNN, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 510 EMERALD BAY

City LAGUNA BEACH	State CA	Zip Code 92651-1269
----------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
280.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		26		2016

Transaction ID : SA11A.451421

Amount of Each Receipt this Period
30.00

Memo Item CONTRIBUTION

C. NOLLETTE, STEPHEN, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 505 MAPLE AVE.

City OAKLEY	State KS	Zip Code 67748-1225
----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NOLLETTE FARMS LLC	Occupation (for Individual) FARMER
---	---------------------------------------

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
300.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		26		2016

Transaction ID : SA11A.454449

Amount of Each Receipt this Period
100.00

Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	180.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2661 OF 4311
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
A. NOLLETTE, STEPHEN, , ,

Mailing Address 505 MAPLE AVE.

City OAKLEY	State KS	Zip Code 67748-1225
----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NOLLETTE FARMS LLC	Occupation (for Individual) FARMER
---	---------------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
300.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		26		2016

Transaction ID : SA11A.454450

Amount of Each Receipt this Period
100.00

Memo Item CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
B. NOLLETTE, STEPHEN, , ,

Mailing Address 505 MAPLE AVE.

City OAKLEY	State KS	Zip Code 67748-1225
----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NOLLETTE FARMS LLC	Occupation (for Individual) FARMER
---	---------------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
300.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11		04		2016

Transaction ID : SA11A.470685

Amount of Each Receipt this Period
100.00

Memo Item CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
C. NOLTE, DANIEL, , ,

Mailing Address 96 RED OAK RD

City FAIRFIELD	State CT	Zip Code 06824-1815
-------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
440.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		25		2016

Transaction ID : SA11A.451590

Amount of Each Receipt this Period
30.00

Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	230.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2662 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
Team Ryan

A. NOLTE, DANIEL, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 96 RED OAK RD
 City FAIRFIELD State CT Zip Code 06824-1815
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 440.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 25 / 2016
Transaction ID : SA11A.451594
 Amount of Each Receipt this Period
 30.00
 Memo Item
 CONTRIBUTION

B. NOLTE, DANIEL, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 96 RED OAK RD
 City FAIRFIELD State CT Zip Code 06824-1815
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 440.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 25 / 2016
Transaction ID : SA11A.451595
 Amount of Each Receipt this Period
 30.00
 Memo Item
 CONTRIBUTION

C. NOLTE, JUDITH, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 6505 E ELLIS ST.
 City MESA State AZ Zip Code 85205-6020
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 510.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 27 / 2016
Transaction ID : SA11A.452642
 Amount of Each Receipt this Period
 50.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	110.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2663 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
Team Ryan

A. NOLTE, REBECCA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4103 S BURRELL ST.
 City MILWAUKEE State WI Zip Code 53207-4405
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) W.B. BOTTLE SUPPLY CO. Occupation (for Individual) FACTORY WORKER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 334.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 20 / 2016
Transaction ID : SA11A.444766
 Amount of Each Receipt this Period
 25.00
 Memo Item
 CONTRIBUTION

B. NOLTE, REBECCA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4103 S BURRELL ST.
 City MILWAUKEE State WI Zip Code 53207-4405
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) W.B. BOTTLE SUPPLY CO. Occupation (for Individual) FACTORY WORKER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 334.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 29 / 2016
Transaction ID : SA11A.460402
 Amount of Each Receipt this Period
 50.00
 Memo Item
 CONTRIBUTION

C. NOLTE, REBECCA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4103 S BURRELL ST.
 City MILWAUKEE State WI Zip Code 53207-4405
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) W.B. BOTTLE SUPPLY CO. Occupation (for Individual) FACTORY WORKER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 334.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 07 / 2016
Transaction ID : SA11A.476607
 Amount of Each Receipt this Period
 50.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	125.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2664 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
Team Ryan

A. NOONAN, FRANK, , MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 241 LOCUST AVENUE
 City SAN RAFAEL State CA Zip Code 94901-2240
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SAUL ZAENTZ CO Occupation (for Individual) PRESIDENT
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1050.00

Date of Receipt 11 / 10 / 2016
Transaction ID : SA11A.468234
 Amount of Each Receipt this Period 200.00
 Memo Item CONTRIBUTION

B. NOONAN, PHYLLIS, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 11501 ALBERTA DR.
 City AUSTIN State TX Zip Code 78739-1465
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 10 / 31 / 2016
Transaction ID : SA11A.458593
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

C. NOONAN, PHYLLIS, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 11501 ALBERTA DR.
 City AUSTIN State TX Zip Code 78739-1465
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 10 / 31 / 2016
Transaction ID : SA11A.458600
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	250.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2665 OF 4311		
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14	<input type="checkbox"/> 11c <input type="checkbox"/> 15	<input type="checkbox"/> 12 <input type="checkbox"/> 16

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NAME OF COMMITTEE (In Full)
Team Ryan

A. NORBERG, JOSEPH, E., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 214 LOCHA DRIVE
 City JUPITER State FL Zip Code 33458-7733
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 26 / 2016
Transaction ID : SA11A.450769
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION

B. NORBERG, JOSEPH, E., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 214 LOCHA DRIVE
 City JUPITER State FL Zip Code 33458-7733
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 28 / 2016
Transaction ID : SA11A.456049
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION

C. NOREHAD, MARILYN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2410 FOX MEADOW LANE
 City NORTHFIELD State IL Zip Code 60093-4303
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 350.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 20 / 2016
Transaction ID : SA11A.442314
 Amount of Each Receipt this Period
 250.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	450.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2666 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. NORFLEET, GLENN, D., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 98 BOBWHITE DR
 City MANCHESTER State TN Zip Code 37355-5920
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1675.00

Date of Receipt 10 / 20 / 2016
Transaction ID : SA11A.442270
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

B. NORFLEET, GLENN, D., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 98 BOBWHITE DR
 City MANCHESTER State TN Zip Code 37355-5920
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1675.00

Date of Receipt 10 / 20 / 2016
Transaction ID : SA11A.442283
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

C. NORFLEET, GLENN, D., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 98 BOBWHITE DR
 City MANCHESTER State TN Zip Code 37355-5920
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1675.00

Date of Receipt 10 / 26 / 2016
Transaction ID : SA11A.451045
 Amount of Each Receipt this Period 55.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	255.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2667 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. NORFLEET, GLENN, D., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 98 BOBWHITE DR
 City MANCHESTER State TN Zip Code 37355-5920
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1675.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 01 / 2016
Transaction ID : SA11A.462624
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION

B. NORFLEET, GLENN, D., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 98 BOBWHITE DR
 City MANCHESTER State TN Zip Code 37355-5920
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1675.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 07 / 2016
Transaction ID : SA11A.467871
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION

C. NORFLEET, GLENN, D., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 98 BOBWHITE DR
 City MANCHESTER State TN Zip Code 37355-5920
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1675.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 04 / 2016
Transaction ID : SA11A.471448
 Amount of Each Receipt this Period
 55.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	255.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2668 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
Team Ryan

A. NORMAN, J., , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 716 PRINCE ALSTON CV
 City FLORENCE State SC Zip Code 29501-8055
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 325.00

Date of Receipt 10 / 27 / 2016
Transaction ID : SA11A.456670
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

B. NORMAN, J., , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 716 PRINCE ALSTON CV
 City FLORENCE State SC Zip Code 29501-8055
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 325.00

Date of Receipt 10 / 27 / 2016
Transaction ID : SA11A.456675
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

C. NORMAN, J., , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 716 PRINCE ALSTON CV
 City FLORENCE State SC Zip Code 29501-8055
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 325.00

Date of Receipt 11 / 02 / 2016
Transaction ID : SA11A.469593
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	75.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2669 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. NORMAN, J., , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 716 PRINCE ALSTON CV

City FLORENCE	State SC	Zip Code 29501-8055
------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
325.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	02	/	2016

Transaction ID : SA11A.469630

Amount of Each Receipt this Period
25.00

Memo Item CONTRIBUTION

B. NORMAN, J., , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 716 PRINCE ALSTON CV

City FLORENCE	State SC	Zip Code 29501-8055
------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
325.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	02	/	2016

Transaction ID : SA11A.469633

Amount of Each Receipt this Period
25.00

Memo Item CONTRIBUTION

C. NORQUIST, WARREN, E., MR.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 5000 FAIRBANKS AVENUE 512
APT. 152

City ALEXANDRIA	State VA	Zip Code 22311-1227
--------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	24	/	2016

Transaction ID : SA11A.443864

Amount of Each Receipt this Period
250.00

Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	300.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2670 OF 4311
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. NORQUIST, WARREN, E., MR.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 5000 FAIRBANKS AVENUE 512
APT. 152

City ALEXANDRIA State VA Zip Code 22311-1227

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
500.00

Date of Receipt
10 / 24 / 2016
Transaction ID : SA11A.443884

Amount of Each Receipt this Period
250.00

Memo Item CONTRIBUTION

B. NORRIS, GARY, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 8316 309TH AVENUE SE

City PRESTON State WA Zip Code 98050-

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) GARY A NORTIS Occupation (for Individual) TRAFFIC ENGINEER

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
400.00

Date of Receipt
10 / 25 / 2016
Transaction ID : SA11A.448615

Amount of Each Receipt this Period
50.00

Memo Item CONTRIBUTION

C. NORRIS, GARY, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 8316 309TH AVENUE SE

City PRESTON State WA Zip Code 98050-

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) GARY A NORTIS Occupation (for Individual) TRAFFIC ENGINEER

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
400.00

Date of Receipt
10 / 25 / 2016
Transaction ID : SA11A.448617

Amount of Each Receipt this Period
50.00

Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 350.00

TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2671 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. NORRIS, GARY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 8316 309TH AVENUE SE
 City PRESTON State WA Zip Code 98050-
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) GARY A NORTIS Occupation (for Individual) TRAFFIC ENGINEER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt 10 / 26 / 2016
Transaction ID : SA11A.449886
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

B. NORRIS, GARY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 8316 309TH AVENUE SE
 City PRESTON State WA Zip Code 98050-
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) GARY A NORTIS Occupation (for Individual) TRAFFIC ENGINEER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt 11 / 07 / 2016
Transaction ID : SA11A.475256
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

C. NORRIS, GARY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 8316 309TH AVENUE SE
 City PRESTON State WA Zip Code 98050-
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) GARY A NORTIS Occupation (for Individual) TRAFFIC ENGINEER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt 11 / 07 / 2016
Transaction ID : SA11A.475262
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	150.00
TOTAL This Period (last page this line number only).....	

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2672 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. NORRIS, GARY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 8316 309TH AVENUE SE
 City PRESTON State WA Zip Code 98050-
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) GARY A NORTIS Occupation (for Individual) TRAFFIC ENGINEER
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 400.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 11 / 05 / 2016
Transaction ID : SA11A.478418
 Amount of Each Receipt this Period
 25.00
 Memo Item CONTRIBUTION

B. NORRIS, WILLIAM, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address BOX 146
 City SUN VALLEY State ID Zip Code 83353-0146
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 2000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 10 / 25 / 2016
Transaction ID : SA11A.448842
 Amount of Each Receipt this Period
 250.00
 Memo Item CONTRIBUTION

C. NORRIS, WILLIAM, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address BOX 146
 City SUN VALLEY State ID Zip Code 83353-0146
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 2000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 11 / 04 / 2016
Transaction ID : SA11A.472780
 Amount of Each Receipt this Period
 250.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	525.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2673 OF 4311
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. NORTHROP, RICHARD, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1135 W 4TH AVE

City BROOMFIELD	State CO	Zip Code 80020-2055
--------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
275.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	28	/	2016

Transaction ID : SA11A.456164

Amount of Each Receipt this Period
25.00

Memo Item CONTRIBUTION

B. NORTHROP, RICHARD, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1135 W 4TH AVE

City BROOMFIELD	State CO	Zip Code 80020-2055
--------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
275.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	02	/	2016

Transaction ID : SA11A.469468

Amount of Each Receipt this Period
50.00

Memo Item CONTRIBUTION

C. NORTHROP, RICHARD, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1135 W 4TH AVE

City BROOMFIELD	State CO	Zip Code 80020-2055
--------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
275.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	02	/	2016

Transaction ID : SA11A.469469

Amount of Each Receipt this Period
50.00

Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	125.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2674 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. NORTHROP, RICHARD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1135 W 4TH AVE
 City BROOMFIELD State CO Zip Code 80020-2055
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 275.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 04 / 2016
Transaction ID : SA11A.474218
 Amount of Each Receipt this Period
 25.00
 Memo Item
 CONTRIBUTION

B. NORTH, TEDDY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 16352 MORNINGSIDE DRIVE
 City EDMOND State OK Zip Code 73013-3038
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1550.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 02 / 2016
Transaction ID : SA11A.466284
 Amount of Each Receipt this Period
 250.00
 Memo Item
 CONTRIBUTION

C. NORTH, TEDDY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 16352 MORNINGSIDE DRIVE
 City EDMOND State OK Zip Code 73013-3038
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1550.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 04 / 2016
Transaction ID : SA11A.470447
 Amount of Each Receipt this Period
 250.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	525.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2675 OF 4311
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. NORTH, TEDDY, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 16352 MORNINGSIDE DRIVE

City EDMOND	State OK	Zip Code 73013-3038
----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1550.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	06	/	2016

Transaction ID : SA11A.478237

Amount of Each Receipt this Period
100.00

Memo Item CONTRIBUTION

B. NORTON, JAY, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 1414 KENT ST

City LUBBOCK	State TX	Zip Code 79403-1405
-----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NORTON ENERGY	Occupation (for Individual) CONTRACTOR
--	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	20	/	2016

Transaction ID : SA11A.444823

Amount of Each Receipt this Period
250.00

Memo Item CONTRIBUTION

C. NORTON, MICHELE, , MRS.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 871 COUNTRY CLUB DRIVE

City CINCINNATI	State OH	Zip Code 45245-2833
--------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
400.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	31	/	2016

Transaction ID : SA11A.458460

Amount of Each Receipt this Period
100.00

Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	450.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2676 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. NORTON, MICHELE, , MRS.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 871 COUNTRY CLUB DRIVE
 City CINCINNATI State OH Zip Code 45245-2833
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt 10 / 30 / 2016
Transaction ID : SA11A.464842
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

B. NORTON, MIKI, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2428 PELHAM DRIVE
 City HOUSTON State TX Zip Code 77019-3420
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) PHYSICIAN
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 11 / 08 / 2016
Transaction ID : SA11A.467942
 Amount of Each Receipt this Period 500.00
 Memo Item CONTRIBUTION

C. NOTO, JOSEPH, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 38 SMITHFIELD RD
 City WALDWICK State NJ Zip Code 07463-1413
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) ATTORNEY
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 460.00

Date of Receipt 10 / 25 / 2016
Transaction ID : SA11A.448580
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	650.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2677 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
-----------------------------	-----------------------------	-----------------------------

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NAME OF COMMITTEE (In Full)
Team Ryan

A. NOTO, JOSEPH, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 38 SMITHFIELD RD
 City WALDWICK State NJ Zip Code 07463-1413
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) ATTORNEY
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 460.00

Date of Receipt 10 / 25 / 2016
Transaction ID : SA11A.448593
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

B. NOTO, JOSEPH, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 38 SMITHFIELD RD
 City WALDWICK State NJ Zip Code 07463-1413
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) ATTORNEY
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 460.00

Date of Receipt 10 / 31 / 2016
Transaction ID : SA11A.457906
 Amount of Each Receipt this Period 30.00
 Memo Item CONTRIBUTION

C. NOTO, JOSEPH, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 38 SMITHFIELD RD
 City WALDWICK State NJ Zip Code 07463-1413
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) ATTORNEY
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 460.00

Date of Receipt 10 / 31 / 2016
Transaction ID : SA11A.457909
 Amount of Each Receipt this Period 30.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	110.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2678 OF 4311
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. NOVAK, PERO, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 9310 AMBERWOOD DR.

City KIRTLAND	State OH	Zip Code 44094-8634
------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
600.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		26		2016

Transaction ID : SA11A.451095

Amount of Each Receipt this Period
100.00

Memo Item
CONTRIBUTION

B. NOVAK, PERO, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 9310 AMBERWOOD DR.

City KIRTLAND	State OH	Zip Code 44094-8634
------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
600.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11		04		2016

Transaction ID : SA11A.471426

Amount of Each Receipt this Period
100.00

Memo Item
CONTRIBUTION

C. NOVOGRADAC, MICHAEL, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 244 GLORIETTA BLVD

City ORINDA	State CA	Zip Code 94563-3547
----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NOVOGRADAC & COMPANY LLP	Occupation (for Individual) MANAGING PARTNER
---	---

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
24000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		27		2016

Transaction ID : SA11A.452792

Amount of Each Receipt this Period
12000.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	12200.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2679 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. NOWAK, RUSSELL, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2677 DUTCHMAN RD.
 City GREEN BAY State WI Zip Code 54311-9660
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) D&S MACHINE SERVICE,INC. Occupation (for Individual) PRESIDENT
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 350.00

Date of Receipt 11 / 01 / 2016
Transaction ID : SA11A.462241
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

B. NOWAK, RUSSELL, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2677 DUTCHMAN RD.
 City GREEN BAY State WI Zip Code 54311-9660
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) D&S MACHINE SERVICE,INC. Occupation (for Individual) PRESIDENT
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 350.00

Date of Receipt 11 / 01 / 2016
Transaction ID : SA11A.462250
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

C. NOYES, RITA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4070 FOUNDERS CLUB DR.
 City SARASOTA State FL Zip Code 34240-1441
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 900.00

Date of Receipt 11 / 04 / 2016
Transaction ID : SA11A.479579
 Amount of Each Receipt this Period 800.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶ 1000.00
TOTAL This Period (last page this line number only).....▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2680 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. NUGENT, PETER, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO BOX 366
 City MORAGA State CA Zip Code 94556-0366
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 23 / 2016
Transaction ID : SA11A.446399
 Amount of Each Receipt this Period
 250.00
 Memo Item
 CONTRIBUTION

B. NULL, KEN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1124 S.W. 64TH ST.
 City OKLAHOMA CITY State OK Zip Code 73139-1310
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 28 / 2016
Transaction ID : SA11A.455899
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION

C. NUMMEDAL, KJELL, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 6936 E SNOWDON ST
 City MESA State AZ Zip Code 85207-6806
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 205.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 24 / 2016
Transaction ID : SA11A.449568
 Amount of Each Receipt this Period
 30.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	380.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2681 OF 4311
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. NUNNS, PATRICK, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 3105 CAMINO CEPILLO NW

City ALBUQUERQUE	State NM	Zip Code 87107-2959
---------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
300.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		21		2016

Transaction ID : SA11A.443544

Amount of Each Receipt this Period
100.00

Memo Item CONTRIBUTION

B. NUNNS, PATRICK, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 3105 CAMINO CEPILLO NW

City ALBUQUERQUE	State NM	Zip Code 87107-2959
---------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
300.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11		08		2016

Transaction ID : SA11A.467965

Amount of Each Receipt this Period
100.00

Memo Item CONTRIBUTION

C. NUTTALL, ROBERT, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 3623 ARBOR POINT CT

City KATY	State TX	Zip Code 77450-5400
--------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		31		2016

Transaction ID : SA11A.464278

Amount of Each Receipt this Period
25.00

Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	225.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2682 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. NUTTALL, ROBERT, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3623 ARBOR POINT CT
 City KATY State TX Zip Code 77450-5400
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 10 / 31 / 2016
Transaction ID : SA11A.464280
 Amount of Each Receipt this Period
 25.00
 Memo Item
 CONTRIBUTION

B. NYSEN, PAUL, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO BOX 1030
 City BONSALL State CA Zip Code 92003-1030
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NETGEAR INC Occupation (for Individual) ENGINEER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 11 / 01 / 2016
Transaction ID : SA11A.462778
 Amount of Each Receipt this Period
 250.00
 Memo Item
 CONTRIBUTION

C. O'BERRY, CARL, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 10159 N 119TH PLACE
 City SCOTTSDALE State AZ Zip Code 85259-5075
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 1150.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 11 / 07 / 2016
Transaction ID : SA11A.475087
 Amount of Each Receipt this Period
 250.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	525.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2683 OF 4311
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. O'BRIEN, CHARLES, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 517 EWING AVENUE
PO BOX 126

City FRANKLIN LAKES State NJ Zip Code 07417-2402

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
400.00

Date of Receipt
M M M / D D D / Y Y Y Y Y Y
10 / 31 / 2016

Transaction ID : SA11A.457487

Amount of Each Receipt this Period
100.00

Memo Item CONTRIBUTION

B. O'BRIEN, JOSEPH, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 786 WAVERLY HEIGHTS DRIVE

City THOUSAND OAKS State CA Zip Code 91360-5044

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
400.00

Date of Receipt
M M M / D D D / Y Y Y Y Y Y
11 / 01 / 2016

Transaction ID : SA11A.462829

Amount of Each Receipt this Period
100.00

Memo Item CONTRIBUTION

C. O'BRIEN, PATRICK, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 4240 GALT OCEAN DRIVE
UNIT 1801

City FORT LAUDERDALE State FL Zip Code 33308-6179

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) PATRICK T. O'BRIEN PA Occupation (for Individual) ATTORNEY

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
2000.00

Date of Receipt
M M M / D D D / Y Y Y Y Y Y
10 / 31 / 2016

Transaction ID : SA11A.459063

Amount of Each Receipt this Period
1000.00

Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 1200.00

TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2684 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. O'BRIEN, PATRICIA, M., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 535 E 86TH STREET APT 20D
 APT 20D
 City NEW YORK State NY Zip Code 10028-7533
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 1250.00

Date of Receipt
 11 / 03 / 2016
Transaction ID : SA11A.465373
 Amount of Each Receipt this Period
 750.00
 Memo Item
 CONTRIBUTION

B. O'BRIEN, THOMAS, L., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 63 BANK STREET
 City NEW CANAAN State CT Zip Code 06840-6203
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 225.00

Date of Receipt
 11 / 08 / 2016
Transaction ID : SA11A.468010
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION

C. O'DELL, JOHN, F., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3442 AMMA ROAD
 City AMMA State WV Zip Code 25005-9540
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) GENERAL PIPELINE
 Receipt For:
 Primary General
 Other (specify)
 Aggregate Year-to-Date ▼
 2500.00

Date of Receipt
 10 / 21 / 2016
Transaction ID : SA11A.443593
 Amount of Each Receipt this Period
 500.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	1350.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2685 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
Team Ryan

A. O'DELL, JOHN, F., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3442 AMMA ROAD
 City AMMA State WV Zip Code 25005-9540
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) GENERAL PIPELINE
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 2500.00

Date of Receipt
 11 / 04 / 2016
Transaction ID : SA11A.467447
 Amount of Each Receipt this Period
 1000.00
 Memo Item
 CONTRIBUTION

B. O'DONNELL, GERMAINE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3421 SO.HENNEPIN ST.
 City SIOUX CITY State IA Zip Code 51106-4419
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1001.00

Date of Receipt
 10 / 24 / 2016
Transaction ID : SA11A.449116
 Amount of Each Receipt this Period
 50.00
 Memo Item
 CONTRIBUTION

C. O'DONNELL, GERMAINE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3421 SO.HENNEPIN ST.
 City SIOUX CITY State IA Zip Code 51106-4419
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1001.00

Date of Receipt
 10 / 24 / 2016
Transaction ID : SA11A.449118
 Amount of Each Receipt this Period
 50.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	1100.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2686 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. O'DONNELL, GERMAINE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3421 SO.HENNEPIN ST.
 City SIOUX CITY State IA Zip Code 51106-4419
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1001.00

Date of Receipt 11 / 08 / 2016
Transaction ID : SA11A.479813
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

B. O'DONNELL, GERMAINE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3421 SO.HENNEPIN ST.
 City SIOUX CITY State IA Zip Code 51106-4419
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1001.00

Date of Receipt 11 / 08 / 2016
Transaction ID : SA11A.479814
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

C. O'DONNELL, JOHN, S., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 13 DOWNER DR
 City HAMPTON State NH Zip Code 03842-1552
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 825.00

Date of Receipt 10 / 26 / 2016
Transaction ID : SA11A.451027
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	150.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2687 OF 4311
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. O'DONNELL, JOHN, S., MR.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 13 DOWNER DR

City HAMPTON	State NH	Zip Code 03842-1552
-----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
825.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		31		2016

Transaction ID : SA11A.458074

Amount of Each Receipt this Period
25.00

Memo Item CONTRIBUTION

B. O'DONNELL, JOHN, S., MR.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 13 DOWNER DR

City HAMPTON	State NH	Zip Code 03842-1552
-----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
825.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11		02		2016

Transaction ID : SA11A.465721

Amount of Each Receipt this Period
25.00

Memo Item CONTRIBUTION

C. O'DONNELL, JOHN, S., MR.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 13 DOWNER DR

City HAMPTON	State NH	Zip Code 03842-1552
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
825.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11		04		2016

Transaction ID : SA11A.471754

Amount of Each Receipt this Period
50.00

Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	100.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2688 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. O'DROBINAK, CHARLES, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 222 E. 70TH ST.
 City INDIANAPOLIS State IN Zip Code 46220-1004
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 375.00

Date of Receipt 10 / 20 / 2016
Transaction ID : SA11A.442341
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

B. O'DROBINAK, CHARLES, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 222 E. 70TH ST.
 City INDIANAPOLIS State IN Zip Code 46220-1004
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 375.00

Date of Receipt 10 / 31 / 2016
Transaction ID : SA11A.464820
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

C. O'GRADY, THOMAS, A., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 145 POQUITO RD
 City SHALIMAR State FL Zip Code 32579-1125
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 485.00

Date of Receipt 10 / 26 / 2016
Transaction ID : SA11A.450556
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶ 150.00
TOTAL This Period (last page this line number only).....▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2689 OF 4311
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. O'GRADY, THOMAS, A., MR.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 145 POQUITO RD

City SHALIMAR	State FL	Zip Code 32579-1125
------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
485.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		31		2016

Transaction ID : SA11A.458489

Amount of Each Receipt this Period
25.00

Memo Item
CONTRIBUTION

B. O'GRADY, THOMAS, A., MR.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 145 POQUITO RD

City SHALIMAR	State FL	Zip Code 32579-1125
------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
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Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
485.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		29		2016

Transaction ID : SA11A.460620

Amount of Each Receipt this Period
15.00

Memo Item
CONTRIBUTION

C. O'GRADY, THOMAS, A., MR.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 145 POQUITO RD

City SHALIMAR	State FL	Zip Code 32579-1125
------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
485.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11		01		2016

Transaction ID : SA11A.462396

Amount of Each Receipt this Period
25.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	65.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2690 OF 4311
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
O'GRADY, THOMAS, A., MR.,

Mailing Address 145 POQUITO RD

City SHALIMAR	State FL	Zip Code 32579-1125
------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
485.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11		01		2016

Transaction ID : SA11A.462411

Amount of Each Receipt this Period
25.00

Memo Item CONTRIBUTION

B. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
O'GRADY, THOMAS, A., MR.,

Mailing Address 145 POQUITO RD

City SHALIMAR	State FL	Zip Code 32579-1125
------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
485.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11		03		2016

Transaction ID : SA11A.468556

Amount of Each Receipt this Period
25.00

Memo Item CONTRIBUTION

C. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
O'GRADY, THOMAS, A., MR.,

Mailing Address 145 POQUITO RD

City SHALIMAR	State FL	Zip Code 32579-1125
------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
485.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11		04		2016

Transaction ID : SA11A.479458

Amount of Each Receipt this Period
25.00

Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	75.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2691 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. O'LEARY, DAVID, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1815 E GREEN SPRINGS ROAD
 City LOUISA State VA Zip Code 23093-4655
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 04 / 2016
Transaction ID : SA11A.467515
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION

B. O'LEARY, G, MICHAEL, MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 600 TRAVIS 4200 JPMORGAN CHASE TOW
 City HOUSTON State TX Zip Code 77002-3009
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) ANDREWS KURTH Occupation (for Individual) ATTORNEY
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1070.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 28 / 2016
Transaction ID : SA11A.461425
 Amount of Each Receipt this Period
 50.00
 Memo Item
 CONTRIBUTION

C. O'LEARY, G, MICHAEL, MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 600 TRAVIS 4200 JPMORGAN CHASE TOW
 City HOUSTON State TX Zip Code 77002-3009
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) ANDREWS KURTH Occupation (for Individual) ATTORNEY
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 1070.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 02 / 2016
Transaction ID : SA11A.466387
 Amount of Each Receipt this Period
 50.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	200.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2692 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
Team Ryan

A. O'LEARY, G, MICHAEL, MR.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 600 TRAVIS 4200 JPMORGAN CHASE TOW

City HOUSTON	State TX	Zip Code 77002-3009
-----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) ANDREWS KURTH	Occupation (for Individual) ATTORNEY
--	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1070.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	04	/	2016

Transaction ID : SA11A.474193

Amount of Each Receipt this Period
50.00

Memo Item CONTRIBUTION

B. O'LEARY, G, MICHAEL, MR.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 600 TRAVIS 4200 JPMORGAN CHASE TOW

City HOUSTON	State TX	Zip Code 77002-3009
-----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) ANDREWS KURTH	Occupation (for Individual) ATTORNEY
--	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1070.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	07	/	2016

Transaction ID : SA11A.480503

Amount of Each Receipt this Period
50.00

Memo Item CONTRIBUTION

C. O'MALLEY, SHEILA, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 44 COCOANUT ROW
B119

City PALM BEACH	State FL	Zip Code 33480-4069
--------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
350.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	04	/	2016

Transaction ID : SA11A.472815

Amount of Each Receipt this Period
50.00

Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	150.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2693 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. O'NEILL, DON, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 8787 BAY COLONY DR
 902
 City NAPLES State FL Zip Code 34108-0779
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 1100.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 30 / 2016
Transaction ID : SA11A.460303
 Amount of Each Receipt this Period
 500.00
 Memo Item
 CONTRIBUTION

B. O'NEIL, GORDON, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2457 LEXINGTON CIR.
 City SALT LAKE CITY State UT Zip Code 84124-1889
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 750.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 26 / 2016
Transaction ID : SA11A.451417
 Amount of Each Receipt this Period
 250.00
 Memo Item
 CONTRIBUTION

C. O'NEIL, GORDON, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2457 LEXINGTON CIR.
 City SALT LAKE CITY State UT Zip Code 84124-1889
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For:
 Primary General
 Other (specify)
 Aggregate Year-to-Date ▼
 750.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 04 / 2016
Transaction ID : SA11A.470703
 Amount of Each Receipt this Period
 250.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶ 1000.00
TOTAL This Period (last page this line number only).....▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2694 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. O'NEIL, GORDON, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2457 LEXINGTON CIR.
 City SALT LAKE CITY State UT Zip Code 84124-1889
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 750.00

Date of Receipt 11 / 07 / 2016
Transaction ID : SA11A.475300
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

B. O'NEIL, R, W., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1374 HARVEST ROAD
 City PLEASANTON State CA Zip Code 94566-6047
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 450.00

Date of Receipt 10 / 31 / 2016
Transaction ID : SA11A.457253
 Amount of Each Receipt this Period 200.00
 Memo Item CONTRIBUTION

C. OAKES, ELEANOR, H., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2423 SHERWOOD ROAD
 City SAN MARINO State CA Zip Code 91108-2843
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 11 / 01 / 2016
Transaction ID : SA11A.461753
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	550.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2695 OF 4311
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. OBAMA, BOB, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 2600 BEAUMONT

City GREEN BAY	State WI	Zip Code 54301-2928
-------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
700.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	22	/	2016

Transaction ID : SA11A.446979

Amount of Each Receipt this Period
100.00

Memo Item CONTRIBUTION

B. OBAMA, BOB, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 2600 BEAUMONT

City GREEN BAY	State WI	Zip Code 54301-2928
-------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
700.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	04	/	2016

Transaction ID : SA11A.472712

Amount of Each Receipt this Period
100.00

Memo Item CONTRIBUTION

C. OBRIEN SR, ROBERT, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address PO 30477

City SEA ISLAND	State GA	Zip Code 31561-
--------------------	-------------	--------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
350.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	29	/	2016

Transaction ID : SA11A.460499

Amount of Each Receipt this Period
100.00

Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	300.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2696 OF 4311
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
A. OCALLAGHAN, WILLIAM, , ,

Mailing Address **PO BOX3812**

City CLEARWATER	State FL	Zip Code 33767-8812
---------------------------	--------------------	-------------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) FAE HOLDINGS INC	Occupation (for Individual) INVESTMENT BANKER
--	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
500.00

Date of Receipt
10 / 30 / 2016

Transaction ID : SA11A.460264

Amount of Each Receipt this Period
75.00

Memo Item
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
B. OCALLAGHAN, WILLIAM, , ,

Mailing Address **PO BOX3812**

City CLEARWATER	State FL	Zip Code 33767-8812
---------------------------	--------------------	-------------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) FAE HOLDINGS INC	Occupation (for Individual) INVESTMENT BANKER
--	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
500.00

Date of Receipt
11 / 04 / 2016

Transaction ID : SA11A.470841

Amount of Each Receipt this Period
75.00

Memo Item
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
C. OCONNELL, DIANE, , ,

Mailing Address **2204 DULANY TERRACE**

City WESTMINSTER	State MD	Zip Code 21157-7706
----------------------------	--------------------	-------------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
--	---

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
252.00

Date of Receipt
10 / 20 / 2016

Transaction ID : SA11A.442239

Amount of Each Receipt this Period
40.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	190.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2697 OF 4311
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. O'CONNELL, DIANE, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 2204 DULANY TERRACE

City WESTMINSTER	State MD	Zip Code 21157-7706
---------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
252.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		25		2016

Transaction ID : SA11A.451659

Amount of Each Receipt this Period
30.00

Memo Item CONTRIBUTION

B. O'CONNELL, DIANE, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 2204 DULANY TERRACE

City WESTMINSTER	State MD	Zip Code 21157-7706
---------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
252.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11		04		2016

Transaction ID : SA11A.479372

Amount of Each Receipt this Period
25.00

Memo Item CONTRIBUTION

C. O'CONNELL, RICHARD, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 724 N FRANKLIN DR

City FAYETTEVILLE	State AR	Zip Code 72701-3803
----------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
305.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		25		2016

Transaction ID : SA11A.448689

Amount of Each Receipt this Period
50.00

Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	105.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2698 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. ODLAND, LYNN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5 OWLSWOOD ROAD
 City TIBURON State CA Zip Code 94920-1548
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 350.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 11 / 06 / 2016
Transaction ID : SA11A.477715
 Amount of Each Receipt this Period
 100.00
 Memo Item CONTRIBUTION

B. ODMAN, ROY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 16443 CRAIG DRIVE
 City OAK FOREST State IL Zip Code 60452-4340
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 260.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 10 / 26 / 2016
Transaction ID : SA11A.449761
 Amount of Each Receipt this Period
 30.00
 Memo Item CONTRIBUTION

C. ODMAN, ROY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 16443 CRAIG DRIVE
 City OAK FOREST State IL Zip Code 60452-4340
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 260.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 10 / 26 / 2016
Transaction ID : SA11A.449800
 Amount of Each Receipt this Period
 30.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	160.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2699 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. ODUM, FREIDA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1 MYRTLEWOOD DR
 City SAVANNAH State GA Zip Code 31405-1084
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 760.00

Date of Receipt 10 / 24 / 2016
Transaction ID : SA11A.445782
 Amount of Each Receipt this Period 30.00
 Memo Item CONTRIBUTION

B. ODUM, FREIDA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1 MYRTLEWOOD DR
 City SAVANNAH State GA Zip Code 31405-1084
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 760.00

Date of Receipt 10 / 24 / 2016
Transaction ID : SA11A.445785
 Amount of Each Receipt this Period 30.00
 Memo Item CONTRIBUTION

C. ODUM, FREIDA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1 MYRTLEWOOD DR
 City SAVANNAH State GA Zip Code 31405-1084
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 760.00

Date of Receipt 11 / 01 / 2016
Transaction ID : SA11A.462618
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	85.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2700 OF 4311
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. ODUM, FREIDA, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1 MYRTLEWOOD DR

City SAVANNAH	State GA	Zip Code 31405-1084
------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
760.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	01	/	2016

Transaction ID : SA11A.462619

Amount of Each Receipt this Period
25.00

Memo Item
CONTRIBUTION

B. OERTLE, CLEDA, A., ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 108 N STEPHENS STREET

City PONCA CITY	State OK	Zip Code 74601-3533
--------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
600.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	04	/	2016

Transaction ID : SA11A.467615

Amount of Each Receipt this Period
200.00

Memo Item
CONTRIBUTION

C. OERTLI, JAY, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 4444 S. EAGLE CIRCLE

City AURORA	State CO	Zip Code 80015-1313
----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) HOPE COMMUNITY CHURCH	Occupation (for Individual) MINISTER
--	---

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
223.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	04	/	2016

Transaction ID : SA11A.473618

Amount of Each Receipt this Period
100.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	325.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2701 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. OGDEN, JANE, A., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 6921 ECHO BLUFF
 City DALLAS State TX Zip Code 75248-2903
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt 10 / 24 / 2016
Transaction ID : SA11A.443921
 Amount of Each Receipt this Period 200.00
 Memo Item CONTRIBUTION

B. OGDEN, SALLY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 81 WILLOW BROOK RD NULL
 City CLINTON CORNERS State NY Zip Code 12514-2522
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 550.00

Date of Receipt 10 / 25 / 2016
Transaction ID : SA11A.451483
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

C. OGDEN, SALLY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 81 WILLOW BROOK RD NULL
 City CLINTON CORNERS State NY Zip Code 12514-2522
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 550.00

Date of Receipt 11 / 04 / 2016
Transaction ID : SA11A.474069
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	400.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2702 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. OHARA, PETER, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 21 CAMELOT LANE
 City ST JAMES State NY Zip Code 11780-3103
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 675.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 22 / 2016
Transaction ID : SA11A.446853
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION

B. OHARA, PETER, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 21 CAMELOT LANE
 City ST JAMES State NY Zip Code 11780-3103
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 675.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 25 / 2016
Transaction ID : SA11A.448053
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION

C. OHARA, PETER, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 21 CAMELOT LANE
 City ST JAMES State NY Zip Code 11780-3103
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 675.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 25 / 2016
Transaction ID : SA11A.448058
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	300.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2703 OF 4311
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. OHARA, PETER, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 21 CAMELOT LANE

City ST JAMES	State NY	Zip Code 11780-3103
------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
675.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	25	/	2016

Transaction ID : SA11A.448060

Amount of Each Receipt this Period
100.00

Memo Item
CONTRIBUTION

B. OHARA, PETER, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 21 CAMELOT LANE

City ST JAMES	State NY	Zip Code 11780-3103
------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
675.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	04	/	2016

Transaction ID : SA11A.470844

Amount of Each Receipt this Period
100.00

Memo Item
CONTRIBUTION

C. OIEN, KATHLEEN, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 14114 VILLAGE 14

City CAMARILLO	State CA	Zip Code 93012-7014
-------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
1097.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	24	/	2016

Transaction ID : SA11A.445948

Amount of Each Receipt this Period
25.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	225.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2704 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
Team Ryan

A. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
OIEN, KATHLEEN, , ,

Mailing Address 14114 VILLAGE 14

City CAMARILLO	State CA	Zip Code 93012-7014
-------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1097.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 25 / 2016

Transaction ID : SA11A.448081

Amount of Each Receipt this Period
30.00

Memo Item
CONTRIBUTION

B. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
OIEN, KATHLEEN, , ,

Mailing Address 14114 VILLAGE 14

City CAMARILLO	State CA	Zip Code 93012-7014
-------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1097.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 25 / 2016

Transaction ID : SA11A.448087

Amount of Each Receipt this Period
30.00

Memo Item
CONTRIBUTION

C. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
OIEN, KATHLEEN, , ,

Mailing Address 14114 VILLAGE 14

City CAMARILLO	State CA	Zip Code 93012-7014
-------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
1097.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 24 / 2016

Transaction ID : SA11A.449261

Amount of Each Receipt this Period
25.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	85.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2705 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
Team Ryan

A. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
OIEN, KATHLEEN, , ,

Mailing Address 14114 VILLAGE 14

City CAMARILLO	State CA	Zip Code 93012-7014
-------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1097.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 24 / 2016

Transaction ID : SA11A.449262

Amount of Each Receipt this Period
25.00

Memo Item
CONTRIBUTION

B. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
OIEN, KATHLEEN, , ,

Mailing Address 14114 VILLAGE 14

City CAMARILLO	State CA	Zip Code 93012-7014
-------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1097.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 26 / 2016

Transaction ID : SA11A.450396

Amount of Each Receipt this Period
25.00

Memo Item
CONTRIBUTION

C. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
OIEN, KATHLEEN, , ,

Mailing Address 14114 VILLAGE 14

City CAMARILLO	State CA	Zip Code 93012-7014
-------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
1097.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 31 / 2016

Transaction ID : SA11A.458108

Amount of Each Receipt this Period
50.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	100.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2706 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
OIEN, KATHLEEN, , ,

Mailing Address 14114 VILLAGE 14

City CAMARILLO	State CA	Zip Code 93012-7014
-------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1097.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 30 / 2016

Transaction ID : SA11A.459358

Amount of Each Receipt this Period
50.00

Memo Item
CONTRIBUTION

B. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
OIEN, KATHLEEN, , ,

Mailing Address 14114 VILLAGE 14

City CAMARILLO	State CA	Zip Code 93012-7014
-------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1097.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 01 / 2016

Transaction ID : SA11A.462431

Amount of Each Receipt this Period
50.00

Memo Item
CONTRIBUTION

C. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
OIEN, KATHLEEN, , ,

Mailing Address 14114 VILLAGE 14

City CAMARILLO	State CA	Zip Code 93012-7014
-------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
1097.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 02 / 2016

Transaction ID : SA11A.469750

Amount of Each Receipt this Period
50.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	150.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 2707 OF 4311
	(check only one)
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
<input type="checkbox"/> 13	<input type="checkbox"/> 14
<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/>	<input type="checkbox"/> 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
Team Ryan

A. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
OIEN, KATHLEEN, , ,

Mailing Address 14114 VILLAGE 14

City CAMARILLO	State CA	Zip Code 93012-7014
-------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1097.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	02	/	2016

Transaction ID : SA11A.469753

Amount of Each Receipt this Period
50.00

Memo Item
CONTRIBUTION

B. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
OIEN, KATHLEEN, , ,

Mailing Address 14114 VILLAGE 14

City CAMARILLO	State CA	Zip Code 93012-7014
-------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1097.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	04	/	2016

Transaction ID : SA11A.470893

Amount of Each Receipt this Period
30.00

Memo Item
CONTRIBUTION

C. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
OIEN, KATHLEEN, , ,

Mailing Address 14114 VILLAGE 14

City CAMARILLO	State CA	Zip Code 93012-7014
-------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
1097.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	04	/	2016

Transaction ID : SA11A.470966

Amount of Each Receipt this Period
25.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	105.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2708 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
OIEN, KATHLEEN, , ,

Mailing Address 14114 VILLAGE 14

City CAMARILLO	State CA	Zip Code 93012-7014
-------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1097.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 06 / 2016

Transaction ID : SA11A.478290

Amount of Each Receipt this Period
50.00

Memo Item
CONTRIBUTION

B. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
OIEN, KATHLEEN, , ,

Mailing Address 14114 VILLAGE 14

City CAMARILLO	State CA	Zip Code 93012-7014
-------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1097.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 05 / 2016

Transaction ID : SA11A.478582

Amount of Each Receipt this Period
50.00

Memo Item
CONTRIBUTION

C. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
OIEN, KATHLEEN, , ,

Mailing Address 14114 VILLAGE 14

City CAMARILLO	State CA	Zip Code 93012-7014
-------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
1097.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 08 / 2016

Transaction ID : SA11A.479865

Amount of Each Receipt this Period
50.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	150.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2709 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
OLAH, JUDITH, , ,

Mailing Address **2252 GLOAMING WAY**

City BEVERLY HILLS	State CA	Zip Code 90210-1717
------------------------------	--------------------	-------------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
--	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
555.00

Date of Receipt
10 / 22 / 2016

Transaction ID : SA11A.446804

Amount of Each Receipt this Period
50.00

Memo Item
CONTRIBUTION

B. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
OLAH, JUDITH, , ,

Mailing Address **2252 GLOAMING WAY**

City BEVERLY HILLS	State CA	Zip Code 90210-1717
------------------------------	--------------------	-------------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
--	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
555.00

Date of Receipt
10 / 31 / 2016

Transaction ID : SA11A.463382

Amount of Each Receipt this Period
25.00

Memo Item
CONTRIBUTION

C. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
OLAH, JUDITH, , ,

Mailing Address **2252 GLOAMING WAY**

City BEVERLY HILLS	State CA	Zip Code 90210-1717
------------------------------	--------------------	-------------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
--	---

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
555.00

Date of Receipt
10 / 31 / 2016

Transaction ID : SA11A.463384

Amount of Each Receipt this Period
25.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	100.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2710 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. OLANDER, RICHARD, R., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1742 N FITZGERALD LANE
 City HANFORD State CA Zip Code 93230-7901
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 04 / 2016
Transaction ID : SA11A.467584
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION

B. OLEARY, PATRICK, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1015 MADISON AVE 4TH FLR
 City NEW YORK State NY Zip Code 10075-0283
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) SURGEON
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 2500.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 31 / 2016
Transaction ID : SA11A.459031
 Amount of Each Receipt this Period
 2500.00
 Memo Item
 CONTRIBUTION

C. OLIVER, C, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1209 COUNTRY RIDGE DR
 City RALEIGH State NC Zip Code 27609-5424
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) PTE Occupation (for Individual) MANUFACTURING
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 02 / 2016
Transaction ID : SA11A.469652
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	2700.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2711 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
Team Ryan

A. OLIVER, C, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1209 COUNTRY RIDGE DR
 City RALEIGH State NC Zip Code 27609-5424
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) PTE Occupation (for Individual) MANUFACTURING
 Receipt For: Primary General Other (specify) Aggregate Year-to-Date 400.00

Date of Receipt 11 / 07 / 2016
Transaction ID : SA11A.475201
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

B. OLIVER, DAVID, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4606 W. ALABAMA ST.
 City HOUSTON State TX Zip Code 77027-4702
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) ALLEN BOONE HUMPHRIES ROBINSON LLP Occupation (for Individual) ATTORNEY
 Receipt For: Primary General Other (specify) Aggregate Year-to-Date 1250.00

Date of Receipt 10 / 20 / 2016
Transaction ID : SA11A.442642
 Amount of Each Receipt this Period 1000.00
 Memo Item CONTRIBUTION

C. OLIVE, JERREL, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1024 WILBON RD
 City FUQUAY VARINA State NC Zip Code 27526-8261
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) Aggregate Year-to-Date 400.00

Date of Receipt 11 / 04 / 2016
Transaction ID : SA11A.471034
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	1200.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2712 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. OLSEN, BYRON, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 567 SUDBURY ROAD
 City STOW State MA Zip Code 01775-1569
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) MONSANTO Occupation (for Individual) ATTORNEY
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 01 / 2016
Transaction ID : SA11A.462901
 Amount of Each Receipt this Period
 250.00
 Memo Item
 CONTRIBUTION

B. OLSEN, DENNIS, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1055 DOGWOOD LOOP
 City LINCOLN State CA Zip Code 95648-8310
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 28 / 2016
Transaction ID : SA11A.45254
 Amount of Each Receipt this Period
 50.00
 Memo Item
 CONTRIBUTION

C. OLSEN, DENNIS, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1055 DOGWOOD LOOP
 City LINCOLN State CA Zip Code 95648-8310
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 28 / 2016
Transaction ID : SA11A.455264
 Amount of Each Receipt this Period
 50.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	350.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2713 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. OLSEN, DENNIS, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1055 DOGWOOD LOOP
 City LINCOLN State CA Zip Code 95648-8310
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt **11 / 04 / 2016**
Transaction ID : SA11A.473907
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

B. OLSEN, DOROTHY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1001 S KEYSTONE AVE HOUSE
 City CLEARWATER State FL Zip Code 33756-4557
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 312.00

Date of Receipt **10 / 31 / 2016**
Transaction ID : SA11A.458924
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

C. OLSEN, DOROTHY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1001 S KEYSTONE AVE HOUSE
 City CLEARWATER State FL Zip Code 33756-4557
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 312.00

Date of Receipt **11 / 02 / 2016**
Transaction ID : SA11A.466307
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶ 150.00
TOTAL This Period (last page this line number only).....▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2714 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name A. OLSEN, DOROTHY, , ,		Date of Receipt MM / DD / YYYY 11 / 03 / 2016 Transaction ID : SA11A.468752
Mailing Address 1001 S KEYSTONE AVE HOUSE		Amount of Each Receipt this Period 30.00
City CLEARWATER	State FL	Zip Code 33756-4557
FEC ID number of contributing federal political committee. C		<input type="checkbox"/> Memo Item CONTRIBUTION
Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 312.00	

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name B. OLSEN JR, KENNETH, , ,		Date of Receipt MM / DD / YYYY 10 / 20 / 2016 Transaction ID : SA11A.442442
Mailing Address 6 COPPERBEECH PLACE		Amount of Each Receipt this Period 100.00
City MERRICK	State NY	Zip Code 11566-3225
FEC ID number of contributing federal political committee. C		<input type="checkbox"/> Memo Item CONTRIBUTION
Name of Employer (for Individual) KDL SERVICES, INC	Occupation (for Individual) BUSINESS OWNER	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00	

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name C. OLSEN JR, KENNETH, , ,		Date of Receipt MM / DD / YYYY 11 / 04 / 2016 Transaction ID : SA11A.473558
Mailing Address 6 COPPERBEECH PLACE		Amount of Each Receipt this Period 100.00
City MERRICK	State NY	Zip Code 11566-3225
FEC ID number of contributing federal political committee. C		<input type="checkbox"/> Memo Item CONTRIBUTION
Name of Employer (for Individual) KDL SERVICES, INC	Occupation (for Individual) BUSINESS OWNER	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Aggregate Year-to-Date ▼ 500.00	

SUBTOTAL of Receipts This Page (optional).....▶	230.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2715 OF 4311
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. OLSHAUSEN, RICHARD, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1316 CIRCLE WAY

City LAGUNA BEACH	State CA	Zip Code 92651-1305
----------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
416.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	28	/	2016

Transaction ID : SA11A.461299

Amount of Each Receipt this Period
30.00

Memo Item CONTRIBUTION

B. OLSHAUSEN, RICHARD, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1316 CIRCLE WAY

City LAGUNA BEACH	State CA	Zip Code 92651-1305
----------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
416.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	02	/	2016

Transaction ID : SA11A.470043

Amount of Each Receipt this Period
50.00

Memo Item CONTRIBUTION

C. OLSON, HOWARD, H., MR.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 609 BRISTOL PLACE

City MURRELLS INLET	State SC	Zip Code 29576-7550
------------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	20	/	2016

Transaction ID : SA11A.444850

Amount of Each Receipt this Period
100.00

Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	180.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2716 OF 4311		
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14	<input type="checkbox"/> 11c <input type="checkbox"/> 15	<input type="checkbox"/> 12 <input type="checkbox"/> 16

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NAME OF COMMITTEE (In Full)
Team Ryan

A. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
OLSON, JEFFREY, , ,

Mailing Address **945 PARKVIEW DR**

City MARION	State IA	Zip Code 52302-2764
-----------------------	--------------------	-------------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) FAA	Occupation (for Individual) AIR TRAFFIC CONTROLLER
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **900.00**

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	26	/	2016

Transaction ID : SA11A.451135

Amount of Each Receipt this Period

100.00

Memo Item
CONTRIBUTION

B. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
OLSON, JEFFREY, , ,

Mailing Address **945 PARKVIEW DR**

City MARION	State IA	Zip Code 52302-2764
-----------------------	--------------------	-------------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) FAA	Occupation (for Individual) AIR TRAFFIC CONTROLLER
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **900.00**

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	26	/	2016

Transaction ID : SA11A.451137

Amount of Each Receipt this Period

100.00

Memo Item
CONTRIBUTION

C. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
OLSON, JEFFREY, , ,

Mailing Address **945 PARKVIEW DR**

City MARION	State IA	Zip Code 52302-2764
-----------------------	--------------------	-------------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) FAA	Occupation (for Individual) AIR TRAFFIC CONTROLLER
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼ **900.00**

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	31	/	2016

Transaction ID : SA11A.459132

Amount of Each Receipt this Period

100.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	300.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2717 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. OLSON, JEFFREY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 945 PARKVIEW DR
 City MARION State IA Zip Code 52302-2764
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) FAA Occupation (for Individual) AIR TRAFFIC CONTROLLER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 900.00

Date of Receipt **11 / 04 / 2016**
Transaction ID : SA11A.472510
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

B. OLSON, JEFFREY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 945 PARKVIEW DR
 City MARION State IA Zip Code 52302-2764
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) FAA Occupation (for Individual) AIR TRAFFIC CONTROLLER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 900.00

Date of Receipt **11 / 07 / 2016**
Transaction ID : SA11A.475058
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

C. OLSON, JIM, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 7624 OLD BICYCLE RD
 City PANAMA CITY State FL Zip Code 32404-8617
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 260.00

Date of Receipt **10 / 31 / 2016**
Transaction ID : SA11A.464724
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	225.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2718 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. OLSON, JIM, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 7624 OLD BICYCLE RD
 City PANAMA CITY State FL Zip Code 32404-8617
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 260.00

Date of Receipt 10 / 31 / 2016
Transaction ID : SA11A.464734
 Amount of Each Receipt this Period 30.00
 Memo Item CONTRIBUTION

B. OLSON, JIM, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 7624 OLD BICYCLE RD
 City PANAMA CITY State FL Zip Code 32404-8617
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 260.00

Date of Receipt 10 / 31 / 2016
Transaction ID : SA11A.464736
 Amount of Each Receipt this Period 30.00
 Memo Item CONTRIBUTION

C. OLSON, JIM, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 7624 OLD BICYCLE RD
 City PANAMA CITY State FL Zip Code 32404-8617
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 260.00

Date of Receipt 11 / 04 / 2016
Transaction ID : SA11A.473418
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 85.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2719 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. OLSON, LARRY, D., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address N77 W22240 WOODED HILLS DR
 City SUSSEX State WI Zip Code 53089-2148
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 240.00

Date of Receipt 10 / 23 / 2016
Transaction ID : SA11A.446433
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

B. OLSON, LARRY, D., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address N77 W22240 WOODED HILLS DR
 City SUSSEX State WI Zip Code 53089-2148
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 240.00

Date of Receipt 11 / 02 / 2016
Transaction ID : SA11A.469763
 Amount of Each Receipt this Period 40.00
 Memo Item CONTRIBUTION

C. OLSON, LLOYD, E., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3214 PRITCHARD DRIVE
 City RAVI E State WI Zip Code 53406-5412
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 905.00

Date of Receipt 10 / 22 / 2016
Transaction ID : SA11A.446967
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 115.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2720 OF 4311
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. OLSON, LLOYD, E., MR.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 3214 PRITCHARD DRIVE

City RAVI E State WI Zip Code 53406-5412

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 905.00

Date of Receipt 11 / 04 / 2016
Transaction ID : SA11A.471166

Amount of Each Receipt this Period 50.00

Memo Item CONTRIBUTION

B. OLSON, TIMOTHY, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 9401 LOCKWOOD AVENUE

City SKOKIE State IL Zip Code 60077-1141

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 235.00

Date of Receipt 10 / 22 / 2016
Transaction ID : SA11A.446848

Amount of Each Receipt this Period 25.00

Memo Item CONTRIBUTION

C. OLSON, TIMOTHY, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 9401 LOCKWOOD AVENUE

City SKOKIE State IL Zip Code 60077-1141

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED

Receipt For: Primary General Other (specify)

Aggregate Year-to-Date ▼ 235.00

Date of Receipt 10 / 29 / 2016
Transaction ID : SA11A.460886

Amount of Each Receipt this Period 10.00

Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 85.00

TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2721 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. OLSSON, PHILIP, C., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 719 PERIWINKLE WAY
 City SANIBEL State FL Zip Code 33957-3809
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) OLSSON FRANK LUEEDE Occupation (for Individual) ATTORNEY
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt **11 / 28 / 2016**
Transaction ID : SA11A.481108
 Amount of Each Receipt this Period 1000.00
 Memo Item CONTRIBUTION

B. ONDRASIK, VLADIMIR, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 17044 WESTBURY DRIVE
 City GRANADA HILLS State CA Zip Code 91344-1449
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) PRECISION WIRE PRODUCTS Occupation (for Individual) PRESIDENT
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt **11 / 02 / 2016**
Transaction ID : SA11A.465125
 Amount of Each Receipt this Period 1000.00
 Memo Item CONTRIBUTION

C. ONEILL, JOHN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 620 6TH ST NE
 City WASHINGTON State DC Zip Code 20002-5208
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) HARBINGER STRATEGIES Occupation (for Individual) ATTORNEY
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 8500.00

Date of Receipt **11 / 17 / 2016**
Transaction ID : SA11A.468425
 Amount of Each Receipt this Period 2500.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	4500.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2722 OF 4311
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name A. ONEILL, KENNETH, , ,			Date of Receipt
Mailing Address 19 HUNTINGTON RD			<input type="text" value="10"/> / <input type="text" value="31"/> / <input type="text" value="2016"/>
City MILTON	State MA	Zip Code 02186-5311	Transaction ID : SA11A.458192
FEC ID number of contributing federal political committee. <input type="text" value="C"/>			Amount of Each Receipt this Period <input type="text" value="25.00"/>
Name of Employer (for Individual) VNA OF BOSTON, INC		Occupation (for Individual) PHYSICAL THERAPIST	<input type="checkbox"/> Memo Item CONTRIBUTION
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ <input type="text" value="325.00"/>		

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name B. ONEILL, KENNETH, , ,			Date of Receipt
Mailing Address 19 HUNTINGTON RD			<input type="text" value="10"/> / <input type="text" value="30"/> / <input type="text" value="2016"/>
City MILTON	State MA	Zip Code 02186-5311	Transaction ID : SA11A.464889
FEC ID number of contributing federal political committee. <input type="text" value="C"/>			Amount of Each Receipt this Period <input type="text" value="100.00"/>
Name of Employer (for Individual) VNA OF BOSTON, INC		Occupation (for Individual) PHYSICAL THERAPIST	<input type="checkbox"/> Memo Item CONTRIBUTION
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ <input type="text" value="325.00"/>		

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name C. OPPERMANN, MARCIA, E., MS.,			Date of Receipt
Mailing Address 5330 SILVER SPUR AVE.			<input type="text" value="10"/> / <input type="text" value="29"/> / <input type="text" value="2016"/>
City COLORADO SPRINGS	State CO	Zip Code 80915-2424	Transaction ID : SA11A.461206
FEC ID number of contributing federal political committee. <input type="text" value="C"/>			Amount of Each Receipt this Period <input type="text" value="50.00"/>
Name of Employer (for Individual) NONE		Occupation (for Individual) RETIRED	<input type="checkbox"/> Memo Item CONTRIBUTION
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Aggregate Year-to-Date ▼ <input type="text" value="465.00"/>		

SUBTOTAL of Receipts This Page (optional).....▶	<input type="text" value="175.00"/>
TOTAL This Period (last page this line number only).....▶	<input type="text"/>

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2723 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. OPPERMANN, MARCIA, E., MS.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5330 SILVER SPUR AVE.
 City COLORADO SPRINGS State CO Zip Code 80915-2424
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 465.00

Date of Receipt 10 / 29 / 2016
Transaction ID : SA11A.461207
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

B. OPPERMANN, MARCIA, E., MS.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5330 SILVER SPUR AVE.
 City COLORADO SPRINGS State CO Zip Code 80915-2424
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 465.00

Date of Receipt 10 / 29 / 2016
Transaction ID : SA11A.461208
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

C. OPPERMANN, MARCIA, E., MS.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5330 SILVER SPUR AVE.
 City COLORADO SPRINGS State CO Zip Code 80915-2424
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 465.00

Date of Receipt 10 / 29 / 2016
Transaction ID : SA11A.461209
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 150.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2724 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. ORCE, KENNETH, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 22 HEARTHSTONE CIRCLE
 City SCARSDALE State NY Zip Code 10583-1202
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 3850.00

Date of Receipt 10 / 26 / 2016
Transaction ID : SA11A.450884
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

B. ORCE, KENNETH, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 22 HEARTHSTONE CIRCLE
 City SCARSDALE State NY Zip Code 10583-1202
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 3850.00

Date of Receipt 11 / 04 / 2016
Transaction ID : SA11A.472805
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

C. ORDWAY, CHRISTOPHER, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3711 SAN FELIPE ST 15 F
 City HOUSTON State TX Zip Code 77027-4044
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 775.00

Date of Receipt 10 / 24 / 2016
Transaction ID : SA11A.445799
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	400.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2725 OF 4311
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. ORDWAY, CHRISTOPHER, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3711 SAN FELIPE ST
 15 F
 City HOUSTON State TX Zip Code 77027-4044
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 775.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 25 / 2016
Transaction ID : SA11A.451826
 Amount of Each Receipt this Period
 50.00
 Memo Item
 CONTRIBUTION

B. ORDWAY, CHRISTOPHER, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3711 SAN FELIPE ST
 15 F
 City HOUSTON State TX Zip Code 77027-4044
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 775.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 31 / 2016
Transaction ID : SA11A.464520
 Amount of Each Receipt this Period
 50.00
 Memo Item
 CONTRIBUTION

C. ORDWAY, CHRISTOPHER, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3711 SAN FELIPE ST
 15 F
 City HOUSTON State TX Zip Code 77027-4044
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 775.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 30 / 2016
Transaction ID : SA11A.464867
 Amount of Each Receipt this Period
 50.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	150.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2726 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. ORDWAY, CHRISTOPHER, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 3711 SAN FELIPE ST
15 F

City HOUSTON State TX Zip Code 77027-4044

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
775.00

Date of Receipt
11 / 04 / 2016
Transaction ID : SA11A.472023

Amount of Each Receipt this Period
100.00

Memo Item CONTRIBUTION

B. ORDWAY, CHRISTOPHER, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 3711 SAN FELIPE ST
15 F

City HOUSTON State TX Zip Code 77027-4044

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
775.00

Date of Receipt
11 / 04 / 2016
Transaction ID : SA11A.472671

Amount of Each Receipt this Period
50.00

Memo Item CONTRIBUTION

C. ORDWAY, CHRISTOPHER, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 3711 SAN FELIPE ST
15 F

City HOUSTON State TX Zip Code 77027-4044

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
775.00

Date of Receipt
11 / 07 / 2016
Transaction ID : SA11A.474717

Amount of Each Receipt this Period
50.00

Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	200.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2727 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. ORDWAY, CHRISTOPHER, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 3711 SAN FELIPE ST
15 F

City HOUSTON	State TX	Zip Code 77027-4044
-----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
775.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 05 / 2016

Transaction ID : SA11A.478521

Amount of Each Receipt this Period
50.00

Memo Item
CONTRIBUTION

B. ORENDAIN, TOMAS, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 16835 ADDISON ROAD SUITE 100

City ADDISON	State TX	Zip Code 75001-5127
-----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) TOMAS S ORENDAIN	Occupation (for Individual) T S ORENDAIN ASSOC. INC.
---	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
750.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 22 / 2016

Transaction ID : SA11A.446994

Amount of Each Receipt this Period
100.00

Memo Item
CONTRIBUTION

C. ORENDAIN, TOMAS, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 16835 ADDISON ROAD SUITE 100

City ADDISON	State TX	Zip Code 75001-5127
-----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) TOMAS S ORENDAIN	Occupation (for Individual) T S ORENDAIN ASSOC. INC.
---	---

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
750.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 04 / 2016

Transaction ID : SA11A.471534

Amount of Each Receipt this Period
100.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	250.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2728 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. ORGEN, JOHN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1021 COSTA PACIFICA WAY UNIT 2214
 City OCEANSIDE State CA Zip Code 92054-2198
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) INFORMATION REQUESTED PER BEST EFFORTS Occupation (for Individual) INFORMATION REQUESTED PER BE
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 350.00

Date of Receipt **11 / 02 / 2016**
Transaction ID : SA11A.465051
 Amount of Each Receipt this Period 350.00
 Memo Item CONTRIBUTION

B. ORR, KIMBERLY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2469 ROSS ROAD
 City OLIVE BRANCH State MS Zip Code 38654-9413
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) FEDEX SERVICES Occupation (for Individual) BUSINESS APPLICATIONS PRINCIPAL
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 218.00

Date of Receipt **10 / 31 / 2016**
Transaction ID : SA11A.463254
 Amount of Each Receipt this Period 18.00
 Memo Item CONTRIBUTION

C. ORR, KIMBERLY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2469 ROSS ROAD
 City OLIVE BRANCH State MS Zip Code 38654-9413
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) FEDEX SERVICES Occupation (for Individual) BUSINESS APPLICATIONS PRINCIPAL
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 218.00

Date of Receipt **10 / 31 / 2016**
Transaction ID : SA11A.463268
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	418.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2729 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. ORR, KIMBERLY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2469 ROSS ROAD
 City OLIVE BRANCH State MS Zip Code 38654-9413
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) FEDEX SERVICES Occupation (for Individual) BUSINESS APPLICATIONS PRINCIPA
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 218.00

Date of Receipt 11 / 02 / 2016
Transaction ID : SA11A.466607
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

B. ORR, KIMBERLY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2469 ROSS ROAD
 City OLIVE BRANCH State MS Zip Code 38654-9413
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) FEDEX SERVICES Occupation (for Individual) BUSINESS APPLICATIONS PRINCIPA
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 218.00

Date of Receipt 11 / 02 / 2016
Transaction ID : SA11A.466610
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

C. ORRISON, BECKY, C., MRS.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 708 GREENVIEW AVENUE NE
 City ATLANTA State GA Zip Code 30305-2733
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) HOMEMAKER
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 10 / 28 / 2016
Transaction ID : SA11A.454787
 Amount of Each Receipt this Period 300.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	350.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2730 OF 4311
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. ORSATO, JOHN, , MR.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 130 TIPERS CIRCLE

City HEATHSVILLE	State VA	Zip Code 22473-4322
---------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
700.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	05	/	2016

Transaction ID : SA11A.478719

Amount of Each Receipt this Period
100.00

Memo Item CONTRIBUTION

B. ORSATO, JOHN, , MR.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 130 TIPERS CIRCLE

City HEATHSVILLE	State VA	Zip Code 22473-4322
---------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
700.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	05	/	2016

Transaction ID : SA11A.478720

Amount of Each Receipt this Period
100.00

Memo Item CONTRIBUTION

C. ORTIZ, FLORENTINO, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 34691 1/2 CAMINO CAPISTRANO

City DANA POINT	State CA	Zip Code 92624-1332
--------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
600.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	04	/	2016

Transaction ID : SA11A.472117

Amount of Each Receipt this Period
100.00

Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	300.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2731 OF 4311
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. ORTIZ, GERALD, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 188 STEADWELL RD

City AMSTERDAM	State NY	Zip Code 12010-7507
-------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) SELF EMPLOYED	Occupation (for Individual) PHYSICIAN
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
825.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
10		30		2016

Transaction ID : SA11A.460065

Amount of Each Receipt this Period
100.00

Memo Item
CONTRIBUTION

B. ORTIZ, GERALD, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 188 STEADWELL RD

City AMSTERDAM	State NY	Zip Code 12010-7507
-------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) SELF EMPLOYED	Occupation (for Individual) PHYSICIAN
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
825.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
11		04		2016

Transaction ID : SA11A.471719

Amount of Each Receipt this Period
100.00

Memo Item
CONTRIBUTION

C. ORUM, PETER, , MR.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address PO BOX 384

City ST. CHARLES	State IL	Zip Code 60174-0384
---------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) MIDWEST GROUNDCOVERS LLC	Occupation (for Individual) FARMER
---	---------------------------------------

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
2500.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
10		21		2016

Transaction ID : SA11A.443523

Amount of Each Receipt this Period
500.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	700.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2732 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. ORUM, PETER, , MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO BOX 384
 City ST. CHARLES State IL Zip Code 60174-0384
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) MIDWEST GROUNDCOVERS LLC Occupation (for Individual) FARMER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 2500.00

Date of Receipt
 11 / 03 / 2016
Transaction ID : SA11A.465494
 Amount of Each Receipt this Period
 1000.00
 Memo Item
 CONTRIBUTION

B. ORWIG, THEODORE, L., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 10 FLATCREEK PLACE
 City THE WOODLANDS State TX Zip Code 77381-6103
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt
 10 / 20 / 2016
Transaction ID : SA11A.442657
 Amount of Each Receipt this Period
 50.00
 Memo Item
 CONTRIBUTION

C. ORWIG, THEODORE, L., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 10 FLATCREEK PLACE
 City THE WOODLANDS State TX Zip Code 77381-6103
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt
 10 / 27 / 2016
Transaction ID : SA11A.453187
 Amount of Each Receipt this Period
 25.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	1075.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2733 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. ORWIG, THEODORE, L., MR.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 10 FLATCREEK PLACE

City THE WOODLANDS	State TX	Zip Code 77381-6103
-----------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
400.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	05	/	2016

Transaction ID : SA11A.478601

Amount of Each Receipt this Period
25.00

Memo Item CONTRIBUTION

B. OST, ROBERT, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 747 MENDOCINO AVE
SUITE 200

City SANTA ROSA	State CA	Zip Code 95401-4814
--------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) OST ENGINEERING, INC	Occupation (for Individual) STRUCTURAL ENGINEER
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
350.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	04	/	2016

Transaction ID : SA11A.471701

Amount of Each Receipt this Period
50.00

Memo Item CONTRIBUTION

C. OSTBY, H., SIGNE, MR.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 386 MOUNTAIN HOME ROAD

City WOODSIDE	State CA	Zip Code 94062-2513
------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) DOMPONLO RANCH	Occupation (for Individual) RESTORATION MANAGER
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
7500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	03	/	2016

Transaction ID : SA11A.465158

Amount of Each Receipt this Period
5000.00

Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	5075.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2735 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. OSTERHOUT, HW, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1002 DARIA DR.
 City HOUSTON State TX Zip Code 77079-5024
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RUBICON HOLDINGS Occupation (for Individual) CONSULTANT
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 11 / 07 / 2016
Transaction ID : SA11A.475496
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

B. OSULLIVAN, JOHN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1919 FOXTAIL PLACE
 City THE WOODLANDS State TX Zip Code 77380-1834
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) BECHTEL OG&C Occupation (for Individual) CIVIL ENGINEER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 600.00

Date of Receipt 10 / 26 / 2016
Transaction ID : SA11A.449867
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

C. OSULLIVAN, JOHN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 8047 RANCHVIEW LN
 City MAPLE GROVE State MN Zip Code 55311-2255
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) VOYAGEUR SERVICE CENTERS Occupation (for Individual) BUSINESS OWNER
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 800.00

Date of Receipt 10 / 27 / 2016
Transaction ID : SA11A.453680
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	450.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2736 OF 4311
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. OSULLIVAN, JOHN, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 8047 RANCHVIEW LN

City MAPLE GROVE	State MN	Zip Code 55311-2255
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) VOYAGEUR SERVICE CENTERS	Occupation (for Individual) BUSINESS OWNER
---	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
800.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	27	/	2016

Transaction ID : SA11A.453690

Amount of Each Receipt this Period
250.00

Memo Item
CONTRIBUTION

B. OSULLIVAN, JOHN, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1919 FOXTAIL PLACE

City THE WOODLANDS	State TX	Zip Code 77380-1834
-----------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) BECHTEL OG&C	Occupation (for Individual) CIVIL ENGINEER
---	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
600.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	05	/	2016

Transaction ID : SA11A.478842

Amount of Each Receipt this Period
100.00

Memo Item
CONTRIBUTION

C. OSULLIVAN, JOHN, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1919 FOXTAIL PLACE

City THE WOODLANDS	State TX	Zip Code 77380-1834
-----------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) BECHTEL OG&C	Occupation (for Individual) CIVIL ENGINEER
---	---

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
600.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	05	/	2016

Transaction ID : SA11A.478847

Amount of Each Receipt this Period
100.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	450.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2737 OF 4311
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. OTOSKI, EMILY, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1060 ASKEW STATION BEND

City GREENSBORO	State GA	Zip Code 30642-3346
--------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
325.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	04	/	2016

Transaction ID : SA11A.473918

Amount of Each Receipt this Period
75.00

Memo Item
CONTRIBUTION

B. OTOSKI, EMILY, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1060 ASKEW STATION BEND

City GREENSBORO	State GA	Zip Code 30642-3346
--------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
325.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	04	/	2016

Transaction ID : SA11A.473978

Amount of Each Receipt this Period
75.00

Memo Item
CONTRIBUTION

C. OTSUKI, CHRISTOPHER, K., MR.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 9769 VIA PAVIA

City BURBANK	State CA	Zip Code 91504-1125
-----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) DISNEY TV ANIMATION	Occupation (for Individual) CARTOONIST
--	---

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
210.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	31	/	2016

Transaction ID : SA11A.459193

Amount of Each Receipt this Period
25.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	175.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2738 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. OTSUKI, CHRISTOPHER, K., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 9769 VIA PAVIA

City BURBANK	State CA	Zip Code 91504-1125
-----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) DISNEY TV ANIMATION	Occupation (for Individual) CARTOONIST
--	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
210.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 04 / 2016

Transaction ID : SA11A.474179

Amount of Each Receipt this Period
25.00

Memo Item
CONTRIBUTION

B. OTSUKI, CHRISTOPHER, K., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 9769 VIA PAVIA

City BURBANK	State CA	Zip Code 91504-1125
-----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) DISNEY TV ANIMATION	Occupation (for Individual) CARTOONIST
--	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
210.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 07 / 2016

Transaction ID : SA11A.475442

Amount of Each Receipt this Period
30.00

Memo Item
CONTRIBUTION

C. OTSUKI, CHRISTOPHER, K., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 9769 VIA PAVIA

City BURBANK	State CA	Zip Code 91504-1125
-----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) DISNEY TV ANIMATION	Occupation (for Individual) CARTOONIST
--	---

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
210.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 07 / 2016

Transaction ID : SA11A.475443

Amount of Each Receipt this Period
30.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	85.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 2739 OF 4311
	(check only one)
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
<input type="checkbox"/> 13	<input type="checkbox"/> 14
<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/>	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Team Ryan

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name A. OTTERSON, BERT, , ,			Date of Receipt M M M / D D D / Y Y Y Y Y Y 10 / 21 / 2016 Transaction ID : SA11A.444272		
Mailing Address 4900 INDUSTRIAL WAY			Amount of Each Receipt this Period 100.00		
City BENICIA	State CA	Zip Code 94510-1006	<input type="checkbox"/> Memo Item CONTRIBUTION		
FEC ID number of contributing federal political committee. C					
Name of Employer (for Individual) RIX INDUSTRIES		Occupation (for Individual) BUSINESSMAN			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 1200.00			

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name B. OTTERSON, BERT, , ,			Date of Receipt M M M / D D D / Y Y Y Y Y Y 10 / 24 / 2016 Transaction ID : SA11A.446106		
Mailing Address 4900 INDUSTRIAL WAY			Amount of Each Receipt this Period 100.00		
City BENICIA	State CA	Zip Code 94510-1006	<input type="checkbox"/> Memo Item CONTRIBUTION		
FEC ID number of contributing federal political committee. C					
Name of Employer (for Individual) RIX INDUSTRIES		Occupation (for Individual) BUSINESSMAN			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 1200.00			

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name C. OTTERSON, BERT, , ,			Date of Receipt M M M / D D D / Y Y Y Y Y Y 10 / 25 / 2016 Transaction ID : SA11A.451813		
Mailing Address 4900 INDUSTRIAL WAY			Amount of Each Receipt this Period 100.00		
City BENICIA	State CA	Zip Code 94510-1006	<input type="checkbox"/> Memo Item CONTRIBUTION		
FEC ID number of contributing federal political committee. C					
Name of Employer (for Individual) RIX INDUSTRIES		Occupation (for Individual) BUSINESSMAN			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		Aggregate Year-to-Date ▼ 1200.00			

SUBTOTAL of Receipts This Page (optional).....▶	300.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2740 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. OTTERSON, BERT, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4900 INDUSTRIAL WAY
 City BENICIA State CA Zip Code 94510-1006
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RIX INDUSTRIES Occupation (for Individual) BUSINESSMAN
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1200.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 29 / 2016
Transaction ID : SA11A.460735
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION

B. OTTERSON, BERT, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4900 INDUSTRIAL WAY
 City BENICIA State CA Zip Code 94510-1006
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RIX INDUSTRIES Occupation (for Individual) BUSINESSMAN
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1200.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 07 / 2016
Transaction ID : SA11A.480613
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION

C. OTTMERS, CLARA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 369 PYKA RD
 City FREDERICKSBURG State TX Zip Code 78624-3646
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 550.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 25 / 2016
Transaction ID : SA11A.448158
 Amount of Each Receipt this Period
 250.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	450.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2741 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. OTTMERS, CLARA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 369 PYKA RD
 City FREDERICKSBURG State TX Zip Code 78624-3646
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 550.00

Date of Receipt 10 / 25 / 2016
Transaction ID : SA11A.448167
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

B. OTTO, CHARLES, E., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 69 TURNBERRY ROAD APT. 3
 City LITTLE FALLS State NJ Zip Code 07424-1689
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 10 / 26 / 2016
Transaction ID : SA11A.454658
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

C. OTTO, CHARLES, E., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 69 TURNBERRY ROAD APT. 3
 City LITTLE FALLS State NJ Zip Code 07424-1689
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 10 / 26 / 2016
Transaction ID : SA11A.454661
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶ 350.00
TOTAL This Period (last page this line number only).....▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2742 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. OTTO, CHARLES, E., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 69 TURNBERRY ROAD
 APT. 3
 City LITTLE FALLS State NJ Zip Code 07424-1689
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 11 / 02 / 2016
Transaction ID : SA11A.469439
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

B. OTTO, CHARLES, E., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 69 TURNBERRY ROAD
 APT. 3
 City LITTLE FALLS State NJ Zip Code 07424-1689
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 11 / 02 / 2016
Transaction ID : SA11A.469440
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

C. OTTO, DOROTHY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 166 CRAIG DRIVE
 P O BOX 577
 City GREENSBURG State PA Zip Code 15601-1006
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 350.00

Date of Receipt 10 / 25 / 2016
Transaction ID : SA11A.448504
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶ 100.00
TOTAL This Period (last page this line number only).....▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2743 OF 4311
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. OTTO, DOROTHY, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 166 CRAIG DRIVE
P O BOX 577

City GREENSBURG State PA Zip Code 15601-1006

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
350.00

Date of Receipt
10 / 31 / 2016
Transaction ID : SA11A.458643

Amount of Each Receipt this Period
25.00

Memo Item CONTRIBUTION

B. OTTO, DOROTHY, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 166 CRAIG DRIVE
P O BOX 577

City GREENSBURG State PA Zip Code 15601-1006

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
350.00

Date of Receipt
11 / 07 / 2016
Transaction ID : SA11A.475820

Amount of Each Receipt this Period
50.00

Memo Item CONTRIBUTION

C. OUWELEEN, FREDERIC, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 647 WASHINGTON AVENUE

City ELYRIA State OH Zip Code 44035-3602

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
350.00

Date of Receipt
11 / 01 / 2016
Transaction ID : SA11A.461822

Amount of Each Receipt this Period
200.00

Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 275.00

TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2744 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. OVEN, DAVID, J., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO BOX 1466

City ENID	State OK	Zip Code 73702-1466
--------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) OVEN OFFICE	Occupation (for Individual) INVESTMENTS
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
805.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 25 / 2016
Transaction ID : SA11A.447281

Amount of Each Receipt this Period
400.00

Memo Item
CONTRIBUTION

B. OVERDECK, LAURA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 35 KENILWORTH DR.

City SHORT HILLS	State NJ	Zip Code 07078-1642
---------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) SELF EMPLOYED	Occupation (for Individual) NONPROFIT MGMT
--	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
41100.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 24 / 2016
Transaction ID : SA11A.443511

Amount of Each Receipt this Period
41100.00

Memo Item
CONTRIBUTION

C. OVERMAN, EARL, R., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5926 S 550 E

City PERU	State IN	Zip Code 46970-8770
--------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
400.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 01 / 2016
Transaction ID : SA11A.461628

Amount of Each Receipt this Period
300.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	41800.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2745 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. OVERSTREET, VIKKI, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3509 SAN MATEO COURT
 City AUSTIN State TX Zip Code 78738-5458
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) HOMEMAKER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 260.00

Date of Receipt 11 / 01 / 2016
Transaction ID : SA11A.457217
 Amount of Each Receipt this Period 10.00
 Memo Item CONTRIBUTION

B. OVERZET, JOHN, K., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 239 E. 11TH ST.
 City FOND DU LAC State WI Zip Code 54935-5248
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 450.00

Date of Receipt 10 / 25 / 2016
Transaction ID : SA11A.448921
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

C. OVERZET, JOHN, K., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 239 E. 11TH ST.
 City FOND DU LAC State WI Zip Code 54935-5248
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 450.00

Date of Receipt 11 / 01 / 2016
Transaction ID : SA11A.463076
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶ 60.00
TOTAL This Period (last page this line number only).....▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2746 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. OVERZET, JOHN, K., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 239 E. 11TH ST.
 City FOND DU LAC State WI Zip Code 54935-5248
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 450.00

Date of Receipt 11 / 04 / 2016
Transaction ID : SA11A.471421
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

B. OWEN, CARL, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1735 CASHTOWN RD
 City BREMEN State GA Zip Code 30110-4014
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) CARL OWEN CONSTRUCTION Occupation (for Individual) CEO
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 350.00

Date of Receipt 11 / 02 / 2016
Transaction ID : SA11A.469912
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

C. OWEN, DANIEL, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 445 SAINT MORITZ COURT
 City MARIETTA State GA Zip Code 30062-
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 350.00

Date of Receipt 10 / 26 / 2016
Transaction ID : SA11A.449974
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	225.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2747 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. OWEN, DANIEL, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 445 SAINT MORITZ COURT
 City MARIETTA State GA Zip Code 30062-
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 350.00

Date of Receipt 10 / 26 / 2016
Transaction ID : SA11A.449981
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

B. OWEN, JERRY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address P.O. BOX 40
 City NORRIS State SC Zip Code 29667-0040
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 525.00

Date of Receipt 10 / 25 / 2016
Transaction ID : SA11A.451998
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

C. OWEN, JERRY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address P.O. BOX 40
 City NORRIS State SC Zip Code 29667-0040
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 525.00

Date of Receipt 10 / 31 / 2016
Transaction ID : SA11A.457928
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 225.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2748 OF 4311
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. OWEN, JERRY, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address P.O. BOX 40

City NORRIS	State SC	Zip Code 29667-0040
----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
525.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		31		2016

Transaction ID : SA11A.457933

Amount of Each Receipt this Period
25.00

Memo Item
CONTRIBUTION

B. OWEN, JERRY, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address P.O. BOX 40

City NORRIS	State SC	Zip Code 29667-0040
----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
525.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		30		2016

Transaction ID : SA11A.459489

Amount of Each Receipt this Period
50.00

Memo Item
CONTRIBUTION

C. OWEN, JERRY, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address P.O. BOX 40

City NORRIS	State SC	Zip Code 29667-0040
----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
525.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11		01		2016

Transaction ID : SA11A.467360

Amount of Each Receipt this Period
50.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	125.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2749 OF 4311
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. OWEN, JERRY, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address P.O. BOX 40

City NORRIS	State SC	Zip Code 29667-0040
----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
525.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	07	/	2016

Transaction ID : SA11A.475934

Amount of Each Receipt this Period
50.00

Memo Item CONTRIBUTION

B. OWEN, JERRY, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address P.O. BOX 40

City NORRIS	State SC	Zip Code 29667-0040
----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
525.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	05	/	2016

Transaction ID : SA11A.478679

Amount of Each Receipt this Period
50.00

Memo Item CONTRIBUTION

C. OWEN, KAY, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 2381 NW 49TH LN

City BOCA RATON	State FL	Zip Code 33431-4332
--------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	02	/	2016

Transaction ID : SA11A.466042

Amount of Each Receipt this Period
500.00

Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	600.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2750 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. OWENS, COLLINS, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1455 W. SCOTT AVE
 City GILBERT State AZ Zip Code 85233-3046
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) COLLINS COMFORT MASTERS Occupation (for Individual) A/C CONTRACTOR
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 31 / 2016
Transaction ID : SA11A.457491
 Amount of Each Receipt this Period
 250.00
 Memo Item
 CONTRIBUTION

B. OWENS, DARRYLE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2119 EAST LAKE OF THE ISLES PKWY
 City MINNEAPOLIS State MN Zip Code 55405-2409
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 2400.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 31 / 2016
Transaction ID : SA11A.458792
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION

C. OWENS, DARRYLE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2119 EAST LAKE OF THE ISLES PKWY
 City MINNEAPOLIS State MN Zip Code 55405-2409
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 2400.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 31 / 2016
Transaction ID : SA11A.458813
 Amount of Each Receipt this Period
 50.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	400.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2751 OF 4311
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. OWENS, DARRYLE, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 2119 EAST LAKE OF THE ISLES PKWY
City MINNEAPOLIS State MN Zip Code 55405-2409
FEC ID number of contributing federal political committee. **C**
Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 2400.00

Date of Receipt 10 / 31 / 2016
Transaction ID : SA11A.458816
Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

B. OWENS, E, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address PO BOX 550
City MARTINEZ State CA Zip Code 94553-0054
FEC ID number of contributing federal political committee. **C**
Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 1450.00

Date of Receipt 10 / 27 / 2016
Transaction ID : SA11A.453437
Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

C. OWENS, EDGAR, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 1104 CASTRO STREET
City MARTINEZ State CA Zip Code 94553-2358
FEC ID number of contributing federal political committee. **C**
Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
Receipt For: Primary General Other (specify)
Aggregate Year-to-Date ▼ 250.00

Date of Receipt 11 / 03 / 2016
Transaction ID : SA11A.468850
Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶ 400.00
TOTAL This Period (last page this line number only).....▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2752 OF 4311
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. OXENDER, NILA, J., ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 8807 N ARNOLD PALMER DR

City TUCSON	State AZ	Zip Code 85742-9673
----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		31		2016

Transaction ID : SA11A.458726

Amount of Each Receipt this Period
25.00

Memo Item CONTRIBUTION

B. OXENDER, NILA, J., ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 8807 N ARNOLD PALMER DR

City TUCSON	State AZ	Zip Code 85742-9673
----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		31		2016

Transaction ID : SA11A.458733

Amount of Each Receipt this Period
25.00

Memo Item CONTRIBUTION

C. OXFORD, LARRY, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 18211 BULVERDE RD
8307

City SAN ANTONIO	State TX	Zip Code 78259-3710
---------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) ALAMO HEIGHTS ISD	Occupation (for Individual) TENNIS CENTER DIRECTOR/TENNIS
--	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
1500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		31		2016

Transaction ID : SA11A.464525

Amount of Each Receipt this Period
1000.00

Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	1050.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2753 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13 <input type="checkbox"/> 11b <input type="checkbox"/> 14 <input type="checkbox"/> 11c <input type="checkbox"/> 15 <input type="checkbox"/> 12 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. OXFORD, LARRY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 18211 BULVERDE RD
 8307
 City SAN ANTONIO State TX Zip Code 78259-3710
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) ALAMO HEIGHTS ISD Occupation (for Individual) TENNIS CENTER DIRECTOR/TENNIS
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1500.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 31 / 2016
Transaction ID : SA11A.464544
 Amount of Each Receipt this Period
 250.00
 Memo Item
 CONTRIBUTION

B. OXFORD, LARRY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 18211 BULVERDE RD
 8307
 City SAN ANTONIO State TX Zip Code 78259-3710
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) ALAMO HEIGHTS ISD Occupation (for Individual) TENNIS CENTER DIRECTOR/TENNIS
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1500.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 31 / 2016
Transaction ID : SA11A.464546
 Amount of Each Receipt this Period
 250.00
 Memo Item
 CONTRIBUTION

C. OZMENT, ROBERT, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 9142 WILLOW WALK
 City ESTERO State FL Zip Code 34135-8140
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) INFORMATION REQUESTED PER BEST EFFORTS Occupation (for Individual) INFORMATION REQUESTED PER BEST EFFORTS
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 27 / 2016
Transaction ID : SA11A.452383
 Amount of Each Receipt this Period
 200.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 700.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2754 OF 4311
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. PABOOJIAN, KAREN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 7549 CLARIBEL RD
 City OAKDALE State CA Zip Code 95361-8602
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt **10 / 25 / 2016**
Transaction ID : SA11A.451589
 Amount of Each Receipt this Period 300.00
 Memo Item CONTRIBUTION

B. PACE, J, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 7911 FISHBACK RD
 City INDIANAPOLIS State IN Zip Code 46278-9718
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 245.00

Date of Receipt **11 / 02 / 2016**
Transaction ID : SA11A.467086
 Amount of Each Receipt this Period 110.00
 Memo Item CONTRIBUTION

C. PACE, LLOYD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4150 S DEMAREE A
 City VISALIA State CA Zip Code 93277-9514
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt **10 / 31 / 2016**
Transaction ID : SA11A.459138
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	660.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2755 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. PACE, LLOYD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4150 S DEMAREE
 City VISALIA State CA Zip Code 93277-9514
 FEC ID number of contributing federal political committee. C
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) Aggregate Year-to-Date 1000.00

Date of Receipt 11 / 04 / 2016
 Transaction ID : SA11A.474180
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

B. PACE, MICHAEL, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 735 CHAMPIONS CLUB DRIVE
 City ALPHARETTA State GA Zip Code 30004-6956
 FEC ID number of contributing federal political committee. C
 Name of Employer (for Individual) PACE-O-MATIC, INC. Occupation (for Individual) EXECUTIVE SCIENTIST
 Receipt For: Primary General Other (specify) Aggregate Year-to-Date 600.00

Date of Receipt 10 / 26 / 2016
 Transaction ID : SA11A.450428
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

C. PACE, MICHAEL, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 735 CHAMPIONS CLUB DRIVE
 City ALPHARETTA State GA Zip Code 30004-6956
 FEC ID number of contributing federal political committee. C
 Name of Employer (for Individual) PACE-O-MATIC, INC. Occupation (for Individual) EXECUTIVE SCIENTIST
 Receipt For: Primary General Other (specify) Aggregate Year-to-Date 600.00

Date of Receipt 10 / 26 / 2016
 Transaction ID : SA11A.450429
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... 350.00
TOTAL This Period (last page this line number only).....

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2756 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. PACE, MICHAEL, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 735 CHAMPIONS CLUB DRIVE
 City ALPHARETTA State GA Zip Code 30004-6956
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) PACE-O-MATIC, INC. Occupation (for Individual) EXECUTIVE SCIENTIST
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 600.00

Date of Receipt 11 / 06 / 2016
Transaction ID : SA11A.477303
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

B. PACE, ROBERT, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1431 MACADAMIA DR
 City FALLBROOK State CA Zip Code 92028-1135
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) PHYSICIAN
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 300.00

Date of Receipt 10 / 27 / 2016
Transaction ID : SA11A.454242
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

C. PACE, ROBERT, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1431 MACADAMIA DR
 City FALLBROOK State CA Zip Code 92028-1135
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) PHYSICIAN
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 300.00

Date of Receipt 11 / 04 / 2016
Transaction ID : SA11A.473193
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	300.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2757 OF 4311
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
Team Ryan

A. PACE, ROBERT, , MR.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1918 WISEMAN LANE

City GARDNERVILLE	State NV	Zip Code 89410-7817
----------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
220.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
11 / 07 / 2016

Transaction ID : SA11A.467837

Amount of Each Receipt this Period
50.00

Memo Item CONTRIBUTION

B. PACE, ROBERT, , MR.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1918 WISEMAN LANE

City GARDNERVILLE	State NV	Zip Code 89410-7817
----------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
220.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
11 / 08 / 2016

Transaction ID : SA11A.468170

Amount of Each Receipt this Period
35.00

Memo Item CONTRIBUTION

C. PACHE, EUGENE, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 12715 AUGUSTA AVE

City OMAHA	State NE	Zip Code 68144-3744
---------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) TEMPOQUEST	Occupation (for Individual) PRESIDENT
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
475.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
10 / 26 / 2016

Transaction ID : SA11A.450984

Amount of Each Receipt this Period
100.00

Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	185.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2758 OF 4311
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
Team Ryan

A. PACHE, EUGENE, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 12715 AUGUSTA AVE

City OMAHA	State NE	Zip Code 68144-3744
---------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) TEMPOQUEST	Occupation (for Individual) PRESIDENT
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
475.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	01	/	2016

Transaction ID : SA11A.463100

Amount of Each Receipt this Period
100.00

Memo Item
CONTRIBUTION

B. PACHE, EUGENE, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 12715 AUGUSTA AVE

City OMAHA	State NE	Zip Code 68144-3744
---------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) TEMPOQUEST	Occupation (for Individual) PRESIDENT
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
475.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	07	/	2016

Transaction ID : SA11A.475485

Amount of Each Receipt this Period
25.00

Memo Item
CONTRIBUTION

C. PACHE, EUGENE, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 12715 AUGUSTA AVE

City OMAHA	State NE	Zip Code 68144-3744
---------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) TEMPOQUEST	Occupation (for Individual) PRESIDENT
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
475.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	07	/	2016

Transaction ID : SA11A.476180

Amount of Each Receipt this Period
25.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	150.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2759 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. PACHE, EUGENE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 12715 AUGUSTA AVE
 City OMAHA State NE Zip Code 68144-3744
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) TEMPOQUEST Occupation (for Individual) PRESIDENT
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 475.00

Date of Receipt
 11 / 07 / 2016
Transaction ID : SA11A.476181
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

B. PACHE, EUGENE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 12715 AUGUSTA AVE
 City OMAHA State NE Zip Code 68144-3744
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) TEMPOQUEST Occupation (for Individual) PRESIDENT
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 475.00

Date of Receipt
 11 / 05 / 2016
Transaction ID : SA11A.479092
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

C. PACHE, EUGENE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 12715 AUGUSTA AVE
 City OMAHA State NE Zip Code 68144-3744
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) TEMPOQUEST Occupation (for Individual) PRESIDENT
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 475.00

Date of Receipt
 11 / 05 / 2016
Transaction ID : SA11A.479093
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	225.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2760 OF 4311
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. PACK, TONY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 940 NORTHPEYTONVILLE AVENUE
 City SOUTHLAKE State TX Zip Code 76092-5834
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SAM PACK AUTO GROUP Occupation (for Individual) AUTOMOTIVE
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 11 / 07 / 2016
Transaction ID : SA11A.474969
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

B. PACOCHA, BETTY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4900 TELEGRAPH RD APT, 712
 City VENTURA State CA Zip Code 93003-4169
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1150.00

Date of Receipt 11 / 04 / 2016
Transaction ID : SA11A.479351
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

C. PACOCHA, BETTY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4900 TELEGRAPH RD APT, 712
 City VENTURA State CA Zip Code 93003-4169
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 1150.00

Date of Receipt 11 / 07 / 2016
Transaction ID : SA11A.480441
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 750.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2761 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. PACOLT, SUZANNE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 22 VISTARA DR
 City RANCHO MIRAGE State CA Zip Code 92270-4814
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 205.00

Date of Receipt 11 / 07 / 2016
Transaction ID : SA11A.480120
 Amount of Each Receipt this Period 30.00
 Memo Item CONTRIBUTION

B. PADEN, NANTANA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3381 ALDER PLACE
 City CHINO HILLS State CA Zip Code 91709-2063
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 10 / 27 / 2016
Transaction ID : SA11A.454214
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

C. PADEN, NANTANA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3381 ALDER PLACE
 City CHINO HILLS State CA Zip Code 91709-2063
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 11 / 04 / 2016
Transaction ID : SA11A.471120
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	230.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2762 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. PADGETT, DIANNE, B., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 10803 BURGOYNE ROAD #651

City HOUSTON	State TX	Zip Code 77042-2719
-----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) SELF - PADGETT EXPLORATION	Occupation (for Individual) CONSULTING GEOPHYSICIST
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
500.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 31 / 2016

Transaction ID : SA11A.458528

Amount of Each Receipt this Period
50.00

Memo Item
CONTRIBUTION

B. PADGETT, DIANNE, B., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 10803 BURGOYNE ROAD #651

City HOUSTON	State TX	Zip Code 77042-2719
-----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) SELF - PADGETT EXPLORATION	Occupation (for Individual) CONSULTING GEOPHYSICIST
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
500.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 30 / 2016

Transaction ID : SA11A.460068

Amount of Each Receipt this Period
50.00

Memo Item
CONTRIBUTION

C. PADGETT, DIANNE, B., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 10803 BURGOYNE ROAD #651

City HOUSTON	State TX	Zip Code 77042-2719
-----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) SELF - PADGETT EXPLORATION	Occupation (for Individual) CONSULTING GEOPHYSICIST
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
500.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 04 / 2016

Transaction ID : SA11A.471766

Amount of Each Receipt this Period
50.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	150.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2763 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. PADGETT, DONALD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 7520 BROCKTON COURT
 City MOBILE State AL Zip Code 36695-4363
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 225.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 24 / 2016
Transaction ID : SA11A.449152
 Amount of Each Receipt this Period
 50.00
 Memo Item
 CONTRIBUTION

B. PADGETT, DONALD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 7520 BROCKTON COURT
 City MOBILE State AL Zip Code 36695-4363
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 225.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 31 / 2016
Transaction ID : SA11A.458378
 Amount of Each Receipt this Period
 25.00
 Memo Item
 CONTRIBUTION

C. PADRON, SEBASTIAN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 14 OAK HILL PLACE
 City SAN ANTONIO State TX Zip Code 78229-3692
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) MEDICAL DOCTOR
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 450.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 24 / 2016
Transaction ID : SA11A.449542
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	175.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2764 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
Team Ryan

A. PADRON, SEBASTIAN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 14 OAK HILL PLACE
 City SAN ANTONIO State TX Zip Code 78229-3692
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) MEDICAL DOCTOR
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 450.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 28 / 2016
Transaction ID : SA11A.456104
 Amount of Each Receipt this Period
 50.00
 Memo Item
 CONTRIBUTION

B. PADRON, SEBASTIAN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 14 OAK HILL PLACE
 City SAN ANTONIO State TX Zip Code 78229-3692
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) MEDICAL DOCTOR
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 450.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 04 / 2016
Transaction ID : SA11A.470767
 Amount of Each Receipt this Period
 50.00
 Memo Item
 CONTRIBUTION

C. PAGAN, ANGEL, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address UNIT 3030 BOX 0405
 City DPO State AA Zip Code 34004-0405
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) DOD CIVILIAN Occupation (for Individual) LOG MGT SPEC
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 350.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 30 / 2016
Transaction ID : SA11A.459695
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	200.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2765 OF 4311
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. PAGE, DAVID, L., ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 5905 ROBERT E LEE COURT
City NASHVILLE State TN Zip Code 37215-5220
FEC ID number of contributing federal political committee. **C**
Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 1250.00

Date of Receipt 10 / 31 / 2016
Transaction ID : SA11A.457257
Amount of Each Receipt this Period 750.00
 Memo Item CONTRIBUTION

B. PAGE, SUSAN, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 2414 FRONT STREET UNIT 22
City SAN DIEGO State CA Zip Code 92101-1428
FEC ID number of contributing federal political committee. **C**
Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 550.00

Date of Receipt 10 / 29 / 2016
Transaction ID : SA11A.460414
Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

C. PAIELLI, GINA, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 5788 HERMA STREET
City SAN JOSE State CA Zip Code 95123-3409
FEC ID number of contributing federal political committee. **C**
Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
Receipt For: Primary General Other (specify)
Aggregate Year-to-Date ▼ 385.00

Date of Receipt 10 / 28 / 2016
Transaction ID : SA11A.456402
Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 825.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2766 OF 4311
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. PAIELLI, GINA, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 5788 HERMA STREET

City SAN JOSE	State CA	Zip Code 95123-3409
------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
385.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	03	/	2016

Transaction ID : SA11A.474524

Amount of Each Receipt this Period
25.00

Memo Item CONTRIBUTION

B. PAIGE, MICHAEL, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 372 VETERANS BLVD

City BAYVILLE	State NJ	Zip Code 08721-3326
------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
275.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	23	/	2016

Transaction ID : SA11A.446556

Amount of Each Receipt this Period
10.00

Memo Item CONTRIBUTION

C. PAIGE, MICHAEL, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 372 VETERANS BLVD

City BAYVILLE	State NJ	Zip Code 08721-3326
------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
275.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	01	/	2016

Transaction ID : SA11A.462193

Amount of Each Receipt this Period
10.00

Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	45.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2767 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. PAIGE, MICHAEL, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 372 VETERANS BLVD
 City BAYVILLE State NJ Zip Code 08721-3326
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 275.00

Date of Receipt 11 / 04 / 2016
Transaction ID : SA11A.471465
 Amount of Each Receipt this Period 10.00
 Memo Item CONTRIBUTION

B. PAIGE, MICHAEL, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 372 VETERANS BLVD
 City BAYVILLE State NJ Zip Code 08721-3326
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 275.00

Date of Receipt 11 / 07 / 2016
Transaction ID : SA11A.475753
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

C. PALATCHI, ROBERT, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 9611 DEER TRACK RD
 City WEST CHESTER State OH Zip Code 45069-7049
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) CHANCE DEES Occupation (for Individual) PHONE CABLE INSTALLER
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 11 / 07 / 2016
Transaction ID : SA11A.476393
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 285.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2768 OF 4311
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. PALENZUELA, GONZALO, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 665 LEUCADENDRA DR
 City CORAL GABLES State FL Zip Code 33156-2365
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) CARIBBEAN EXPORT, INC Occupation (for Individual) SELECT
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt 10 / 20 / 2016
Transaction ID : SA11A.441944
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

B. PALERMO, SHAWN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 202 B AIRPORT BUSINESS CENTER
 City ASPEN State CO Zip Code 81611-3515
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RMC Occupation (for Individual) RMC
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 275.00

Date of Receipt 10 / 28 / 2016
Transaction ID : SA11A.455073
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

C. PALMER, ALAN, K., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2108 BANCROFT PLACE NW
 City WASHINGTON State DC Zip Code 20008-4020
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 10 / 31 / 2016
Transaction ID : SA11A.457283
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 375.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2769 OF 4311
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. PALMER, DAVID, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 59-563 LOKELANI PLACE
 P.O. BOX 44557
 City KAMUELA State HI Zip Code 96743-4557
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) CAFE PESTO Occupation (for Individual) RESTAURATEUR
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 2098.00

Date of Receipt 10 / 24 / 2016
Transaction ID : SA11A.445615
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

B. PALMER, GEORGE, M., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 31557 EAGLE ROCK WAY
 City LAGUNA BEACH State CA Zip Code 92651-8299
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt 10 / 27 / 2016
Transaction ID : SA11A.452335
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

C. PALMER, GEORGE, M., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 31557 EAGLE ROCK WAY
 City LAGUNA BEACH State CA Zip Code 92651-8299
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt 11 / 01 / 2016
Transaction ID : SA11A.461636
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	400.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2770 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. PALMER, MARC, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 12335 KINGSRIDE #353
 City HOUSTON State TX Zip Code 77024-4116
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) TAHOE VENTURES LTD Occupation (for Individual) PRESIDENT
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 700.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 04 / 2016
Transaction ID : SA11A.473216
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION

B. PALMER, SHIRLEY, M., MRS.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 57564 REDDING ROAD
 City HEPPNER State OR Zip Code 97836-6227
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED/HOUSEWIFE Occupation (for Individual) RETIRED/HOUSEWIFE
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 07 / 2016
Transaction ID : SA11A.467859
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION

C. PALMER, SUSHMA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4437 RESERVOIR ROAD NW
 City WASHINGTON State DC Zip Code 20007-2021
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 31 / 2016
Transaction ID : SA11A.458855
 Amount of Each Receipt this Period
 250.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	450.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2771 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
Team Ryan

A. PALOMBO, MARKHAM, , MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 10054 STRATMORE CIRCLE
 City SHREVEPORT State LA Zip Code 71115-3460
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) OMNI Occupation (for Individual) SALES
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1550.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 04 / 2016
Transaction ID : SA11A.473631
 Amount of Each Receipt this Period
 250.00
 Memo Item
 CONTRIBUTION

B. PANNILL, ALICE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4 SOUTH LAKE TRAIL
 City PALM BEACH State FL Zip Code 33480-4118
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 2600.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 30 / 2016
Transaction ID : SA11A.460292
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION

C. PANNILL, ALICE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4 SOUTH LAKE TRAIL
 City PALM BEACH State FL Zip Code 33480-4118
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 2600.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 31 / 2016
Transaction ID : SA11A.464666
 Amount of Each Receipt this Period
 250.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	600.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2772 OF 4311
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. PANNILL, ALICE, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 4 SOUTH LAKE TRAIL

City PALM BEACH	State FL	Zip Code 33480-4118
--------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
2600.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		31		2016

Transaction ID : SA11A.464675

Amount of Each Receipt this Period
100.00

Memo Item CONTRIBUTION

B. PANNILL, ALICE, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 4 SOUTH LAKE TRAIL

City PALM BEACH	State FL	Zip Code 33480-4118
--------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
2600.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		31		2016

Transaction ID : SA11A.464677

Amount of Each Receipt this Period
100.00

Memo Item CONTRIBUTION

C. PANNILL, ALICE, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 4 SOUTH LAKE TRAIL

City PALM BEACH	State FL	Zip Code 33480-4118
--------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
2600.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11		04		2016

Transaction ID : SA11A.470907

Amount of Each Receipt this Period
100.00

Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	300.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2773 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. PANNILL, ALICE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4 SOUTH LAKE TRAIL
 City PALM BEACH State FL Zip Code 33480-4118
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 2600.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 06 / 2016
Transaction ID : SA11A.478170
 Amount of Each Receipt this Period
 250.00
 Memo Item
 CONTRIBUTION

B. PANNILL, ALICE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4 SOUTH LAKE TRAIL
 City PALM BEACH State FL Zip Code 33480-4118
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 2600.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 05 / 2016
Transaction ID : SA11A.478538
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION

C. PANNILL, ALICE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4 SOUTH LAKE TRAIL
 City PALM BEACH State FL Zip Code 33480-4118
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 2600.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 05 / 2016
Transaction ID : SA11A.478541
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	450.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2774 OF 4311
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. PANNILL, ALICE, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 4 SOUTH LAKE TRAIL

City PALM BEACH	State FL	Zip Code 33480-4118
--------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
2600.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	05	/	2016

Transaction ID : SA11A.478542

Amount of Each Receipt this Period
100.00

Memo Item CONTRIBUTION

B. PAPESH, WILLIAM, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 2011 S OVERBLUFF EST LN

City SPOKANE	State WA	Zip Code 99203-3471
-----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
750.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	24	/	2016

Transaction ID : SA11A.446000

Amount of Each Receipt this Period
250.00

Memo Item CONTRIBUTION

C. PAPPAS, EMMANUEL, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address PO BOX 1266

City WEBSTER	State MA	Zip Code 01570-4266
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
400.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	04	/	2016

Transaction ID : SA11A.467614

Amount of Each Receipt this Period
200.00

Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	550.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2775 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. PAPST, KARI, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1410 S. BALLOU RD

City SPOKANE	State WA	Zip Code 99203-3527
-----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) LIFE CENTER CHURCH	Occupation (for Individual) PASTOR
---	---------------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
300.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
10		22		2016

Transaction ID : SA11A.446644

Amount of Each Receipt this Period
250.00

Memo Item
CONTRIBUTION

B. PAPST, KARI, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1410 S. BALLOU RD

City SPOKANE	State WA	Zip Code 99203-3527
-----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) LIFE CENTER CHURCH	Occupation (for Individual) PASTOR
---	---------------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
300.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
11		07		2016

Transaction ID : SA11A.474909

Amount of Each Receipt this Period
25.00

Memo Item
CONTRIBUTION

C. PAPST, KARI, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1410 S. BALLOU RD

City SPOKANE	State WA	Zip Code 99203-3527
-----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) LIFE CENTER CHURCH	Occupation (for Individual) PASTOR
---	---------------------------------------

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
300.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
11		07		2016

Transaction ID : SA11A.474910

Amount of Each Receipt this Period
25.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	300.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2776 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name A. PARADIS, SALLY, , ,		Date of Receipt MM / DD / YYYY 10 / 31 / 2016
Mailing Address 13 LONG HILL ROAD		Transaction ID : SA11A.457863
City RAYMOND	State NH	Zip Code 03077-1229
FEC ID number of contributing federal political committee. C	Amount of Each Receipt this Period 25.00	
Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED	<input type="checkbox"/> Memo Item CONTRIBUTION
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 257.00	

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name B. PARADIS, SALLY, , ,		Date of Receipt MM / DD / YYYY 11 / 04 / 2016
Mailing Address 13 LONG HILL ROAD		Transaction ID : SA11A.473253
City RAYMOND	State NH	Zip Code 03077-1229
FEC ID number of contributing federal political committee. C	Amount of Each Receipt this Period 25.00	
Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED	<input type="checkbox"/> Memo Item CONTRIBUTION
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 257.00	

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name C. PARCELL, DEBRA, , ,		Date of Receipt MM / DD / YYYY 10 / 26 / 2016
Mailing Address 25655 CR 24		Transaction ID : SA11A.451268
City ELKHART	State IN	Zip Code 46517-9121
FEC ID number of contributing federal political committee. C	Amount of Each Receipt this Period 50.00	
Name of Employer (for Individual) SELF EMPLOYED	Occupation (for Individual) RN	<input type="checkbox"/> Memo Item CONTRIBUTION
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Aggregate Year-to-Date ▼ 350.00	

SUBTOTAL of Receipts This Page (optional).....▶	100.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2777 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. PARCELL, DEBRA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 25655 CR 24
 City ELKHART State IN Zip Code 46517-9121
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) RN
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 350.00

Date of Receipt 10 / 26 / 2016
Transaction ID : SA11A.451269
 Amount of Each Receipt this Period 50.00
 Memo Item
CONTRIBUTION

B. PARCELL, DEBRA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 25655 CR 24
 City ELKHART State IN Zip Code 46517-9121
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) RN
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 350.00

Date of Receipt 10 / 26 / 2016
Transaction ID : SA11A.451270
 Amount of Each Receipt this Period 100.00
 Memo Item
CONTRIBUTION

C. PARCELL, DEBRA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 25655 CR 24
 City ELKHART State IN Zip Code 46517-9121
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) RN
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 350.00

Date of Receipt 10 / 26 / 2016
Transaction ID : SA11A.451271
 Amount of Each Receipt this Period 100.00
 Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 250.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2778 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. PARCHMAN, JANALU, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 408 LISCIO COVE
 City GEORGETOWN State TX Zip Code 78628-4659
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 405.00

Date of Receipt **10 / 25 / 2016**
Transaction ID : SA11A.449072
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

B. PARCHMAN, JANALU, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 408 LISCIO COVE
 City GEORGETOWN State TX Zip Code 78628-4659
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 405.00

Date of Receipt **11 / 02 / 2016**
Transaction ID : SA11A.466412
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

C. PARCHMAN, JANALU, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 408 LISCIO COVE
 City GEORGETOWN State TX Zip Code 78628-4659
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 405.00

Date of Receipt **11 / 04 / 2016**
Transaction ID : SA11A.473962
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	75.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2779 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
Team Ryan

A. PARDEE, JONATHAN, H., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 540 BELLEVUE AVENUE
 City NEWPORT State RI Zip Code 02840-4118
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) JONATHAN PARDEE Occupation (for Individual) INTELLECTUAL PROPERTY
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1500.00

Date of Receipt 10 / 31 / 2016
Transaction ID : SA11A.463318
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

B. PARISELLA, JAY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 430 LANGMAID LANE
 City BRADFORD State PA Zip Code 16701-3939
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 207.00

Date of Receipt 10 / 24 / 2016
Transaction ID : SA11A.445675
 Amount of Each Receipt this Period 20.00
 Memo Item CONTRIBUTION

C. PARISELLA, JAY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 430 LANGMAID LANE
 City BRADFORD State PA Zip Code 16701-3939
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 207.00

Date of Receipt 10 / 31 / 2016
Transaction ID : SA11A.464383
 Amount of Each Receipt this Period 15.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	135.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2780 OF 4311
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. PARISELLA, JAY, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 430 LANGMAID LANE

City BRADFORD	State PA	Zip Code 16701-3939
------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
207.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		31		2016

Transaction ID : SA11A.464400

Amount of Each Receipt this Period
25.00

Memo Item
CONTRIBUTION

B. PARISELLA, JAY, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 430 LANGMAID LANE

City BRADFORD	State PA	Zip Code 16701-3939
------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
207.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11		07		2016

Transaction ID : SA11A.474749

Amount of Each Receipt this Period
20.00

Memo Item
CONTRIBUTION

C. PARISELLA, JAY, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 430 LANGMAID LANE

City BRADFORD	State PA	Zip Code 16701-3939
------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
207.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11		07		2016

Transaction ID : SA11A.474784

Amount of Each Receipt this Period
25.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	70.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2781 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. PARK, ROY, H., , JR
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1 HAMPTON HILL LANE
 City ITHACA State NY Zip Code 14850-1081
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) PARK OUTDOOR ADV. Occupation (for Individual) ADV. MEDIA EXEC
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 700.00

Date of Receipt 11 / 03 / 2016
Transaction ID : SA11A.465437
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

B. PARK, THOMAS, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 19800 SHEARWATER POINT
 City CORNELIUS State NC Zip Code 28031-7554
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) GILBARCO Occupation (for Individual) VP MARKETING
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 850.00

Date of Receipt 11 / 02 / 2016
Transaction ID : SA11A.469362
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

C. PARK, THOMAS, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 19800 SHEARWATER POINT
 City CORNELIUS State NC Zip Code 28031-7554
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) GILBARCO Occupation (for Individual) VP MARKETING
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 850.00

Date of Receipt 11 / 02 / 2016
Transaction ID : SA11A.469734
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶ 600.00
TOTAL This Period (last page this line number only).....▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2782 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. PARKER, BRISCOE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2711 MID LANE
 City HOUSTON State TX Zip Code 77027-4907
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) CUSHMAN & WAKEFIELD Occupation (for Individual) REAL ESTATE BROKER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 450.00

Date of Receipt 11 / 01 / 2016
Transaction ID : SA11A.467269
 Amount of Each Receipt this Period 200.00
 Memo Item CONTRIBUTION

B. PARKER, FOXHALL, A., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 205 HONEY HOLLOW ROAD
 City POUND RIDGE State NY Zip Code 10576-1109
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt 10 / 31 / 2016
Transaction ID : SA11A.457357
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

C. PARKER, FOXHALL, A., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 205 HONEY HOLLOW ROAD
 City POUND RIDGE State NY Zip Code 10576-1109
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt 11 / 02 / 2016
Transaction ID : SA11A.466791
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	550.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2783 OF 4311
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. PARKER, JESSE, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 1582 TORRY PINE DR
City YUBA CITY State CA Zip Code 95993-8222
FEC ID number of contributing federal political committee. **C**
Name of Employer (for Individual) CHURCH OF GLAD TIDINGS Occupation (for Individual) MINISTER
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 250.00

Date of Receipt 11 / 04 / 2016
Transaction ID : SA11A.471823
Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

B. PARKER, KATHLEEN, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 10101 POWERS LAKE TRAIL
City WOODBURY State MN Zip Code 55129-8589
FEC ID number of contributing federal political committee. **C**
Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 500.00

Date of Receipt 11 / 04 / 2016
Transaction ID : SA11A.471538
Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

C. PARKER, LEWIS, P., ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 366 PINE LANE
City WETHERSFIELD State CT Zip Code 06109-1921
FEC ID number of contributing federal political committee. **C**
Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
Receipt For: Primary General Other (specify)
Aggregate Year-to-Date ▼ 300.00

Date of Receipt 10 / 31 / 2016
Transaction ID : SA11A.457323
Amount of Each Receipt this Period 200.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... 350.00
TOTAL This Period (last page this line number only).....

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2784 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
Team Ryan

A. PARKER, PAMELA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 25 N DOWNING STREET BLDG 2
 1
 City DENVER State CO Zip Code 80218-3467
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 1000.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 03 / 2016
Transaction ID : SA11A.469115
 Amount of Each Receipt this Period
 1000.00
 Memo Item
 CONTRIBUTION

B. PARKER, ROBERT, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1222 COVE LANE
 City KINGSTON State TN Zip Code 37763-2307
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 410.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 26 / 2016
Transaction ID : SA11A.450905
 Amount of Each Receipt this Period
 25.00
 Memo Item
 CONTRIBUTION

C. PARKER, ROBERT, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1222 COVE LANE
 City KINGSTON State TN Zip Code 37763-2307
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For:
 Primary General
 Other (specify)
 Aggregate Year-to-Date ▼
 410.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 02 / 2016
Transaction ID : SA11A.466473
 Amount of Each Receipt this Period
 30.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	1055.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2785 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. PARKER, ROBERT, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1222 COVE LANE
 City KINGSTON State TN Zip Code 37763-2307
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 410.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 02 / 2016
Transaction ID : SA11A.466563
 Amount of Each Receipt this Period
 25.00
 Memo Item
 CONTRIBUTION

B. PARKER, ROBERT, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1222 COVE LANE
 City KINGSTON State TN Zip Code 37763-2307
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 410.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 04 / 2016
Transaction ID : SA11A.473871
 Amount of Each Receipt this Period
 50.00
 Memo Item
 CONTRIBUTION

C. PARKER, ROBERT, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1222 COVE LANE
 City KINGSTON State TN Zip Code 37763-2307
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 410.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 07 / 2016
Transaction ID : SA11A.475741
 Amount of Each Receipt this Period
 25.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	100.00
TOTAL This Period (last page this line number only).....	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2786 OF 4311
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. PARKER, ROBERT, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1222 COVE LANE
 City KINGSTON State TN Zip Code 37763-2307
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 410.00

Date of Receipt
 11 / 07 / 2016
Transaction ID : SA11A.475803
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

B. PARKINSON, ROBERT, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 43765 LITTLE CLIFFS ROAD
 City HOLLYWOOD State MD Zip Code 20636-2444
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt
 10 / 20 / 2016
Transaction ID : SA11A.442556
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

C. PARKINSON, ROBERT, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 43765 LITTLE CLIFFS ROAD
 City HOLLYWOOD State MD Zip Code 20636-2444
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt
 10 / 20 / 2016
Transaction ID : SA11A.442557
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 75.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2787 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
Team Ryan

A. PARKINSON, ROBERT, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 43765 LITTLE CLIFFS ROAD
 City HOLLYWOOD State MD Zip Code 20636-2444
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt
 11 / 03 / 2016
Transaction ID : SA11A.469045
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

B. PARKS, THOMAS, , MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 17009 CROTTERS
 City SAN JOSE State CA Zip Code 95127-1745
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 894.00

Date of Receipt
 10 / 20 / 2016
Transaction ID : SA11A.441980
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

C. PARKS, THOMAS, , MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 17009 CROTTERS
 City SAN JOSE State CA Zip Code 95127-1745
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 894.00

Date of Receipt
 10 / 26 / 2016
Transaction ID : SA11A.451074
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	75.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2788 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. PARKS, THOMAS, , MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 17009 CROTTERS
 City SAN JOSE State CA Zip Code 95127-1745
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 894.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 30 / 2016
Transaction ID : SA11A.459525
 Amount of Each Receipt this Period
 25.00
 Memo Item
 CONTRIBUTION

B. PARKS, THOMAS, , MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 17009 CROTTERS
 City SAN JOSE State CA Zip Code 95127-1745
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 894.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 03 / 2016
Transaction ID : SA11A.468681
 Amount of Each Receipt this Period
 25.00
 Memo Item
 CONTRIBUTION

C. PARKS, THOMAS, , MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 17009 CROTTERS
 City SAN JOSE State CA Zip Code 95127-1745
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 894.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 04 / 2016
Transaction ID : SA11A.470748
 Amount of Each Receipt this Period
 25.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	75.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2789 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
Team Ryan

A. PARNELL, RICHARD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 9428 OLD PACIFIC HWY
 City WOODLAND State WA Zip Code 98674-8415
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) INDUSTRIAL TRAINING INTERNATIONAL Occupation (for Individual) BUSINESS OWNER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 2482.00

Date of Receipt 10 / 30 / 2016
Transaction ID : SA11A.460055
 Amount of Each Receipt this Period 247.00
 Memo Item CONTRIBUTION

B. PARNELL, RICHARD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 9428 OLD PACIFIC HWY
 City WOODLAND State WA Zip Code 98674-8415
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) INDUSTRIAL TRAINING INTERNATIONAL Occupation (for Individual) BUSINESS OWNER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 2482.00

Date of Receipt 11 / 04 / 2016
Transaction ID : SA11A.471749
 Amount of Each Receipt this Period 247.00
 Memo Item CONTRIBUTION

C. PARRISH, JERI, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1900 SW 145TH AVE
 City DAVIE State FL Zip Code 33325-4900
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) AGL FOODS, INC. Occupation (for Individual) VICE PRESIDENT
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 10 / 29 / 2016
Transaction ID : SA11A.461129
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	544.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2790 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
Team Ryan

A. PARRISH, JERI, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1900 SW 145TH AVE
 City DAVIE State FL Zip Code 33325-4900
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) AGL FOODS, INC. Occupation (for Individual) VICE PRESIDENT
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 04 / 2016
Transaction ID : SA11A.472643
 Amount of Each Receipt this Period
 50.00
 Memo Item
 CONTRIBUTION

B. PARRIS, ROBERT, L., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 703 E. CONCORD LN
 City ALLEN State TX Zip Code 75002-2142
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 285.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 23 / 2016
Transaction ID : SA11A.446385
 Amount of Each Receipt this Period
 30.00
 Memo Item
 CONTRIBUTION

C. PARRIS, ROBERT, L., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 703 E. CONCORD LN
 City ALLEN State TX Zip Code 75002-2142
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 285.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 02 / 2016
Transaction ID : SA11A.466120
 Amount of Each Receipt this Period
 25.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	105.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2791 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
-----------------------------	-----------------------------	-----------------------------

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NAME OF COMMITTEE (In Full)
Team Ryan

A. PARRIS, ROBERT, L., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 703 E. CONCORD LN
 City ALLEN State TX Zip Code 75002-2142
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 285.00

Date of Receipt
 11 / 02 / 2016
Transaction ID : SA11A.466121
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

B. PARRILLO, STEVEN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 35 HARVARD RD
 City PLYMOUTH MEETING State PA Zip Code 19462-7177
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 237.00

Date of Receipt
 10 / 20 / 2016
Transaction ID : SA11A.442014
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

C. PARRILLO, STEVEN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 35 HARVARD RD
 City PLYMOUTH MEETING State PA Zip Code 19462-7177
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 237.00

Date of Receipt
 10 / 27 / 2016
Transaction ID : SA11A.453819
 Amount of Each Receipt this Period 27.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	77.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2792 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. PARRILLO, STEVEN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 35 HARVARD RD
 City PLYMOUTH MEETING State PA Zip Code 19462-7177
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 237.00

Date of Receipt 11 / 04 / 2016
Transaction ID : SA11A.471842
 Amount of Each Receipt this Period 27.00
 Memo Item CONTRIBUTION

B. PARSONS, ANDREW, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 7727 FISHER ISLAND DRIVE
 City FISHER ISLAND State FL Zip Code 33109-0925
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) CONSULTANT AND COMPANY DIRE
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 10 / 26 / 2016
Transaction ID : SA11A.450325
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

C. PARSONS, BEULAH, A., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 6503 249TH STREET COURT E
 City GRAHAM State WA Zip Code 98338-8310
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 11 / 03 / 2016
Transaction ID : SA11A.465473
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	377.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2793 OF 4311
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. PARUBI, PAULIN, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 3794 ETTMAN STREET

City SHRUB OAK	State NY	Zip Code 10588-1008
-------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) JOSEPH GENERAL CONSTRUCTION	Occupation (for Individual) CONSTRUCTION
--	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
400.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	27	/	2016

Transaction ID : SA11A.453800

Amount of Each Receipt this Period
50.00

Memo Item
CONTRIBUTION

B. PARUBI, PAULIN, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 3794 ETTMAN STREET

City SHRUB OAK	State NY	Zip Code 10588-1008
-------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) JOSEPH GENERAL CONSTRUCTION	Occupation (for Individual) CONSTRUCTION
--	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
400.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	04	/	2016

Transaction ID : SA11A.471982

Amount of Each Receipt this Period
50.00

Memo Item
CONTRIBUTION

C. PARZEN, STANLEY, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1104 MICHIGAN AVENUE

City EVANSTON	State IL	Zip Code 60202-1438
------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) MAYER BROWN LLP	Occupation (for Individual) ATTORNEY
--	---

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
650.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	23	/	2016

Transaction ID : SA11A.446375

Amount of Each Receipt this Period
50.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	150.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2794 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. PARZEN, STANLEY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1104 MICHIGAN AVENUE

City EVANSTON	State IL	Zip Code 60202-1438
------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) MAYER BROWN LLP	Occupation (for Individual) ATTORNEY
--	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
650.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 23 / 2016
Transaction ID : SA11A.446376

Amount of Each Receipt this Period
50.00

Memo Item
CONTRIBUTION

B. PARZEN, STANLEY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1104 MICHIGAN AVENUE

City EVANSTON	State IL	Zip Code 60202-1438
------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) MAYER BROWN LLP	Occupation (for Individual) ATTORNEY
--	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
650.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 31 / 2016
Transaction ID : SA11A.458838

Amount of Each Receipt this Period
25.00

Memo Item
CONTRIBUTION

C. PARZEN, STANLEY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1104 MICHIGAN AVENUE

City EVANSTON	State IL	Zip Code 60202-1438
------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) MAYER BROWN LLP	Occupation (for Individual) ATTORNEY
--	---

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
650.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 31 / 2016
Transaction ID : SA11A.458841

Amount of Each Receipt this Period
25.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	100.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2795 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. PARZEN, STANLEY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1104 MICHIGAN AVENUE
 City EVANSTON State IL Zip Code 60202-1438
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) MAYER BROWN LLP Occupation (for Individual) ATTORNEY
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 650.00

Date of Receipt 11 / 07 / 2016
Transaction ID : SA11A.476378
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

B. PARZEN, STANLEY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1104 MICHIGAN AVENUE
 City EVANSTON State IL Zip Code 60202-1438
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) MAYER BROWN LLP Occupation (for Individual) ATTORNEY
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 650.00

Date of Receipt 11 / 07 / 2016
Transaction ID : SA11A.476380
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

C. PARZEN, STANLEY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1104 MICHIGAN AVENUE
 City EVANSTON State IL Zip Code 60202-1438
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) MAYER BROWN LLP Occupation (for Individual) ATTORNEY
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 650.00

Date of Receipt 11 / 07 / 2016
Transaction ID : SA11A.476381
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 75.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2796 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
Team Ryan

A. PARZEN, STANLEY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1104 MICHIGAN AVENUE
 City EVANSTON State IL Zip Code 60202-1438
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) MAYER BROWN LLP Occupation (for Individual) ATTORNEY
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 650.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 06 / 2016
Transaction ID : SA11A.478242
 Amount of Each Receipt this Period
 25.00
 Memo Item
CONTRIBUTION

B. PARZEN, STANLEY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1104 MICHIGAN AVENUE
 City EVANSTON State IL Zip Code 60202-1438
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) MAYER BROWN LLP Occupation (for Individual) ATTORNEY
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 650.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 06 / 2016
Transaction ID : SA11A.478243
 Amount of Each Receipt this Period
 25.00
 Memo Item
CONTRIBUTION

C. PARZEN, STANLEY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1104 MICHIGAN AVENUE
 City EVANSTON State IL Zip Code 60202-1438
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) MAYER BROWN LLP Occupation (for Individual) ATTORNEY
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 650.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 05 / 2016
Transaction ID : SA11A.478693
 Amount of Each Receipt this Period
 25.00
 Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	75.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2797 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
-----------------------------	-----------------------------	-----------------------------

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NAME OF COMMITTEE (In Full)
Team Ryan

A. PARZEN, STANLEY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1104 MICHIGAN AVENUE
 City EVANSTON State IL Zip Code 60202-1438
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) MAYER BROWN LLP Occupation (for Individual) ATTORNEY
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 650.00

Date of Receipt 11 / 05 / 2016
Transaction ID : SA11A.478694
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

B. PARZEN, STANLEY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1104 MICHIGAN AVENUE
 City EVANSTON State IL Zip Code 60202-1438
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) MAYER BROWN LLP Occupation (for Individual) ATTORNEY
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 650.00

Date of Receipt 11 / 05 / 2016
Transaction ID : SA11A.478695
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

C. PASINI, JACK, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4280 GALT OCEAN DRIVE 11P 11P
 City FT LAUDERDALE State FL Zip Code 33308-6126
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 1550.00

Date of Receipt 11 / 02 / 2016
Transaction ID : SA11A.469887
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	150.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2798 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. PASQUAN , STEVE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 18 EUCALYPTUS ROAD
 City BELVEDERE State CA Zip Code 94920-2436
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) PASQUAN LLP Occupation (for Individual) OWNER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1600.00

Date of Receipt 10 / 27 / 2016
Transaction ID : SA11A.453083
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

B. PASQUAN , STEVE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 18 EUCALYPTUS ROAD
 City BELVEDERE State CA Zip Code 94920-2436
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) PASQUAN LLP Occupation (for Individual) OWNER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1600.00

Date of Receipt 10 / 27 / 2016
Transaction ID : SA11A.453132
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

C. PASQUAN , STEVE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 18 EUCALYPTUS ROAD
 City BELVEDERE State CA Zip Code 94920-2436
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) PASQUAN LLP Occupation (for Individual) OWNER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1600.00

Date of Receipt 10 / 27 / 2016
Transaction ID : SA11A.453197
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	600.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2799 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. PASSER, SANFORD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 28400 NORTHWESTERN HWY
 SUITE 130
 City SOUTHFIELD State MI Zip Code 48034-8346
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1120.00

Date of Receipt 10 / 25 / 2016
Transaction ID : SA11A.448636
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

B. PASSER, SANFORD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 28400 NORTHWESTERN HWY
 SUITE 130
 City SOUTHFIELD State MI Zip Code 48034-8346
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1120.00

Date of Receipt 10 / 25 / 2016
Transaction ID : SA11A.448639
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

C. PASSER, SANFORD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 28400 NORTHWESTERN HWY
 SUITE 130
 City SOUTHFIELD State MI Zip Code 48034-8346
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1120.00

Date of Receipt 10 / 25 / 2016
Transaction ID : SA11A.448642
 Amount of Each Receipt this Period 30.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶ 80.00
TOTAL This Period (last page this line number only).....▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2800 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. PASSER, SANFORD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 28400 NORTHWESTERN HWY
 SUITE 130
 City SOUTHFIELD State MI Zip Code 48034-8346
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1120.00

Date of Receipt 10 / 25 / 2016
Transaction ID : SA11A.448644
 Amount of Each Receipt this Period 30.00
 Memo Item CONTRIBUTION

B. PASSER, SANFORD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 28400 NORTHWESTERN HWY
 SUITE 130
 City SOUTHFIELD State MI Zip Code 48034-8346
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1120.00

Date of Receipt 10 / 25 / 2016
Transaction ID : SA11A.452047
 Amount of Each Receipt this Period 30.00
 Memo Item CONTRIBUTION

C. PASSER, SANFORD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 28400 NORTHWESTERN HWY
 SUITE 130
 City SOUTHFIELD State MI Zip Code 48034-8346
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1120.00

Date of Receipt 10 / 25 / 2016
Transaction ID : SA11A.452048
 Amount of Each Receipt this Period 30.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 90.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2801 OF 4311
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. PASSER, SANFORD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 28400 NORTHWESTERN HWY
 SUITE 130
 City SOUTHFIELD State MI Zip Code 48034-8346
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1120.00

Date of Receipt **10 / 29 / 2016**
Transaction ID : SA11A.460671
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

B. PASSER, SANFORD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 28400 NORTHWESTERN HWY
 SUITE 130
 City SOUTHFIELD State MI Zip Code 48034-8346
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1120.00

Date of Receipt **11 / 02 / 2016**
Transaction ID : SA11A.466745
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

C. PASSER, SANFORD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 28400 NORTHWESTERN HWY
 SUITE 130
 City SOUTHFIELD State MI Zip Code 48034-8346
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1120.00

Date of Receipt **11 / 06 / 2016**
Transaction ID : SA11A.477238
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶ 100.00
TOTAL This Period (last page this line number only).....▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2802 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. PASTALAN, JOHN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 156 BLACK BROOK
 City HAMPTON State NJ Zip Code 08827-2516
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NOKIA Occupation (for Individual) ENGINEER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 10 / 30 / 2016
Transaction ID : SA11A.459578
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

B. PASTORE, GERARD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 11809 TROIKA COURT
 City LAKE RIDGE State VA Zip Code 22192-6284
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) PMC Occupation (for Individual) MANAGEMENT CONSULTANT
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 750.00

Date of Receipt 10 / 23 / 2016
Transaction ID : SA11A.446458
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

C. PASTORE, GERARD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 11809 TROIKA COURT
 City LAKE RIDGE State VA Zip Code 22192-6284
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) PMC Occupation (for Individual) MANAGEMENT CONSULTANT
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 750.00

Date of Receipt 11 / 01 / 2016
Transaction ID : SA11A.462745
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	750.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2803 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. PATCHETT, CHARLOTTE, M., MRS.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 13385 SHADOWWOOD DR
 City BAXTER State MN Zip Code 56425-8207
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 345.00

Date of Receipt 10 / 26 / 2016
Transaction ID : SA11A.450553
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

B. PATE, BOYD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1766 BANKHEAD HWY.
 City WINFIELD State AL Zip Code 35594-6112
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) PEPSI COLA BOTTLING Occupation (for Individual) OWNER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 350.00

Date of Receipt 10 / 24 / 2016
Transaction ID : SA11A.444027
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

C. PATE, BOYD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1766 BANKHEAD HWY.
 City WINFIELD State AL Zip Code 35594-6112
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) PEPSI COLA BOTTLING Occupation (for Individual) OWNER
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 350.00

Date of Receipt 11 / 07 / 2016
Transaction ID : SA11A.480267
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 375.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2804 OF 4311
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. PATEL, DINESH, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address P O BOX 58887

City SALT LAKE CITY	State UT	Zip Code 84158-0887
FEC ID number of contributing federal political committee. C		
Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 550.00	

Date of Receipt
10 / 22 / 2016
Transaction ID : SA11A.449659

Amount of Each Receipt this Period
50.00

Memo Item CONTRIBUTION

B. PATEL, DINESH, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address P O BOX 58887

City SALT LAKE CITY	State UT	Zip Code 84158-0887
FEC ID number of contributing federal political committee. C		
Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 550.00	

Date of Receipt
11 / 01 / 2016
Transaction ID : SA11A.467178

Amount of Each Receipt this Period
50.00

Memo Item CONTRIBUTION

C. PATEL, KAMALES, H, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address P.O. BOX 220

City BLAND	State VA	Zip Code 24315-0220
FEC ID number of contributing federal political committee. C		
Name of Employer (for Individual) SELF EMPLOYED	Occupation (for Individual) PHYSICIAN	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Aggregate Year-to-Date ▼ 300.00	

Date of Receipt
10 / 25 / 2016
Transaction ID : SA11A.451568

Amount of Each Receipt this Period
50.00

Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	150.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2805 OF 4311
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. PATEL, MUKUND, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 35 ANNFIELD COURT

City STATEN ISLAND	State NY	Zip Code 10304-1301
-----------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NYU	Occupation (for Individual) PHYSICIAN
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		21		2016

Transaction ID : SA11A.444379

Amount of Each Receipt this Period
100.00

Memo Item
CONTRIBUTION

B. PATEL, MUKUND, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 35 ANNFIELD COURT

City STATEN ISLAND	State NY	Zip Code 10304-1301
-----------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NYU	Occupation (for Individual) PHYSICIAN
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		26		2016

Transaction ID : SA11A.450829

Amount of Each Receipt this Period
100.00

Memo Item
CONTRIBUTION

C. PATEL, MUKUND, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 35 ANNFIELD COURT

City STATEN ISLAND	State NY	Zip Code 10304-1301
-----------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NYU	Occupation (for Individual) PHYSICIAN
--	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		26		2016

Transaction ID : SA11A.450832

Amount of Each Receipt this Period
100.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	300.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2806 OF 4311
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. PATEL, MUKUND, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 35 ANNFIELD COURT

City STATEN ISLAND	State NY	Zip Code 10304-1301
-----------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NYU	Occupation (for Individual) PHYSICIAN
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
500.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
11		01		2016

Transaction ID : SA11A.462188

Amount of Each Receipt this Period
100.00

Memo Item
CONTRIBUTION

B. PATEL, MUKUND, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 35 ANNFIELD COURT

City STATEN ISLAND	State NY	Zip Code 10304-1301
-----------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NYU	Occupation (for Individual) PHYSICIAN
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
500.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
11		02		2016

Transaction ID : SA11A.467004

Amount of Each Receipt this Period
100.00

Memo Item
CONTRIBUTION

C. PATEL, NATVERLAL, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 3819 E. LIVINGSTONE DRIVE, #5
5

City LONG BEACH	State CA	Zip Code 90803-2889
--------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
870.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
10		28		2016

Transaction ID : SA11A.456199

Amount of Each Receipt this Period
50.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	250.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2807 OF 4311
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. PATEL, NATVERLAL, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3819 E. LIVINGSTONE DRIVE, #5
 5
 City LONG BEACH State CA Zip Code 90803-2889
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 870.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 31 / 2016
Transaction ID : SA11A.457981
 Amount of Each Receipt this Period
 25.00
 Memo Item
 CONTRIBUTION

B. PATEL, NATVERLAL, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3819 E. LIVINGSTONE DRIVE, #5
 5
 City LONG BEACH State CA Zip Code 90803-2889
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 870.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 02 / 2016
Transaction ID : SA11A.467044
 Amount of Each Receipt this Period
 25.00
 Memo Item
 CONTRIBUTION

C. PATEL, NATVERLAL, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3819 E. LIVINGSTONE DRIVE, #5
 5
 City LONG BEACH State CA Zip Code 90803-2889
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 870.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 02 / 2016
Transaction ID : SA11A.467141
 Amount of Each Receipt this Period
 50.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶ 100.00
TOTAL This Period (last page this line number only).....▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2808 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
Team Ryan

A. PATEL, NATVERLAL, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3819 E. LIVINGSTONE DRIVE, #5
 5
 City LONG BEACH State CA Zip Code 90803-2889
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 870.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 03 / 2016
Transaction ID : SA11A.469247
 Amount of Each Receipt this Period
 30.00
 Memo Item
 CONTRIBUTION

B. PATEL, NATVERLAL, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3819 E. LIVINGSTONE DRIVE, #5
 5
 City LONG BEACH State CA Zip Code 90803-2889
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 870.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 07 / 2016
Transaction ID : SA11A.475288
 Amount of Each Receipt this Period
 30.00
 Memo Item
 CONTRIBUTION

C. PATEL, NATVERLAL, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3819 E. LIVINGSTONE DRIVE, #5
 5
 City LONG BEACH State CA Zip Code 90803-2889
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For:
 Primary General
 Other (specify)
 Aggregate Year-to-Date ▼
 870.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 06 / 2016
Transaction ID : SA11A.480880
 Amount of Each Receipt this Period
 30.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	90.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2809 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. PATEL, NATVERLAL, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3819 E. LIVINGSTONE DRIVE, #5
 5
 City LONG BEACH State CA Zip Code 90803-2889
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 870.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 06 / 2016
Transaction ID : SA11A.480882
 Amount of Each Receipt this Period
 30.00
 Memo Item
 CONTRIBUTION

B. PATIN, HAROLD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4625 TABONY STREET
 City METAIRIE State LA Zip Code 70006-2341
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 325.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 25 / 2016
Transaction ID : SA11A.451883
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION

C. PATIN, HAROLD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4625 TABONY STREET
 City METAIRIE State LA Zip Code 70006-2341
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 325.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 07 / 2016
Transaction ID : SA11A.474597
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	230.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2810 OF 4311
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. PATRICK, THOMAS, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 282 S VIA LAS PALMAS

City PALM SPRINGS	State CA	Zip Code 92262-4289
----------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		24		2016

Transaction ID : SA11A.449128

Amount of Each Receipt this Period
250.00

Memo Item CONTRIBUTION

B. PATRICK, THOMAS, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 282 S VIA LAS PALMAS

City PALM SPRINGS	State CA	Zip Code 92262-4289
----------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		24		2016

Transaction ID : SA11A.449136

Amount of Each Receipt this Period
250.00

Memo Item CONTRIBUTION

C. PATTERSON, ADAM, D., ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1865 CUMMINGS LANE

City DURHAM	State CA	Zip Code 95938-9683
----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
539.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		21		2016

Transaction ID : SA11A.444585

Amount of Each Receipt this Period
25.00

Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	525.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2811 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. PATTERSON, ADAM, D., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1865 CUMMINGS LANE
 City DURHAM State CA Zip Code 95938-9683
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 539.00

Date of Receipt **11 / 04 / 2016**
Transaction ID : SA11A.472291
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

B. PATTERSON, EVELYN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2624 DAWN RIDGE DR.
 City CARMEL State IN Zip Code 46074-8252
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) IUPUI Occupation (for Individual) ASSOCIATE PROFESSOR OF ACCO
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 243.00

Date of Receipt **11 / 07 / 2016**
Transaction ID : SA11A.476366
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

C. PATTERSON, RANDY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2823 ASTER LAKE ROAD
 City HELENA State AL Zip Code 35022-7260
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) ALABAMA GAS CORPORATION Occupation (for Individual) ENGINEER
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt **10 / 31 / 2016**
Transaction ID : SA11A.459174
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶ 125.00
TOTAL This Period (last page this line number only).....▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2812 OF 4311
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. PATTERSON, RANDY, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address **2823 ASTER LAKE ROAD**

City HELENA	State AL	Zip Code 35022-7260
-----------------------	--------------------	-------------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) ALABAMA GAS CORPORATION	Occupation (for Individual) ENGINEER
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt
11 / 04 / 2016

Transaction ID : SA11A.471519

Amount of Each Receipt this Period
50.00

Memo Item
CONTRIBUTION

B. PAUL, BEVERLY, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address **2950 RR 33**

City BIG SPRING	State TX	Zip Code 79720-7870
---------------------------	--------------------	-------------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
--	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
300.00

Date of Receipt
10 / 31 / 2016

Transaction ID : SA11A.457735

Amount of Each Receipt this Period
100.00

Memo Item
CONTRIBUTION

C. PAULI, FRANCIS, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address **853 ASA GRAY DR.**

City ANN ARBOR	State MI	Zip Code 48105-2566
--------------------------	--------------------	-------------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
--	---

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
525.00

Date of Receipt
10 / 26 / 2016

Transaction ID : SA11A.449987

Amount of Each Receipt this Period
25.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	175.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2813 OF 4311
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. PAULI, FRANCIS, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 853 ASA GRAY DR.
 City ANN ARBOR State MI Zip Code 48105-2566
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 525.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 26 / 2016
Transaction ID : SA11A.449999
 Amount of Each Receipt this Period
 25.00
 Memo Item
 CONTRIBUTION

B. PAULI, FRANCIS, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 853 ASA GRAY DR.
 City ANN ARBOR State MI Zip Code 48105-2566
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 525.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 26 / 2016
Transaction ID : SA11A.454519
 Amount of Each Receipt this Period
 25.00
 Memo Item
 CONTRIBUTION

C. PAULI, FRANCIS, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 853 ASA GRAY DR.
 City ANN ARBOR State MI Zip Code 48105-2566
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 525.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 31 / 2016
Transaction ID : SA11A.459303
 Amount of Each Receipt this Period
 25.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 75.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2814 OF 4311
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. PAULI, FRANCIS, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 853 ASA GRAY DR.

City ANN ARBOR	State MI	Zip Code 48105-2566
-------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
525.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
11		03		2016

Transaction ID : SA11A.469296

Amount of Each Receipt this Period
25.00

Memo Item CONTRIBUTION

B. PAULI, FRANCIS, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 853 ASA GRAY DR.

City ANN ARBOR	State MI	Zip Code 48105-2566
-------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
525.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
11		03		2016

Transaction ID : SA11A.469299

Amount of Each Receipt this Period
25.00

Memo Item CONTRIBUTION

C. PAULI, FRANCIS, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 853 ASA GRAY DR.

City ANN ARBOR	State MI	Zip Code 48105-2566
-------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
525.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
11		06		2016

Transaction ID : SA11A.477021

Amount of Each Receipt this Period
25.00

Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	75.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2815 OF 4311
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. PAULI, FRANCIS, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 853 ASA GRAY DR.

City ANN ARBOR	State MI	Zip Code 48105-2566
-------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
525.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
11		06		2016

Transaction ID : SA11A.477034

Amount of Each Receipt this Period
25.00

Memo Item
CONTRIBUTION

B. PAULI, FRANCIS, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 853 ASA GRAY DR.

City ANN ARBOR	State MI	Zip Code 48105-2566
-------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
525.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
11		05		2016

Transaction ID : SA11A.478866

Amount of Each Receipt this Period
25.00

Memo Item
CONTRIBUTION

C. PAULI, FRANCIS, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 853 ASA GRAY DR.

City ANN ARBOR	State MI	Zip Code 48105-2566
-------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
525.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
11		05		2016

Transaction ID : SA11A.478870

Amount of Each Receipt this Period
25.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	75.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2816 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name A. PAULI, FRANCIS, , ,		Date of Receipt MM / DD / YYYY 11 / 04 / 2016 Transaction ID : SA11A.479437
Mailing Address 853 ASA GRAY DR.		Amount of Each Receipt this Period 25.00
City ANN ARBOR	State MI	Zip Code 48105-2566
FEC ID number of contributing federal political committee. C		<input type="checkbox"/> Memo Item CONTRIBUTION
Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 525.00	

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name B. PAULSON, ROBERT, , ,		Date of Receipt MM / DD / YYYY 10 / 24 / 2016 Transaction ID : SA11A.446168
Mailing Address 2133 W. 235TH PLACE		Amount of Each Receipt this Period 25.00
City TORRANCE	State CA	Zip Code 90501-6045
FEC ID number of contributing federal political committee. C		<input type="checkbox"/> Memo Item CONTRIBUTION
Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 405.00	

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name C. PAULSON, ROBERT, , ,		Date of Receipt MM / DD / YYYY 10 / 27 / 2016 Transaction ID : SA11A.453590
Mailing Address 2133 W. 235TH PLACE		Amount of Each Receipt this Period 30.00
City TORRANCE	State CA	Zip Code 90501-6045
FEC ID number of contributing federal political committee. C		<input type="checkbox"/> Memo Item CONTRIBUTION
Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Aggregate Year-to-Date ▼ 405.00	

SUBTOTAL of Receipts This Page (optional).....▶	80.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2817 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. PAULSON, ROBERT, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2133 W. 235TH PLACE
 City TORRANCE State CA Zip Code 90501-6045
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 405.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 27 / 2016
Transaction ID : SA11A.457136
 Amount of Each Receipt this Period
 30.00
 Memo Item
 CONTRIBUTION

B. PAULSON, ROBERT, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2133 W. 235TH PLACE
 City TORRANCE State CA Zip Code 90501-6045
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 405.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 04 / 2016
Transaction ID : SA11A.471510
 Amount of Each Receipt this Period
 25.00
 Memo Item
 CONTRIBUTION

C. PAVEL, PETER, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 650 E GRAND AVE
 City LAKE VILLA State IL Zip Code 60046-9152
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) GRAINGER Occupation (for Individual) COMPUTER SYSTEMS DEVELOPER
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 314.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 29 / 2016
Transaction ID : SA11A.460483
 Amount of Each Receipt this Period
 157.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	212.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2818 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. PAVEL, PETER, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 650 E GRAND AVE
 City LAKE VILLA State IL Zip Code 60046-9152
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) GRAINGER Occupation (for Individual) COMPUTER SYSTEMS DEVELOPER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 314.00

Date of Receipt 11 / 04 / 2016
Transaction ID : SA11A.471082
 Amount of Each Receipt this Period 157.00
 Memo Item CONTRIBUTION

B. PAWLAK, JAMES, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 206 VENADO AVE.
 City THOUSAND OAKS State CA Zip Code 91320-3653
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 445.00

Date of Receipt 11 / 03 / 2016
Transaction ID : SA11A.469035
 Amount of Each Receipt this Period 59.00
 Memo Item CONTRIBUTION

C. PAYLOR, CRAIG, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 422 W DUTCH CORNER RD
 City MCCONNELLSBURG State PA Zip Code 17233-8824
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) AHERN RENTALS Occupation (for Individual) COO
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 10 / 30 / 2016
Transaction ID : SA11A.464934
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	316.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2819 OF 4311
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. PAYLOR, CRAIG, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 422 W DUTCH CORNER RD
City MCCONNELLSBURG State PA Zip Code 17233-8824
FEC ID number of contributing federal political committee. **C**
Name of Employer (for Individual) AHERN RENTALS Occupation (for Individual) COO
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 300.00

Date of Receipt 11 / 04 / 2016
Transaction ID : SA11A.472653
Amount of Each Receipt this Period 100.00
 Memo Item
CONTRIBUTION

B. PAYNE, HELEN, B., ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 5131 SANDYFIELDS LANE
City KATY State TX Zip Code 77494-2330
FEC ID number of contributing federal political committee. **C**
Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 230.00

Date of Receipt 10 / 25 / 2016
Transaction ID : SA11A.451858
Amount of Each Receipt this Period 30.00
 Memo Item
CONTRIBUTION

C. PAYNE, HELEN, B., ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 5131 SANDYFIELDS LANE
City KATY State TX Zip Code 77494-2330
FEC ID number of contributing federal political committee. **C**
Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
Receipt For: Primary General Other (specify)
Aggregate Year-to-Date ▼ 230.00

Date of Receipt 10 / 25 / 2016
Transaction ID : SA11A.451860
Amount of Each Receipt this Period 30.00
 Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶ 160.00
TOTAL This Period (last page this line number only).....▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2820 OF 4311
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. PAYNE, JOHN, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 3507 CROSS CREEK LANE

City MALIBU	State CA	Zip Code 90265-4925
----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) KINGSPORT LLC	Occupation (for Individual) MANAGER
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
450.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	02	/	2016

Transaction ID : SA11A.466497

Amount of Each Receipt this Period
250.00

Memo Item
CONTRIBUTION

B. PAYNE, JOHN, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 4031 GULF SHORE BLVD N APT 95

City NAPLES	State FL	Zip Code 34103-2676
----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
602.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	04	/	2016

Transaction ID : SA11A.479396

Amount of Each Receipt this Period
602.00

Memo Item
CONTRIBUTION

C. PAYSOR, STELLA, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 256 QUEENS COVE ROAD

City MOORESVILLE	State NC	Zip Code 28117-9610
---------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
325.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	29	/	2016

Transaction ID : SA11A.460545

Amount of Each Receipt this Period
25.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	877.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2821 OF 4311
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. PAZDERA, NANCY, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 9 ASHFORD COURT

City SPRING LAKE	State NJ	Zip Code 07762-3108
---------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		25		2016

Transaction ID : SA11A.451891

Amount of Each Receipt this Period
250.00

Memo Item
CONTRIBUTION

B. PEABODY, BONNIE, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 3096 NIAGARA CARTHAGE RD

City CARTHAGE	State NC	Zip Code 28327-7114
------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
299.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		24		2016

Transaction ID : SA11A.449442

Amount of Each Receipt this Period
18.00

Memo Item
CONTRIBUTION

C. PEABODY, BONNIE, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 3096 NIAGARA CARTHAGE RD

City CARTHAGE	State NC	Zip Code 28327-7114
------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
299.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		24		2016

Transaction ID : SA11A.449471

Amount of Each Receipt this Period
38.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	306.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2822 OF 4311
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
PEABODY, BONNIE, , ,

Mailing Address **3096 NIAGARA CARTHAGE RD**

City CARTHAGE	State NC	Zip Code 28327-7114
-------------------------	--------------------	-------------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
--	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
299.00

Date of Receipt
11 / 04 / 2016

Transaction ID : SA11A.474136

Amount of Each Receipt this Period
25.00

Memo Item CONTRIBUTION

B. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
PEABODY, BONNIE, , ,

Mailing Address **3096 NIAGARA CARTHAGE RD**

City CARTHAGE	State NC	Zip Code 28327-7114
-------------------------	--------------------	-------------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
--	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
299.00

Date of Receipt
11 / 04 / 2016

Transaction ID : SA11A.479484

Amount of Each Receipt this Period
36.00

Memo Item CONTRIBUTION

C. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
PEABODY, PATRICIA, , ,

Mailing Address **40 NORTH BRIDGTON ROAD**

City BRIDGTON	State ME	Zip Code 04009-4611
-------------------------	--------------------	-------------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
--	---

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
207.00

Date of Receipt
11 / 04 / 2016

Transaction ID : SA11A.479645

Amount of Each Receipt this Period
25.00

Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	86.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2823 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. PEARCE, BERTHA, D., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 17 RIDGECREST DRIVE
 City EASTABOGA State AL Zip Code 36260-5457
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF Occupation (for Individual) MAIL DISTRIBUTION
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 342.00

Date of Receipt 10 / 21 / 2016
Transaction ID : SA11A.443669
 Amount of Each Receipt this Period 70.00
 Memo Item CONTRIBUTION

B. PEARCE, BERTHA, D., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 17 RIDGECREST DRIVE
 City EASTABOGA State AL Zip Code 36260-5457
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF Occupation (for Individual) MAIL DISTRIBUTION
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 342.00

Date of Receipt 10 / 25 / 2016
Transaction ID : SA11A.447428
 Amount of Each Receipt this Period 200.00
 Memo Item CONTRIBUTION

C. PECK, DIANA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1331 VIA ALTA
 City SANTA MARIA State CA Zip Code 93455-5660
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) MANZANITA BERRY FARMS Occupation (for Individual) HR DIRECTOR
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 550.00

Date of Receipt 10 / 28 / 2016
Transaction ID : SA11A.455962
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 370.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2824 OF 4311
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. PECK, DIANA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1331 VIA ALTA
 City SANTA MARIA State CA Zip Code 93455-5660
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) MANZANITA BERRY FARMS Occupation (for Individual) HR DIRECTOR
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 550.00

Date of Receipt 11 / 04 / 2016
Transaction ID : SA11A.473064
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

B. PECSAR, JEFFREY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2163 LIMA LOOP, PMB 1-468
 City LAREDO State TX Zip Code 78045-6420
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 2450.00

Date of Receipt 11 / 02 / 2016
Transaction ID : SA11A.466683
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

C. PEDIGO, LAWSON, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4608 ABBOTT AVE 120
 City DALLAS State TX Zip Code 75205-3909
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) ATTORNEY
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 10 / 25 / 2016
Transaction ID : SA11A.448075
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 300.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2825 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. PEDIGO, LAWSON, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4608 ABBOTT AVE
 120
 City DALLAS State TX Zip Code 75205-3909
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) ATTORNEY
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 11 / 06 / 2016
Transaction ID : SA11A.477530
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

B. PEDIGO, LAWSON, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4608 ABBOTT AVE
 120
 City DALLAS State TX Zip Code 75205-3909
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) ATTORNEY
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 11 / 07 / 2016
Transaction ID : SA11A.480414
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

C. PEDIGO, LAWSON, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4608 ABBOTT AVE
 120
 City DALLAS State TX Zip Code 75205-3909
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) ATTORNEY
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 11 / 07 / 2016
Transaction ID : SA11A.480416
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	150.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2826 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. PEEK, MARVIN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 222 SWEETWATER LANE
 City TRUSSVILLE State AL Zip Code 35173-3504
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 275.00

Date of Receipt 10 / 24 / 2016
Transaction ID : SA11A.446084
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

B. PEEK, MARVIN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 222 SWEETWATER LANE
 City TRUSSVILLE State AL Zip Code 35173-3504
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 275.00

Date of Receipt 10 / 24 / 2016
Transaction ID : SA11A.446102
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

C. PEEK, MARVIN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 222 SWEETWATER LANE
 City TRUSSVILLE State AL Zip Code 35173-3504
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 275.00

Date of Receipt 10 / 24 / 2016
Transaction ID : SA11A.446103
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶ 150.00
TOTAL This Period (last page this line number only).....▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2827 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. PEINERT JR MD, ROBERT, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1808 PALM VALLEY DRIVE-WEST
 City HARLINGEN State TX Zip Code 78552-9033
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) VBMC HARLINGEN Occupation (for Individual) ORTHOPEDIC TRAUMA SURGEON
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 750.00

Date of Receipt 11 / 04 / 2016
Transaction ID : SA11A.474079
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

B. PELLETIER, JERRI, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4711 W. WACKERLY ST.
 City MIDLAND State MI Zip Code 48640-2188
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) JERRI PELLETIER Occupation (for Individual) ATHLETIC OFFICE MANAGER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 284.00

Date of Receipt 11 / 07 / 2016
Transaction ID : SA11A.480750
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

C. PELLETIER, JOHN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 199 MAIN STREET
 City VAN BUREN State ME Zip Code 04785-1256
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) UNIVERSITY OF MAINE AT FORT KEN Occupation (for Individual) PART-TIME INSTRUCTOR
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 1200.00

Date of Receipt 10 / 31 / 2016
Transaction ID : SA11A.459279
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 525.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2828 OF 4311
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. PELLETIER, JOHN, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 199 MAIN STREET

City VAN BUREN	State ME	Zip Code 04785-1256
-------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) UNIVERSITY OF MAINE AT FORT KEN	Occupation (for Individual) PART-TIME INSTRUCTOR
--	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1200.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	05	/	2016

Transaction ID : SA11A.479286

Amount of Each Receipt this Period
250.00

Memo Item CONTRIBUTION

B. PELLEGRINI, TERRY, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 550 W. FLAMINGO DR. UNIT 305

City VENICE	State FL	Zip Code 34285-3009
----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) SELF EMPLOYED	Occupation (for Individual) ATTORNEY
--	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	25	/	2016

Transaction ID : SA11A.448860

Amount of Each Receipt this Period
250.00

Memo Item CONTRIBUTION

C. PELLEGRINI, TERRY, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 550 W. FLAMINGO DR. UNIT 305

City VENICE	State FL	Zip Code 34285-3009
----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) SELF EMPLOYED	Occupation (for Individual) ATTORNEY
--	---

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
1500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	04	/	2016

Transaction ID : SA11A.472849

Amount of Each Receipt this Period
250.00

Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	750.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2829 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. PELTES, TERRY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 9447 S STAR HILL CIRCLE
 City LONE TREE State CO Zip Code 80124-5480
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) ENERGES SERVICES LLC Occupation (for Individual) CEO
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt 11 / 07 / 2016
Transaction ID : SA11A.480142
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

B. PELTES, TERRY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 9447 S STAR HILL CIRCLE
 City LONE TREE State CO Zip Code 80124-5480
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) ENERGES SERVICES LLC Occupation (for Individual) CEO
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt 11 / 07 / 2016
Transaction ID : SA11A.480144
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

C. PELTON, PEGGY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 6002 TWIN VALLEY COVE
 City AUSTIN State TX Zip Code 78731-3532
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NXP SEMICONDUCTOR INC Occupation (for Individual) ENGINEER
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt 11 / 04 / 2016
Transaction ID : SA11A.472087
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶ 150.00
TOTAL This Period (last page this line number only).....▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2830 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. PENCE, RUTH, C., MS.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1303 KIRKLAND VILLAGE CIRCLE
 City BETHLEHEM State PA Zip Code 18017-4759
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 10 / 25 / 2016
Transaction ID : SA11A.447471
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

B. PENCE, RUTH, C., MS.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1303 KIRKLAND VILLAGE CIRCLE
 City BETHLEHEM State PA Zip Code 18017-4759
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 11 / 04 / 2016
Transaction ID : SA11A.467655
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

C. PENSIERO, JAMES, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO BOX 1228
 City LANGLEY State WA Zip Code 98260-1228
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 11 / 04 / 2016
Transaction ID : SA11A.471784
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶ 150.00
TOTAL This Period (last page this line number only).....▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2831 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. PENTLER, GLENN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 20750 LINCOLMSHIRE CT
 City BROOKFIELD State WI Zip Code 53045-3008
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) UPTOWN FORD Occupation (for Individual) AUTO SALES
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 10 / 31 / 2016
Transaction ID : SA11A.458717
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

B. PENTLAND, ROBERT, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO BOX 908
 City ELK RAPIDS State MI Zip Code 49629-0908
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) TUTHILL CORPORATION Occupation (for Individual) VP OF CI
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 10 / 29 / 2016
Transaction ID : SA11A.460687
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

C. PENTON, HUGH, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 45 SAINT MALO BEACH
 City OCEANSIDE State CA Zip Code 92054-5854
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) STARTING TIME Occupation (for Individual) OWNER
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 550.00

Date of Receipt 10 / 22 / 2016
Transaction ID : SA11A.446960
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	325.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2832 OF 4311
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. PENTON, HUGH, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 45 SAINT MALO BEACH

City OCEANSIDE	State CA	Zip Code 92054-5854
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) STARTING TIME	Occupation (for Individual) OWNER
--	--------------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
550.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		25		2016

Transaction ID : SA11A.448646

Amount of Each Receipt this Period
50.00

Memo Item
CONTRIBUTION

B. PENTON, HUGH, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 45 SAINT MALO BEACH

City OCEANSIDE	State CA	Zip Code 92054-5854
-------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) STARTING TIME	Occupation (for Individual) OWNER
--	--------------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
550.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		25		2016

Transaction ID : SA11A.448648

Amount of Each Receipt this Period
50.00

Memo Item
CONTRIBUTION

C. PENTON, HUGH, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 45 SAINT MALO BEACH

City OCEANSIDE	State CA	Zip Code 92054-5854
-------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) STARTING TIME	Occupation (for Individual) OWNER
--	--------------------------------------

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
550.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11		01		2016

Transaction ID : SA11A.462222

Amount of Each Receipt this Period
25.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	125.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2833 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. PENTON, HUGH, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 45 SAINT MALO BEACH

City OCEANSIDE	State CA	Zip Code 92054-5854
-------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) STARTING TIME	Occupation (for Individual) OWNER
--	--------------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
550.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	04	/	2016

Transaction ID : SA11A.471792

Amount of Each Receipt this Period
25.00

Memo Item
CONTRIBUTION

B. PENTON, HUGH, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 45 SAINT MALO BEACH

City OCEANSIDE	State CA	Zip Code 92054-5854
-------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) STARTING TIME	Occupation (for Individual) OWNER
--	--------------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
550.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	07	/	2016

Transaction ID : SA11A.475922

Amount of Each Receipt this Period
25.00

Memo Item
CONTRIBUTION

C. PENTON, HUGH, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 45 SAINT MALO BEACH

City OCEANSIDE	State CA	Zip Code 92054-5854
-------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) STARTING TIME	Occupation (for Individual) OWNER
--	--------------------------------------

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
550.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	07	/	2016

Transaction ID : SA11A.480221

Amount of Each Receipt this Period
25.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	75.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2834 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. PERBETSKY, HANNY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2720 TAHOE VISTA COURT
 City ROCKLIN State CA Zip Code 95765-5092
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 450.00

Date of Receipt 10 / 25 / 2016
Transaction ID : SA11A.447540
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

B. PERETZ, FLORIAN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5932 TEAKWOOD
 City TROY State MI Zip Code 48085-3895
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 10 / 30 / 2016
Transaction ID : SA11A.464957
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

C. PERETZ, FLORIAN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5932 TEAKWOOD
 City TROY State MI Zip Code 48085-3895
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 11 / 04 / 2016
Transaction ID : SA11A.471280
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	600.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2835 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
Team Ryan

A. PEREZ, DENISE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2471 SAWTELLE BLVD.
 #201
 City LOS ANGELES State CA Zip Code 90064-1747
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) DENISE PEREZ Occupation (for Individual) DIRECTOR, GLOBAL REPORTING
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 330.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 25 / 2016
Transaction ID : SA11A.451961
 Amount of Each Receipt this Period
 30.00
 Memo Item
 CONTRIBUTION

B. PEREZ, DENISE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2471 SAWTELLE BLVD.
 #201
 City LOS ANGELES State CA Zip Code 90064-1747
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) DENISE PEREZ Occupation (for Individual) DIRECTOR, GLOBAL REPORTING
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 330.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 25 / 2016
Transaction ID : SA11A.451965
 Amount of Each Receipt this Period
 30.00
 Memo Item
 CONTRIBUTION

C. PEREZ, JOSE, G., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 54 HEATHER COURT
 City SCHERERVILLE State IN Zip Code 46375-1008
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) ARCELORMITTAL USA LLC Occupation (for Individual) OPERATING TECHNICIAN
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 552.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 20 / 2016
Transaction ID : SA11A.444904
 Amount of Each Receipt this Period
 25.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	85.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2836 OF 4311
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. PEREZ, WILLIAM, D., MR.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1320 N STATE PARKWAY

City CHICAGO	State IL	Zip Code 60610-2455
-----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
100000.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
10		28		2016

Transaction ID : SA11A.452491

Amount of Each Receipt this Period
25000.00

Memo Item
CONTRIBUTION

B. PERI, JAMES, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 255 N. SIERRA ST.
314

City RENO	State NV	Zip Code 89501-1349
--------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
500.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
10		26		2016

Transaction ID : SA11A.454662

Amount of Each Receipt this Period
250.00

Memo Item
CONTRIBUTION

C. PERI, JAMES, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 255 N. SIERRA ST.
314

City RENO	State NV	Zip Code 89501-1349
--------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
500.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
11		04		2016

Transaction ID : SA11A.470802

Amount of Each Receipt this Period
250.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	25500.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2837 OF 4311
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. PERKINS, DICK, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 8131 E HILLSDALE DR
City ORANGE State CA Zip Code 92869-2441
FEC ID number of contributing federal political committee. **C**
Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 300.00

Date of Receipt 10 / 25 / 2016
Transaction ID : SA11A.448400
Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

B. PERKINS, DICK, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 8131 E HILLSDALE DR
City ORANGE State CA Zip Code 92869-2441
FEC ID number of contributing federal political committee. **C**
Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 300.00

Date of Receipt 10 / 25 / 2016
Transaction ID : SA11A.448402
Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

C. PERKINS, DICK, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 8131 E HILLSDALE DR
City ORANGE State CA Zip Code 92869-2441
FEC ID number of contributing federal political committee. **C**
Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 300.00

Date of Receipt 11 / 04 / 2016
Transaction ID : SA11A.471372
Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	300.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2838 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. PERKINS, FREDERICK, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 8580 WOODWAY 3304
 City HOUSTON State TX Zip Code 77063-2423
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 750.00

Date of Receipt 10 / 28 / 2016
Transaction ID : SA11A.455702
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

B. PERKINS, FREDERICK, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 8580 WOODWAY 3304
 City HOUSTON State TX Zip Code 77063-2423
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 750.00

Date of Receipt 11 / 06 / 2016
Transaction ID : SA11A.477167
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

C. PERKINS, MARY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 211 AMPHILL ROAD
 City RICHMOND State VA Zip Code 23226-2234
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 11 / 10 / 2016
Transaction ID : SA11A.468215
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	400.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2839 OF 4311
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. PERKINS, R, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 32 STATION RD
 City DENVILLE State NJ Zip Code 07834-2465
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 10 / 28 / 2016
Transaction ID : SA11A.456020
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

B. PERKINS, R, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 32 STATION RD
 City DENVILLE State NJ Zip Code 07834-2465
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 11 / 04 / 2016
Transaction ID : SA11A.472841
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

C. PEROS, DINO, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4942 TALL CEDAR COURT
 City PIPERSVILLE State PA Zip Code 18947-1039
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) UNITED Occupation (for Individual) AIRLINE EMPLOYEE
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 10 / 28 / 2016
Transaction ID : SA11A.456162
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 200.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2840 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. PEROS, DINO, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 4942 TALL CEDAR COURT

City PIPERSVILLE	State PA	Zip Code 18947-1039
---------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) UNITED	Occupation (for Individual) AIRLINE EMPLOYEE
---	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
300.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	04	/	2016

Transaction ID : SA11A.471215

Amount of Each Receipt this Period
100.00

Memo Item CONTRIBUTION

B. PERRETTA, MICHAEL, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1933 WILLIAMSBRIDGE RD

City BRONX	State NY	Zip Code 10461-1604
---------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
360.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	26	/	2016

Transaction ID : SA11A.454566

Amount of Each Receipt this Period
120.00

Memo Item CONTRIBUTION

C. PERRETTA, MICHAEL, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1933 WILLIAMSBRIDGE RD

City BRONX	State NY	Zip Code 10461-1604
---------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
360.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	29	/	2016

Transaction ID : SA11A.460792

Amount of Each Receipt this Period
120.00

Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	340.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2841 OF 4311
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. PERRETTA, MICHAEL, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1933 WILLIAMSBRIDGE RD
 City BRONX State NY Zip Code 10461-1604
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 360.00

Date of Receipt 11 / 04 / 2016
Transaction ID : SA11A.470687
 Amount of Each Receipt this Period 120.00
 Memo Item CONTRIBUTION

B. PERRIGO, JOHN, M., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 111 CACHE CAY DRIVE
 City VERO BEACH State FL Zip Code 32963-1213
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 11 / 03 / 2016
Transaction ID : SA11A.465443
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

C. PERRICONE, JOSEPH, , MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 18 OLD COURSE DR.
 City NEWPORT BEACH State CA Zip Code 92660-4276
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) PERRICONE JUICES Occupation (for Individual) CHAIRMAN
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 11 / 06 / 2016
Transaction ID : SA11A.477280
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	470.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2842 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. PERRICONE, JOSEPH, , MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 18 OLD COURSE DR.
 City NEWPORT BEACH State CA Zip Code 92660-4276
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) PERRICONE JUICES Occupation (for Individual) CHAIRMAN
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 11 / 06 / 2016
Transaction ID : SA11A.477297
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

B. PERRIN, KATHLEEN, P., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO BOX 2173
 City FLINT State TX Zip Code 75762-2173
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 275.00

Date of Receipt 10 / 24 / 2016
Transaction ID : SA11A.443845
 Amount of Each Receipt this Period 200.00
 Memo Item CONTRIBUTION

C. PERRY, ADDIE, MITCHELL, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 865 OLD DALTON ROAD
 City ROME State GA Zip Code 30165-9096
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 380.00

Date of Receipt 10 / 24 / 2016
Transaction ID : SA11A.443805
 Amount of Each Receipt this Period 35.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 485.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2843 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
Team Ryan

A. PERRY, DOUGLAS, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 6404 HOSLER
 City LEO State IN Zip Code 46765-9760
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) SELF EMPLOYED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 10 / 30 / 2016
Transaction ID : SA11A.464860
 Amount of Each Receipt this Period 250.00
 Memo Item
 CONTRIBUTION

B. PERRY, MADELYN, S., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1226 MADISON AVENUE
 City WATERTOWN State NY Zip Code 13601-3816
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 560.00

Date of Receipt 10 / 23 / 2016
Transaction ID : SA11A.449600
 Amount of Each Receipt this Period 25.00
 Memo Item
 CONTRIBUTION

C. PERRY, MADELYN, S., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1226 MADISON AVENUE
 City WATERTOWN State NY Zip Code 13601-3816
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 560.00

Date of Receipt 10 / 23 / 2016
Transaction ID : SA11A.449601
 Amount of Each Receipt this Period 25.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	300.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2844 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. PERRY, MADELYN, S., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1226 MADISON AVENUE
 City WATERTOWN State NY Zip Code 13601-3816
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 560.00

Date of Receipt 10 / 30 / 2016
Transaction ID : SA11A.464880
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

B. PERRY, MADELYN, S., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1226 MADISON AVENUE
 City WATERTOWN State NY Zip Code 13601-3816
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 560.00

Date of Receipt 10 / 30 / 2016
Transaction ID : SA11A.464881
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

C. PERSICO, CHARLES, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 510 ROUND HILL ROAD
 City GREENWICH State CT Zip Code 06831-2641
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) REAL ESTATE
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt 10 / 25 / 2016
Transaction ID : SA11A.447295
 Amount of Each Receipt this Period 500.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 700.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2845 OF 4311
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. PERSONIUS, BRADLEY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 195 SERENITY LANE
 City GRANTS PASS State OR Zip Code 97526-9756
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SOUTHERN OREGON CARDIOLOGY Occupation (for Individual) CARDIOLOGIST
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 28 / 2016
Transaction ID : SA11A.455636
 Amount of Each Receipt this Period
 250.00
 Memo Item
 CONTRIBUTION

B. PESENSON, LEONID, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 10 RUTGERS CT
 City WESTFIELD State NJ Zip Code 07090-3441
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) MORGAN STANLEY Occupation (for Individual) SOFTWARE DEVELOPMENT MANAG
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 24 / 2016
Transaction ID : SA11A.445565
 Amount of Each Receipt this Period
 25.00
 Memo Item
 CONTRIBUTION

C. PESENSON, LEONID, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 10 RUTGERS CT
 City WESTFIELD State NJ Zip Code 07090-3441
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) MORGAN STANLEY Occupation (for Individual) SOFTWARE DEVELOPMENT MANAG
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 04 / 2016
Transaction ID : SA11A.471437
 Amount of Each Receipt this Period
 25.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	300.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2846 OF 4311
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. PESENON, LEONID, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 10 RUTGERS CT

City WESTFIELD	State NJ	Zip Code 07090-3441
-------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) MORGAN STANLEY	Occupation (for Individual) SOFTWARE DEVELOPMENT MANAG
---	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	04	/	2016

Transaction ID : SA11A.474062

Amount of Each Receipt this Period
25.00

Memo Item
CONTRIBUTION

B. PESTI-CRUSOE, AGNES, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 41150 FOX RUN, APT WB406
APT WB406

City NOVI	State MI	Zip Code 48377-4862
--------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	15	/	2016

Transaction ID : SA11A.468290

Amount of Each Receipt this Period
100.00

Memo Item
CONTRIBUTION

C. PETERS, BEVERLY, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 2411 BAYSHORE DRIVE

City NEWPORT BEACH	State CA	Zip Code 92663-5604
-----------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	26	/	2016

Transaction ID : SA11A.454597

Amount of Each Receipt this Period
250.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	375.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2847 OF 4311
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. PETERS, BEVERLY, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 2411 BAYSHORE DRIVE

City NEWPORT BEACH	State CA	Zip Code 92663-5604
-----------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		26		2016

Transaction ID : SA11A.454598

Amount of Each Receipt this Period
250.00

Memo Item CONTRIBUTION

B. PETERS, BRIAN, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address PO BOX 129

City LISBON	State MD	Zip Code 21765-0129
----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
450.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		31		2016

Transaction ID : SA11A.458676

Amount of Each Receipt this Period
50.00

Memo Item CONTRIBUTION

C. PETERSON, BRUCE, , MR.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 928 SO HIGH ST

City DENVER	State CO	Zip Code 80209-4551
----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) RIO GRANDE CO	Occupation (for Individual) MANAGER
--	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
5000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		30		2016

Transaction ID : SA11A.459983

Amount of Each Receipt this Period
500.00

Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	800.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 2848 OF 4311
	(check only one)
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
<input type="checkbox"/> 13	<input type="checkbox"/> 14
<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/>	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Team Ryan

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name A. PETERSON, CHARLEY, , ,			Date of Receipt M M M / D D D / Y Y Y Y Y Y 10 / 28 / 2016		
Mailing Address 305 N HYDE ST			Transaction ID : SA11A.455040		
City ATKINSON	State NE	Zip Code 68713-4485	Amount of Each Receipt this Period 100.00		
FEC ID number of contributing federal political committee. C			<input type="checkbox"/> Memo Item CONTRIBUTION		
Name of Employer (for Individual) CHARLEY W PETERSON		Occupation (for Individual) DRIVER			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 475.00			

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name B. PETERSON, CHARLEY, , ,			Date of Receipt M M M / D D D / Y Y Y Y Y Y 10 / 28 / 2016		
Mailing Address 305 N HYDE ST			Transaction ID : SA11A.456094		
City ATKINSON	State NE	Zip Code 68713-4485	Amount of Each Receipt this Period 50.00		
FEC ID number of contributing federal political committee. C			<input type="checkbox"/> Memo Item CONTRIBUTION		
Name of Employer (for Individual) CHARLEY W PETERSON		Occupation (for Individual) DRIVER			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 475.00			

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name C. PETERSON, CHARLEY, , ,			Date of Receipt M M M / D D D / Y Y Y Y Y Y 11 / 04 / 2016		
Mailing Address 305 N HYDE ST			Transaction ID : SA11A.471183		
City ATKINSON	State NE	Zip Code 68713-4485	Amount of Each Receipt this Period 50.00		
FEC ID number of contributing federal political committee. C			<input type="checkbox"/> Memo Item CONTRIBUTION		
Name of Employer (for Individual) CHARLEY W PETERSON		Occupation (for Individual) DRIVER			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		Aggregate Year-to-Date ▼ 475.00			

SUBTOTAL of Receipts This Page (optional).....▶	200.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2849 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. PETERS, DONALD, W., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 40 MMASSEY DR.
 City WESTERVILLE State OH Zip Code 43081-1941
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 600.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 26 / 2016
Transaction ID : SA11A.454368
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION

B. PETERS, DONALD, W., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 40 MMASSEY DR.
 City WESTERVILLE State OH Zip Code 43081-1941
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 600.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 04 / 2016
Transaction ID : SA11A.473877
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION

C. PETERS, DOUGLAS, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 16310 SAINT HELIER
 City JERSEY VILLAGE State TX Zip Code 77040-2064
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 29 / 2016
Transaction ID : SA11A.460935
 Amount of Each Receipt this Period
 50.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	250.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2850 OF 4311
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. PETERS, DOUGLAS, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 16310 SAINT HELIER

City JERSEY VILLAGE	State TX	Zip Code 77040-2064
------------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	29	/	2016

Transaction ID : SA11A.460936

Amount of Each Receipt this Period
50.00

Memo Item CONTRIBUTION

B. PETERSON, EDA, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 303 EAST MIDDLE PATENT ROAD

City GREENWICH	State CT	Zip Code 06831-2810
-------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) SELF EMPLOYED	Occupation (for Individual) ARTIST
--	---------------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
300.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	07	/	2016

Transaction ID : SA11A.476188

Amount of Each Receipt this Period
25.00

Memo Item CONTRIBUTION

C. PETERSON, EDA, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 303 EAST MIDDLE PATENT ROAD

City GREENWICH	State CT	Zip Code 06831-2810
-------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) SELF EMPLOYED	Occupation (for Individual) ARTIST
--	---------------------------------------

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
300.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	07	/	2016

Transaction ID : SA11A.476192

Amount of Each Receipt this Period
25.00

Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	100.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2851 OF 4311
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. PETERSON, EDA, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 303 EAST MIDDLE PATENT ROAD

City GREENWICH State CT Zip Code 06831-2810

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) ARTIST

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
300.00

Date of Receipt
11 / 06 / 2016
Transaction ID : SA11A.477574

Amount of Each Receipt this Period
100.00

Memo Item
CONTRIBUTION

B. PETERS, GORDON, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 336 SALEM CHURCH RD

City SUNFISH LAKE State MN Zip Code 55118-4719

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
3000.00

Date of Receipt
11 / 04 / 2016
Transaction ID : SA11A.472893

Amount of Each Receipt this Period
1000.00

Memo Item
CONTRIBUTION

C. PETERSON, JOHN, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 10412 SE 196TH STREET

City RENTON State WA Zip Code 98055-7307

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
400.00

Date of Receipt
10 / 27 / 2016
Transaction ID : SA11A.457064

Amount of Each Receipt this Period
100.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	1200.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2852 OF 4311
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. PETERSON, JOHN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 7 ROBERTS DRIVE
 City WESTAMPTON State NJ Zip Code 08060-4401
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) INFECTIOUS DISEASE PHYSICIANS PA Occupation (for Individual) PHYSICIAN
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 10 / 31 / 2016
Transaction ID : SA11A.459137
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

B. PETERSON, JOHN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 7 ROBERTS DRIVE
 City WESTAMPTON State NJ Zip Code 08060-4401
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) INFECTIOUS DISEASE PHYSICIANS PA Occupation (for Individual) PHYSICIAN
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 11 / 04 / 2016
Transaction ID : SA11A.471611
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

C. PETERMAN, JOHN, W., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3815 N BROOKFIELD RD
 City BROOKFIELD State WI Zip Code 53045-1964
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 350.00

Date of Receipt 10 / 29 / 2016
Transaction ID : SA11A.461128
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶ 125.00
TOTAL This Period (last page this line number only).....▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2853 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. PETERMAN, JOHN, W., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3815 N BROOKFIELD RD
 City BROOKFIELD State WI Zip Code 53045-1964
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 350.00

Date of Receipt 11 / 04 / 2016
Transaction ID : SA11A.472176
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

B. PETERSON, LARS, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4226 50TH STREET NW
 City WASHINGTON State DC Zip Code 20016-1904
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 600.00

Date of Receipt 10 / 25 / 2016
Transaction ID : SA11A.451525
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

C. PETERSON, LARRY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 10700 NORTH FREEWAY 950
 City HOUSTON State TX Zip Code 77037-1103
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) PETERSON BECKNER INDUSTRIES, INC. Occupation (for Individual) CONTRACTOR
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 650.00

Date of Receipt 10 / 31 / 2016
Transaction ID : SA11A.458512
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	325.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2854 OF 4311
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. PETERSON, LARS, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 4226 50TH STREET NW

City WASHINGTON	State DC	Zip Code 20016-1904
--------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
600.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		30		2016

Transaction ID : SA11A.460016

Amount of Each Receipt this Period
50.00

Memo Item CONTRIBUTION

B. PETERSON, LARS, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 4226 50TH STREET NW

City WASHINGTON	State DC	Zip Code 20016-1904
--------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
600.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		29		2016

Transaction ID : SA11A.460902

Amount of Each Receipt this Period
50.00

Memo Item CONTRIBUTION

C. PETERSON, LARS, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 4226 50TH STREET NW

City WASHINGTON	State DC	Zip Code 20016-1904
--------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
600.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11		07		2016

Transaction ID : SA11A.480098

Amount of Each Receipt this Period
25.00

Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	125.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2855 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. PETERSON, LARS, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4226 50TH STREET NW
 City WASHINGTON State DC Zip Code 20016-1904
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 600.00

Date of Receipt
 11 / 07 / 2016
Transaction ID : SA11A.480109
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

B. PETERS, MILDRED, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2034 E GREENHAVEN STREET
 City COVINA State CA Zip Code 91724-1826
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 243.00

Date of Receipt
 10 / 24 / 2016
Transaction ID : SA11A.445800
 Amount of Each Receipt this Period 18.00
 Memo Item CONTRIBUTION

C. PETERS, MILDRED, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2034 E GREENHAVEN STREET
 City COVINA State CA Zip Code 91724-1826
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 243.00

Date of Receipt
 10 / 24 / 2016
Transaction ID : SA11A.445819
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	93.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2856 OF 4311
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. PETERS, MILDRED, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 2034 E GREENHAVEN STREET

City COVINA	State CA	Zip Code 91724-1826
----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
243.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	02	/	2016

Transaction ID : SA11A.465009

Amount of Each Receipt this Period
100.00

Memo Item CONTRIBUTION

B. PETERSON, RALPH, D., ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 12 MARINERS POINT

City CROSSVILLE	State TN	Zip Code 38558-2771
--------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
225.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	27	/	2016

Transaction ID : SA11A.453885

Amount of Each Receipt this Period
75.00

Memo Item CONTRIBUTION

C. PETERSON, ROBERT, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 160ST. ANDREWS LANE

City GLENMOORE	State PA	Zip Code 19343-
-------------------	-------------	--------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
400.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	04	/	2016

Transaction ID : SA11A.471562

Amount of Each Receipt this Period
100.00

Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	275.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2857 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. PETERSON, THERON, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1516 STONE RIDGE MOUNTAIN DRIV
 City ROUND MOUNTAIN State TX Zip Code 78663-2001
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt **11 / 02 / 2016**
Transaction ID : SA11A.465838
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

B. PETERSON, W, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3412 CHATSWORTH LANE
 City ORLANDO State FL Zip Code 32812-6032
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RISSMAN, BARRETT, HURT, ET.AL. Occupation (for Individual) LEGAL ADMINISTRATOR
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 600.00

Date of Receipt **10 / 24 / 2016**
Transaction ID : SA11A.449395
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

C. PETERSON, W, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3412 CHATSWORTH LANE
 City ORLANDO State FL Zip Code 32812-6032
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RISSMAN, BARRETT, HURT, ET.AL. Occupation (for Individual) LEGAL ADMINISTRATOR
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 600.00

Date of Receipt **11 / 07 / 2016**
Transaction ID : SA11A.474892
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	600.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2858 OF 4311
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. PETRILLO JR, EDWARD, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 3201 NE 183RD STREET
3003

City AVENTURA State FL Zip Code 33160-2486

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt
10 / 21 / 2016
Transaction ID : SA11A.444273

Amount of Each Receipt this Period
100.00

Memo Item CONTRIBUTION

B. PETRINO, JEFFREY, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 324 S. FAYETTE ST.

City ALEXANDRIA State VA Zip Code 22314-5903

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) ADDX CORP Occupation (for Individual) CONTRACTING CONSULTANT

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
325.00

Date of Receipt
10 / 27 / 2016
Transaction ID : SA11A.452883

Amount of Each Receipt this Period
25.00

Memo Item CONTRIBUTION

C. PETRINO, JEFFREY, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 324 S. FAYETTE ST.

City ALEXANDRIA State VA Zip Code 22314-5903

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) ADDX CORP Occupation (for Individual) CONTRACTING CONSULTANT

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
325.00

Date of Receipt
10 / 27 / 2016
Transaction ID : SA11A.452892

Amount of Each Receipt this Period
40.00

Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶ 165.00

TOTAL This Period (last page this line number only).....▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2859 OF 4311
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. PETRINO, JEFFREY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 324 S. FAYETTE ST.
 City ALEXANDRIA State VA Zip Code 22314-5903
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) ADDX CORP Occupation (for Individual) CONTRACTING CONSULTANT
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 325.00

Date of Receipt **10 / 27 / 2016**
Transaction ID : SA11A.452895
 Amount of Each Receipt this Period 40.00
 Memo Item CONTRIBUTION

B. PETRINO, JEFFREY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 324 S. FAYETTE ST.
 City ALEXANDRIA State VA Zip Code 22314-5903
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) ADDX CORP Occupation (for Individual) CONTRACTING CONSULTANT
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 325.00

Date of Receipt **11 / 06 / 2016**
Transaction ID : SA11A.480905
 Amount of Each Receipt this Period 40.00
 Memo Item CONTRIBUTION

C. PETRIELLO, LOUIS, J., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 526 TOWNSHIP LINE ROAD SUITE 200
 City BLUE BELL State PA Zip Code 19422-2738
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) ATTORNEY
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 475.00

Date of Receipt **10 / 24 / 2016**
Transaction ID : SA11A.445939
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶ 105.00
TOTAL This Period (last page this line number only).....▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2860 OF 4311
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. PETRIELLO, LOUIS, J., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 526 TOWNSHIP LINE ROAD
 SUITE 200
 City BLUE BELL State PA Zip Code 19422-2738
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) ATTORNEY
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 475.00

Date of Receipt 11 / 04 / 2016
Transaction ID : SA11A.473408
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

B. PETROTTA, PAUL, J., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 737 E. PEPPERRIDGE DR
 9
 City BLOOMINGTON State IN Zip Code 47401-9884
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 205.00

Date of Receipt 10 / 28 / 2016
Transaction ID : SA11A.456394
 Amount of Each Receipt this Period 30.00
 Memo Item CONTRIBUTION

C. PETRY, PATRICE, S., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 547 HILL TERRAACE
 202
 City WINNETKA State IL Zip Code 60093-
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 11 / 01 / 2016
Transaction ID : SA11A.462592
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶ 155.00
TOTAL This Period (last page this line number only).....▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2861 OF 4311
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. PETRY, PATRICE, S., MR.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 547 HILL TERRACE
202

City WINNETKA State IL Zip Code 60093-

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt
11 / 04 / 2016
Transaction ID : SA11A.479475

Amount of Each Receipt this Period
100.00

Memo Item CONTRIBUTION

B. PETTENGILL, ROBERT, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 608 W. MAIN ST.

City BRIGHTON State MI Zip Code 48116-1450

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
510.00

Date of Receipt
10 / 20 / 2016
Transaction ID : SA11A.441986

Amount of Each Receipt this Period
510.00

Memo Item CONTRIBUTION

C. PETTY, BARBARA, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1512 HEIRLOOM CT

City ST LOUIS State MO Zip Code 63146-4312

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
260.00

Date of Receipt
10 / 26 / 2016
Transaction ID : SA11A.454606

Amount of Each Receipt this Period
30.00

Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 640.00

TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2862 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. PETTY, BARBARA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1512 HEIRLOOM CT
 City ST LOUIS State MO Zip Code 63146-4312
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 260.00

Date of Receipt 10 / 26 / 2016
Transaction ID : SA11A.454608
 Amount of Each Receipt this Period 30.00
 Memo Item CONTRIBUTION

B. PETTY, BARBARA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1512 HEIRLOOM CT
 City ST LOUIS State MO Zip Code 63146-4312
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 260.00

Date of Receipt 10 / 26 / 2016
Transaction ID : SA11A.454617
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

C. PETTY, BARBARA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1512 HEIRLOOM CT
 City ST LOUIS State MO Zip Code 63146-4312
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 260.00

Date of Receipt 10 / 26 / 2016
Transaction ID : SA11A.454618
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 80.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2863 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. PETTY, BARBARA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1512 HEIRLOOM CT
 City ST LOUIS State MO Zip Code 63146-4312
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 260.00

Date of Receipt 10 / 31 / 2016
Transaction ID : SA11A.464467
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

B. PETTY, BARBARA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1512 HEIRLOOM CT
 City ST LOUIS State MO Zip Code 63146-4312
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 260.00

Date of Receipt 10 / 31 / 2016
Transaction ID : SA11A.464489
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

C. PETTY, BARBARA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1512 HEIRLOOM CT
 City ST LOUIS State MO Zip Code 63146-4312
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 260.00

Date of Receipt 10 / 31 / 2016
Transaction ID : SA11A.464496
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 75.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2864 OF 4311
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. PEZOLD, JOHN, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 600 BROOKSTONE CENTRE PKWY

City COLUMBUS	State GA	Zip Code 31904-3097
------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) PEZOLD MANAGEMENT	Occupation (for Individual) EXECUTIVE
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		25		2016

Transaction ID : SA11A.447984

Amount of Each Receipt this Period
250.00

Memo Item
CONTRIBUTION

B. PEZOLD, JOHN, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 600 BROOKSTONE CENTRE PKWY

City COLUMBUS	State GA	Zip Code 31904-3097
------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) PEZOLD MANAGEMENT	Occupation (for Individual) EXECUTIVE
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11		04		2016

Transaction ID : SA11A.470809

Amount of Each Receipt this Period
250.00

Memo Item
CONTRIBUTION

C. PFABE, DENNIS, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 6586 SERENITY LOOP

City GIG HARBOR	State WA	Zip Code 98335-5504
--------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) UNITED GRINDING & MACH	Occupation (for Individual) MANAGER
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11		01		2016

Transaction ID : SA11A.462442

Amount of Each Receipt this Period
100.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	600.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2865 OF 4311
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
PFISTERER, DIETER, , ,

Mailing Address 757MC COY RD

City FRANKLIN LAKES	State NJ	Zip Code 07417-1228
------------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) PFISTER ROOFING	Occupation (for Individual) RETIRED
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1150.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		26		2016

Transaction ID : SA11A.450474

Amount of Each Receipt this Period
250.00

Memo Item CONTRIBUTION

B. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
PFISTERER, DIETER, , ,

Mailing Address 757MC COY RD

City FRANKLIN LAKES	State NJ	Zip Code 07417-1228
------------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) PFISTER ROOFING	Occupation (for Individual) RETIRED
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1150.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		26		2016

Transaction ID : SA11A.450477

Amount of Each Receipt this Period
250.00

Memo Item CONTRIBUTION

C. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
PFISTERER, DIETER, , ,

Mailing Address 757MC COY RD

City FRANKLIN LAKES	State NJ	Zip Code 07417-1228
------------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) PFISTER ROOFING	Occupation (for Individual) RETIRED
--	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
1150.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11		04		2016

Transaction ID : SA11A.471310

Amount of Each Receipt this Period
250.00

Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	750.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2866 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. PFISTERER, DIETER, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 757MC COY RD
 City FRANKLIN LAKES State NJ Zip Code 07417-1228
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) PFISTER ROOFING Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1150.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 04 / 2016
Transaction ID : SA11A.472012
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION

B. PFISTER, GERALD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 207 HIDEAWAY DR
 City KENTON State OH Zip Code 43326-2606
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 725.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 27 / 2016
Transaction ID : SA11A.456879
 Amount of Each Receipt this Period
 25.00
 Memo Item
 CONTRIBUTION

C. PFISTER, GERALD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 207 HIDEAWAY DR
 City KENTON State OH Zip Code 43326-2606
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 725.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 31 / 2016
Transaction ID : SA11A.464304
 Amount of Each Receipt this Period
 25.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	150.00
TOTAL This Period (last page this line number only).....	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 2867 OF 4311
<input checked="" type="checkbox"/>	11a	<input type="checkbox"/>	11b
<input type="checkbox"/>	13	<input type="checkbox"/>	14
<input type="checkbox"/>		<input type="checkbox"/>	11c
<input type="checkbox"/>		<input type="checkbox"/>	12
<input type="checkbox"/>		<input type="checkbox"/>	15
<input type="checkbox"/>		<input type="checkbox"/>	16
<input type="checkbox"/>		<input type="checkbox"/>	17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
PFISTER, GERALD, , ,

Mailing Address 207 HIDEAWAY DR

City KENTON	State OH	Zip Code 43326-2606
----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
725.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 31 / 2016

Transaction ID : SA11A.464310

Amount of Each Receipt this Period
25.00

Memo Item
CONTRIBUTION

B. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
PFISTER, GERALD, , ,

Mailing Address 207 HIDEAWAY DR

City KENTON	State OH	Zip Code 43326-2606
----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
725.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 31 / 2016

Transaction ID : SA11A.464313

Amount of Each Receipt this Period
25.00

Memo Item
CONTRIBUTION

C. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
PFISTER, GERALD, , ,

Mailing Address 207 HIDEAWAY DR

City KENTON	State OH	Zip Code 43326-2606
----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
725.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 31 / 2016

Transaction ID : SA11A.464318

Amount of Each Receipt this Period
25.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	75.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2868 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. PFISTER, GERALD, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 207 HIDEAWAY DR

City KENTON	State OH	Zip Code 43326-2606
----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
725.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	04	/	2016

Transaction ID : SA11A.479470

Amount of Each Receipt this Period
50.00

Memo Item
CONTRIBUTION

B. PFISTER, GERALD, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 207 HIDEAWAY DR

City KENTON	State OH	Zip Code 43326-2606
----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
725.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	07	/	2016

Transaction ID : SA11A.480404

Amount of Each Receipt this Period
25.00

Memo Item
CONTRIBUTION

C. PFISTER, GERALD, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 207 HIDEAWAY DR

City KENTON	State OH	Zip Code 43326-2606
----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
725.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	07	/	2016

Transaction ID : SA11A.480409

Amount of Each Receipt this Period
25.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	100.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2869 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. PFOST, DONALD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 18717 BOEHNER RD
 City CALDWELL State ID Zip Code 83607-9097
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 228.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 03 / 2016
Transaction ID : SA11A.474436
 Amount of Each Receipt this Period
 114.00
 Memo Item CONTRIBUTION

B. PHAIR, JOSEPH, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 120 SAN BENITO WAY
 City SAN FRANCISCO State CA Zip Code 94127-2016
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 950.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 01 / 2016
Transaction ID : SA11A.462517
 Amount of Each Receipt this Period
 100.00
 Memo Item CONTRIBUTION

C. PHAIR, JOSEPH, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 120 SAN BENITO WAY
 City SAN FRANCISCO State CA Zip Code 94127-2016
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 950.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 05 / 2016
Transaction ID : SA11A.478947
 Amount of Each Receipt this Period
 100.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	314.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2870 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. PHAIR, JOSEPH, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 120 SAN BENITO WAY
 City SAN FRANCISCO State CA Zip Code 94127-2016
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 950.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 11 / 05 / 2016
Transaction ID : SA11A.478948
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION

B. PHELPS, CARRIE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 18300 HENRY COURT
 City RAT State MI Zip Code 48096-3548
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 11 / 04 / 2016
Transaction ID : SA11A.471690
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION

C. PHELPS, CHRISTINE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 210 RIM CANYON PKWY
 City OROVILLE State CA Zip Code 95966-5702
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 806.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 10 / 21 / 2016
Transaction ID : SA11A.444570
 Amount of Each Receipt this Period
 35.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	235.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2871 OF 4311
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. PHELPS, CHRISTINE, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 210 RIM CANYON PKWY

City OROVILLE	State CA	Zip Code 95966-5702
------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
806.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	27	/	2016

Transaction ID : SA11A.453801

Amount of Each Receipt this Period
25.00

Memo Item CONTRIBUTION

B. PHELPS, CHRISTINE, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 210 RIM CANYON PKWY

City OROVILLE	State CA	Zip Code 95966-5702
------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
806.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	04	/	2016

Transaction ID : SA11A.471627

Amount of Each Receipt this Period
25.00

Memo Item CONTRIBUTION

C. PHELPS, CHRISTINE, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 210 RIM CANYON PKWY

City OROVILLE	State CA	Zip Code 95966-5702
------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
806.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	04	/	2016

Transaction ID : SA11A.472126

Amount of Each Receipt this Period
35.00

Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	85.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2872 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. PHELPS, PETER, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 8125 ROCKFIELD COURT
 City FAIR OAKS State CA Zip Code 95628-5115
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 230.00

Date of Receipt **10 / 21 / 2016**
Transaction ID : SA11A.444477
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

B. PHELPS, PETER, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 8125 ROCKFIELD COURT
 City FAIR OAKS State CA Zip Code 95628-5115
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 230.00

Date of Receipt **11 / 06 / 2016**
Transaction ID : SA11A.476920
 Amount of Each Receipt this Period 30.00
 Memo Item CONTRIBUTION

C. PHELPS, TIMOTHY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 8467 MONARCH CT
 City ANNANDALE State VA Zip Code 22003-1174
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) DCS CORPORATION Occupation (for Individual) ACCOUNTANT
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt **10 / 28 / 2016**
Transaction ID : SA11A.455540
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶ 180.00
TOTAL This Period (last page this line number only).....▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2873 OF 4311
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. PHELPS, TIMOTHY, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 8467 MONARCH CT
City ANNANDALE State VA Zip Code 22003-1174
FEC ID number of contributing federal political committee. **C**
Name of Employer (for Individual) DCS CORPORATION Occupation (for Individual) ACCOUNTANT
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 400.00

Date of Receipt 11 / 04 / 2016
Transaction ID : SA11A.470878
Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

B. PHELPS, TREVA, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 1340 SW 52ND STREET 1340
City OKLAHOMA CITY State OK Zip Code 73119-6202
FEC ID number of contributing federal political committee. **C**
Name of Employer (for Individual) QUEST DIAGNOSTICS Occupation (for Individual) MLT
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 290.00

Date of Receipt 11 / 06 / 2016
Transaction ID : SA11A.478082
Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

C. PHELPS, TREVA, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 1340 SW 52ND STREET 1340
City OKLAHOMA CITY State OK Zip Code 73119-6202
FEC ID number of contributing federal political committee. **C**
Name of Employer (for Individual) QUEST DIAGNOSTICS Occupation (for Individual) MLT
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 290.00

Date of Receipt 11 / 06 / 2016
Transaction ID : SA11A.478083
Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶ 150.00
TOTAL This Period (last page this line number only).....▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2874 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. PHELPS, TREVA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1340 SW 52ND STREET
 1340
 City OKLAHOMA CITY State OK Zip Code 73119-6202
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) QUEST DIAGNOSTICS Occupation (for Individual) MLT
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 290.00

Date of Receipt 11 / 06 / 2016
Transaction ID : SA11A.478085
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

B. PHILIP, ROLAND, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2325 DELAMERE DRIVE
 City CLEVELAND HEIGHTS State OH Zip Code 44106-3205
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 900.00

Date of Receipt 10 / 21 / 2016
Transaction ID : SA11A.444159
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

C. PHILIP, ROLAND, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2325 DELAMERE DRIVE
 City CLEVELAND HEIGHTS State OH Zip Code 44106-3205
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 900.00

Date of Receipt 10 / 25 / 2016
Transaction ID : SA11A.447929
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 225.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2875 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. PHILIP, ROLAND, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2325 DELAMERE DRIVE
 City CLEVELAND HEIGHTS State OH Zip Code 44106-3205
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 900.00

Date of Receipt 11 / 04 / 2016
Transaction ID : SA11A.474223
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

B. PHILIP, ROLAND, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2325 DELAMERE DRIVE
 City CLEVELAND HEIGHTS State OH Zip Code 44106-3205
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 900.00

Date of Receipt 11 / 05 / 2016
Transaction ID : SA11A.478846
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

C. PHILLIPS, JERRY, R., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 19200 MIDDLETOWN ROAD
 City PARKTON State MD Zip Code 21120-9693
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) AIM INC Occupation (for Individual) PRES
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 11 / 07 / 2016
Transaction ID : SA11A.467764
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	300.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2876 OF 4311
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. PHILLIPS, JOHN, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 8191 WILSHIRE LAKES BLVD

City NAPLES	State FL	Zip Code 34109-0796
----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
300.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	30	/	2016

Transaction ID : SA11A.464838

Amount of Each Receipt this Period
300.00

Memo Item
CONTRIBUTION

B. PHILLIPPE, MARTIN, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 13330 ROUTE 31

City SAVANNAH	State NY	Zip Code 13146-
------------------	-------------	--------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) LAKELAND EQUIPMENT CORP	Occupation (for Individual) OWNER/MANAGER
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
225.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	03	/	2016

Transaction ID : SA11A.469094

Amount of Each Receipt this Period
25.00

Memo Item
CONTRIBUTION

C. PHILLIPS, PATTY, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 3867 CANTELOW ROAD

City VACAVILLE	State CA	Zip Code 95688-9797
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	24	/	2016

Transaction ID : SA11A.449161

Amount of Each Receipt this Period
50.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	375.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2877 OF 4311
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. PHILLIPS, PATTY, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 3867 CANTELOW ROAD

City VACAVILLE	State CA	Zip Code 95688-9797
-------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		24		2016

Transaction ID : SA11A.449163

Amount of Each Receipt this Period
50.00

Memo Item
CONTRIBUTION

B. PHILLIPS, PATTY, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 3867 CANTELOW ROAD

City VACAVILLE	State CA	Zip Code 95688-9797
-------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11		06		2016

Transaction ID : SA11A.477180

Amount of Each Receipt this Period
50.00

Memo Item
CONTRIBUTION

C. PIAZZOLA, MARTIN, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 16 GIFFARD WAY

City MELVILLE	State NY	Zip Code 11747-2311
------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) AVALONBAY COMMUNITIES INC.	Occupation (for Individual) REAL ESTATE DEVELOPER
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
475.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		28		2016

Transaction ID : SA11A.455991

Amount of Each Receipt this Period
50.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	150.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2878 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. PIAZZOLA, MARTIN, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 16 GIFFARD WAY

City MELVILLE	State NY	Zip Code 11747-2311
------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) AVALONBAY COMMUNITIES INC.	Occupation (for Individual) REAL ESTATE DEVELOPER
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
475.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	02	/	2016

Transaction ID : SA11A.469355

Amount of Each Receipt this Period
75.00

Memo Item
CONTRIBUTION

B. PIAZZOLA, MARTIN, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 16 GIFFARD WAY

City MELVILLE	State NY	Zip Code 11747-2311
------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) AVALONBAY COMMUNITIES INC.	Occupation (for Individual) REAL ESTATE DEVELOPER
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
475.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	04	/	2016

Transaction ID : SA11A.472825

Amount of Each Receipt this Period
50.00

Memo Item
CONTRIBUTION

C. PIAZZOLA, MARTIN, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 16 GIFFARD WAY

City MELVILLE	State NY	Zip Code 11747-2311
------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) AVALONBAY COMMUNITIES INC.	Occupation (for Individual) REAL ESTATE DEVELOPER
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
475.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	04	/	2016

Transaction ID : SA11A.473119

Amount of Each Receipt this Period
50.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	175.00
TOTAL This Period (last page this line number only).....▶	

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2879 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
-----------------------------	-----------------------------	-----------------------------

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NAME OF COMMITTEE (In Full)
Team Ryan

A. PIAZZOLA, MARTIN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 16 GIFFARD WAY
 City MELVILLE State NY Zip Code 11747-2311
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) AVALONBAY COMMUNITIES INC. Occupation (for Individual) REAL ESTATE DEVELOPER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 475.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 06 / 2016
Transaction ID : SA11A.476931
 Amount of Each Receipt this Period
 50.00
 Memo Item
 CONTRIBUTION

B. PICCIOTTI, TONY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address P.O. BOX 267
 City WILLIAMS State AZ Zip Code 86046-0267
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1125.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 24 / 2016
Transaction ID : SA11A.445585
 Amount of Each Receipt this Period
 50.00
 Memo Item
 CONTRIBUTION

C. PICCIOTTI, TONY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address P.O. BOX 267
 City WILLIAMS State AZ Zip Code 86046-0267
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1125.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 26 / 2016
Transaction ID : SA11A.451203
 Amount of Each Receipt this Period
 50.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	150.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2880 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. PICCIOTTI, TONY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address P.O. BOX 267
 City WILLIAMS State AZ Zip Code 86046-0267
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1125.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 27 / 2016
Transaction ID : SA11A.453970
 Amount of Each Receipt this Period
 50.00
 Memo Item
 CONTRIBUTION

B. PICCIOTTI, TONY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address P.O. BOX 267
 City WILLIAMS State AZ Zip Code 86046-0267
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1125.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 01 / 2016
Transaction ID : SA11A.462278
 Amount of Each Receipt this Period
 50.00
 Memo Item
 CONTRIBUTION

C. PICCIOTTI, TONY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address P.O. BOX 267
 City WILLIAMS State AZ Zip Code 86046-0267
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1125.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 30 / 2016
Transaction ID : SA11A.464851
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	200.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2881 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
Team Ryan

A. PICCIOTTI, TONY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address P.O. BOX 267

City WILLIAMS	State AZ	Zip Code 86046-0267
------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1125.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 02 / 2016

Transaction ID : SA11A.465829

Amount of Each Receipt this Period
50.00

Memo Item
CONTRIBUTION

B. PICCIOTTI, TONY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address P.O. BOX 267

City WILLIAMS	State AZ	Zip Code 86046-0267
------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1125.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 07 / 2016

Transaction ID : SA11A.476297

Amount of Each Receipt this Period
25.00

Memo Item
CONTRIBUTION

C. PICCIOTTI, TONY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address P.O. BOX 267

City WILLIAMS	State AZ	Zip Code 86046-0267
------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
1125.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 05 / 2016

Transaction ID : SA11A.478727

Amount of Each Receipt this Period
50.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	125.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2882 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. PICHOTTA, NICHOLAS, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1086 CEDAR ROAD
 City SOUTHPORT State CT Zip Code 06890-1007
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 24 / 2016
Transaction ID : SA11A.446036
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION

B. PICHOTTA, NICHOLAS, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1086 CEDAR ROAD
 City SOUTHPORT State CT Zip Code 06890-1007
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 24 / 2016
Transaction ID : SA11A.446039
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION

C. PICKERING, DARYL, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 14 1 8 WOODBRIDGE ROAD
 City BALTIMORE State MD Zip Code 21228-
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) PROSPERITY HOME LOANS Occupation (for Individual) MORTGAGE UNDERWRITER
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 24 / 2016
Transaction ID : SA11A.446001
 Amount of Each Receipt this Period
 50.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	250.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2883 OF 4311
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. PICKERING, DARYL, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 14 1 8 WOODBRIDGE ROAD

City BALTIMORE	State MD	Zip Code 21228-
-------------------	-------------	--------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) PROSPERITY HOME LOANS	Occupation (for Individual) MORTGAGE UNDERWRITER
--	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
11		03		2016

Transaction ID : SA11A.468700

Amount of Each Receipt this Period
25.00

Memo Item
CONTRIBUTION

B. PICKERING, DARYL, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 14 1 8 WOODBRIDGE ROAD

City BALTIMORE	State MD	Zip Code 21228-
-------------------	-------------	--------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) PROSPERITY HOME LOANS	Occupation (for Individual) MORTGAGE UNDERWRITER
--	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
11		03		2016

Transaction ID : SA11A.468701

Amount of Each Receipt this Period
25.00

Memo Item
CONTRIBUTION

C. PICKENS, RONALD, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1700 GOUGH STREET
APT 205

City SAN FRANCISCO	State CA	Zip Code 94109-4454
-----------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) G2 INSURANCE SERVICES LLC	Occupation (for Individual) INSURANCE BROKER
--	---

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
1250.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
10		24		2016

Transaction ID : SA11A.445620

Amount of Each Receipt this Period
100.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	150.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2884 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. PICKENS, RONALD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1700 GOUGH STREET
 APT 205
 City SAN FRANCISCO State CA Zip Code 94109-4454
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) G2 INSURANCE SERVICES LLC Occupation (for Individual) INSURANCE BROKER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1250.00

Date of Receipt 11 / 02 / 2016
Transaction ID : SA11A.465900
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

B. PICKENS, RONALD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1700 GOUGH STREET
 APT 205
 City SAN FRANCISCO State CA Zip Code 94109-4454
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) G2 INSURANCE SERVICES LLC Occupation (for Individual) INSURANCE BROKER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1250.00

Date of Receipt 11 / 02 / 2016
Transaction ID : SA11A.470147
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

C. PICKENS, RONALD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1700 GOUGH STREET
 APT 205
 City SAN FRANCISCO State CA Zip Code 94109-4454
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) G2 INSURANCE SERVICES LLC Occupation (for Individual) INSURANCE BROKER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1250.00

Date of Receipt 11 / 04 / 2016
Transaction ID : SA11A.471137
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶ 300.00
TOTAL This Period (last page this line number only).....▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2885 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. PICKENS, RONALD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1700 GOUGH STREET
 APT 205
 City SAN FRANCISCO State CA Zip Code 94109-4454
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) G2 INSURANCE SERVICES LLC Occupation (for Individual) INSURANCE BROKER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1250.00

Date of Receipt 11 / 07 / 2016
Transaction ID : SA11A.474635
 Amount of Each Receipt this Period 200.00
 Memo Item CONTRIBUTION

B. PICKENS, RONALD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1700 GOUGH STREET
 APT 205
 City SAN FRANCISCO State CA Zip Code 94109-4454
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) G2 INSURANCE SERVICES LLC Occupation (for Individual) INSURANCE BROKER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1250.00

Date of Receipt 11 / 05 / 2016
Transaction ID : SA11A.478439
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

C. PICKHAVER, ELWOOD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 113 SPRINGTON MEWS CIRCLE
 City MEDIA State PA Zip Code 19063-1070
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) INSURANCE SALES
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 10 / 25 / 2016
Transaction ID : SA11A.448662
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	300.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2886 OF 4311
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. PICKHAVER, ELWOOD, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 113 SPRINGTON MEWS CIRCLE

City MEDIA	State PA	Zip Code 19063-1070
---------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) SELF EMPLOYED	Occupation (for Individual) INSURANCE SALES
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		25		2016

Transaction ID : SA11A.448663

Amount of Each Receipt this Period
50.00

Memo Item
CONTRIBUTION

B. PICOU, JON, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 11337 CLAYTON ROAD

City ST LOUIS	State MO	Zip Code 63131-2552
------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) SELF EMPLOYED	Occupation (for Individual) ATTORNEY
--	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1350.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		29		2016

Transaction ID : SA11A.461019

Amount of Each Receipt this Period
100.00

Memo Item
CONTRIBUTION

C. PICOU, JON, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 11337 CLAYTON ROAD

City ST LOUIS	State MO	Zip Code 63131-2552
------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) SELF EMPLOYED	Occupation (for Individual) ATTORNEY
--	---

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
1350.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11		01		2016

Transaction ID : SA11A.462489

Amount of Each Receipt this Period
250.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	400.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2887 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. PICOU, JON, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 11337 CLAYTON ROAD
 City ST LOUIS State MO Zip Code 63131-2552
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) ATTORNEY
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1350.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 04 / 2016
Transaction ID : SA11A.471828
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION

B. PICOU, JON, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 11337 CLAYTON ROAD
 City ST LOUIS State MO Zip Code 63131-2552
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) ATTORNEY
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1350.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 04 / 2016
Transaction ID : SA11A.473092
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION

C. PICOU, JON, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 11337 CLAYTON ROAD
 City ST LOUIS State MO Zip Code 63131-2552
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) ATTORNEY
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1350.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 05 / 2016
Transaction ID : SA11A.478792
 Amount of Each Receipt this Period
 250.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	450.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2888 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
Team Ryan

A. PICOU, JON, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 11337 CLAYTON ROAD
 City ST LOUIS State MO Zip Code 63131-2552
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) ATTORNEY
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1350.00

Date of Receipt 11 / 07 / 2016
Transaction ID : SA11A.480165
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

B. PIDUTTI, JOSEPH, A., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1330 PETERSON DRIVE
 City SILVER CITY State NM Zip Code 88061-8871
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt 10 / 23 / 2016
Transaction ID : SA11A.446492
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

C. PIDUTTI, JOSEPH, A., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1330 PETERSON DRIVE
 City SILVER CITY State NM Zip Code 88061-8871
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt 10 / 31 / 2016
Transaction ID : SA11A.458230
 Amount of Each Receipt this Period 20.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	220.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2890 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
Team Ryan

A. PIERCE, BRUCE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 36 BATTERY POINT DRIVE
 City FREDERICKSBURG State VA Zip Code 22406-5471
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) STSLLC Occupation (for Individual) CONSULTANT
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 405.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 04 / 2016
Transaction ID : SA11A.473811
 Amount of Each Receipt this Period
 30.00
 Memo Item
 CONTRIBUTION

B. PIERCE, GORDON, R., MR,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 391 BRYAN DRIVE
 City ALAMO State CA Zip Code 94507-2859
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) GORDON PIERCE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 325.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 04 / 2016
Transaction ID : SA11A.474125
 Amount of Each Receipt this Period
 50.00
 Memo Item
 CONTRIBUTION

C. PIERCE, LEON, A., MR., JR.
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 23 GREENLEAF DR
 City WOLFEBORO State NH Zip Code 03894-4226
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 04 / 2016
Transaction ID : SA11A.473277
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	180.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2891 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. PIERCE, LEON, A., MR., JR.
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 23 GREENLEAF DR
 City WOLFEBORO State NH Zip Code 03894-4226
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 11 / 04 / 2016
Transaction ID : SA11A.473529
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

B. PIERCE, MICHAEL, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3770 ARNOLD STREET
 City HOUSTON State TX Zip Code 77005-2004
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) INFORMATION REQUESTED PER BEST EFFORTS Occupation (for Individual) INFORMATION REQUESTED PER BE
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 11 / 01 / 2016
Transaction ID : SA11A.461859
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

C. PIERCE, WILLIE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1499 HIGHWAY 11 NORTH PETAL
 City PETAL State MS Zip Code 39465-9586
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) WILLIE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 10 / 26 / 2016
Transaction ID : SA11A.451073
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	450.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2892 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. PIERCE, WILLIE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1499 HIGHWAY 11 NORTH
 PETAL
 City PETAL State MS Zip Code 39465-9586
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) WILLIE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 04 / 2016
Transaction ID : SA11A.471474
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION

B. PIERSON, PHYLLIS, R., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 20 LOEFFLER ROAD T519
 APT T519
 City BLOOMFIELD State CT Zip Code 06002-2273
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 2000.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 21 / 2016
Transaction ID : SA11A.443643
 Amount of Each Receipt this Period
 1000.00
 Memo Item
 CONTRIBUTION

C. PIETSCH, KENT, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO BOX 356
 City BURLINGTON State ND Zip Code 58722-0356
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) PILOT
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 800.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 04 / 2016
Transaction ID : SA11A.473202
 Amount of Each Receipt this Period
 250.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	1350.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2893 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. PIETSCH, KENT, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO BOX 356

City BURLINGTON	State ND	Zip Code 58722-0356
--------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) SELF EMPLOYED	Occupation (for Individual) PILOT
--	--------------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
800.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 06 / 2016

Transaction ID : SA11A.477940

Amount of Each Receipt this Period
100.00

Memo Item
CONTRIBUTION

B. PIGNOTTI, JOYCE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1024 SOUTH YACHTSMAN DR

City SANIBEL	State FL	Zip Code 33957-5013
-----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
475.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 28 / 2016

Transaction ID : SA11A.455390

Amount of Each Receipt this Period
25.00

Memo Item
CONTRIBUTION

C. PIGNOTTI, JOYCE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1024 SOUTH YACHTSMAN DR

City SANIBEL	State FL	Zip Code 33957-5013
-----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
475.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 31 / 2016

Transaction ID : SA11A.457484

Amount of Each Receipt this Period
25.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	150.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2894 OF 4311
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. PIGNOTTI, JOYCE, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1024 SOUTH YACHTSMAN DR

City SANIBEL	State FL	Zip Code 33957-5013
-----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
475.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		31		2016

Transaction ID : SA11A.457485

Amount of Each Receipt this Period
25.00

Memo Item
CONTRIBUTION

B. PIGNOTTI, JOYCE, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1024 SOUTH YACHTSMAN DR

City SANIBEL	State FL	Zip Code 33957-5013
-----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
475.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		31		2016

Transaction ID : SA11A.457492

Amount of Each Receipt this Period
25.00

Memo Item
CONTRIBUTION

C. PIGNOTTI, JOYCE, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1024 SOUTH YACHTSMAN DR

City SANIBEL	State FL	Zip Code 33957-5013
-----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
475.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		31		2016

Transaction ID : SA11A.457493

Amount of Each Receipt this Period
25.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	75.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2895 OF 4311
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. PIGNOTTI, JOYCE, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1024 SOUTH YACHTSMAN DR

City SANIBEL	State FL	Zip Code 33957-5013
-----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
475.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	06	/	2016

Transaction ID : SA11A.480900

Amount of Each Receipt this Period
25.00

Memo Item CONTRIBUTION

B. PIKE , CLAUDIA, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1237 MERIWETHER RD

City MONTGOMERY	State AL	Zip Code 36117-3425
--------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
300.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	25	/	2016

Transaction ID : SA11A.451874

Amount of Each Receipt this Period
300.00

Memo Item CONTRIBUTION

C. PILC, ROGER, JOHN, ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 53 WINTHROP DRIVE

City RIVERSIDE	State CT	Zip Code 06878-1911
-------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) PITNEY BOWES	Occupation (for Individual) TECHNOLOGY EXECUTIVE
---	---

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
750.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	22	/	2016

Transaction ID : SA11A.449645

Amount of Each Receipt this Period
250.00

Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	575.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2896 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. PILC, ROGER, JOHN, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 53 WINTHROP DRIVE
 City RIVERSIDE State CT Zip Code 06878-1911
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) PITNEY BOWES Occupation (for Individual) TECHNOLOGY EXECUTIVE
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 750.00

Date of Receipt 11 / 04 / 2016
Transaction ID : SA11A.471158
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

B. PILLOW, WILLIAM, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 8160 SILK CIRCLE
 City INDIANAPOLIS State IN Zip Code 46256-4344
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 700.00

Date of Receipt 11 / 05 / 2016
Transaction ID : SA11A.478747
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

C. PILLOW, WILLIAM, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 8160 SILK CIRCLE
 City INDIANAPOLIS State IN Zip Code 46256-4344
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 700.00

Date of Receipt 11 / 05 / 2016
Transaction ID : SA11A.478763
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	450.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2897 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
-----------------------------	-----------------------------	-----------------------------

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NAME OF COMMITTEE (In Full)
Team Ryan

A. PIMENTEL, ELEONOR, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address P.O. BOX 141218
 City CORAL GABLES State FL Zip Code 33114-1218
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) ELEONOR PIMENTEL M.D.P.A. Occupation (for Individual) PHYSICIAN
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 225.00

Date of Receipt **10 / 31 / 2016**
Transaction ID : SA11A.459175
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

B. PIMENTEL, ELEONOR, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address P.O. BOX 141218
 City CORAL GABLES State FL Zip Code 33114-1218
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) ELEONOR PIMENTEL M.D.P.A. Occupation (for Individual) PHYSICIAN
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 225.00

Date of Receipt **11 / 04 / 2016**
Transaction ID : SA11A.472757
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

C. PINARD, THOMAS, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address P.O. BOX 309
 City WRIGHTWOOD State CA Zip Code 92397-0309
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt **10 / 25 / 2016**
Transaction ID : SA11A.448899
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶ 150.00
TOTAL This Period (last page this line number only).....▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2898 OF 4311
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. PINCKNEY, LEE, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 1885 NW BLUE RIDGE DRIVE

City SEATTLE	State WA	Zip Code 98177-5423
-----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
300.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		25		2016

Transaction ID : SA11A.447918

Amount of Each Receipt this Period
300.00

Memo Item CONTRIBUTION

B. PINE, DAN, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 410 N. BEDFORD DR.

City TUCSON	State AZ	Zip Code 85710-3054
----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
400.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		28		2016

Transaction ID : SA11A.455940

Amount of Each Receipt this Period
100.00

Memo Item CONTRIBUTION

C. PINE, DAN, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 410 N. BEDFORD DR.

City TUCSON	State AZ	Zip Code 85710-3054
----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
400.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11		04		2016

Transaction ID : SA11A.472515

Amount of Each Receipt this Period
100.00

Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	500.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2899 OF 4311
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. PINGUE, GIUSEPPE, A., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 8639 GAVINTON CT.
 City DUBLIN State OH Zip Code 43017-9615
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) PINGUE PROPERTIES INC. Occupation (for Individual) REAL ESTATE DEVELOPER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 225.00

Date of Receipt 10 / 31 / 2016
Transaction ID : SA11A.459244
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

B. PINKERTON, JERRY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2848 WOODSIDE ST. 401
 City DALLAS State TX Zip Code 75204-2571
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1254.00

Date of Receipt 10 / 28 / 2016
Transaction ID : SA11A.456097
 Amount of Each Receipt this Period 147.00
 Memo Item CONTRIBUTION

C. PINKERTON, JERRY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2848 WOODSIDE ST. 401
 City DALLAS State TX Zip Code 75204-2571
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1254.00

Date of Receipt 11 / 04 / 2016
Transaction ID : SA11A.473902
 Amount of Each Receipt this Period 147.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	344.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2900 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. PINKOS, STEPHEN, M., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3612 AUTUMN DRIVE
 City FORT WORTH State TX Zip Code 76109-2611
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) AMERICAN CONTINENTAL GROUP Occupation (for Individual) ATTORNEY
 Receipt For: Primary General Other (specify) Aggregate Year-to-Date 1025.00

Date of Receipt 10 / 24 / 2016
Transaction ID : SA11A.443496
 Amount of Each Receipt this Period 1000.00
 Memo Item CONTRIBUTION

B. PINNEY, RICHARD, H., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 250 E 65TH STREET, APT 6F APT 6F
 City NEW YORK State NY Zip Code 10065-6614
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) PINNEY STONE AND CO LTD Occupation (for Individual) REAL ESTATE
 Receipt For: Primary General Other (specify) Aggregate Year-to-Date 350.00

Date of Receipt 10 / 24 / 2016
Transaction ID : SA11A.443735
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

C. PINNEY, RICHARD, H., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 250 E 65TH STREET, APT 6F APT 6F
 City NEW YORK State NY Zip Code 10065-6614
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) PINNEY STONE AND CO LTD Occupation (for Individual) REAL ESTATE
 Receipt For: Primary General Other (specify) Aggregate Year-to-Date 350.00

Date of Receipt 11 / 03 / 2016
Transaction ID : SA11A.465563
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	1200.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2901 OF 4311
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. PIRANIAN, HERMINEH, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4212 CLEAR VALLEY DR
 City ENCINO State CA Zip Code 91436-3316
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 875.00

Date of Receipt 10 / 24 / 2016
Transaction ID : SA11A.445844
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

B. PIRANIAN, HERMINEH, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4212 CLEAR VALLEY DR
 City ENCINO State CA Zip Code 91436-3316
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 875.00

Date of Receipt 10 / 27 / 2016
Transaction ID : SA11A.452820
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

C. PIRANIAN, HERMINEH, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4212 CLEAR VALLEY DR
 City ENCINO State CA Zip Code 91436-3316
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 875.00

Date of Receipt 10 / 27 / 2016
Transaction ID : SA11A.452861
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	600.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2902 OF 4311
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. PIRANIAN, HERMINEH, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 4212 CLEAR VALLEY DR

City ENCINO	State CA	Zip Code 91436-3316
----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
875.00

Date of Receipt
11 / 02 / 2016
Transaction ID : SA11A.466226

Amount of Each Receipt this Period
25.00

Memo Item CONTRIBUTION

B. PIRELA, PEDRO, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 4408 NW 20TH STREET

City COCONUT CREEK	State FL	Zip Code 33066-1042
-----------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) EXECUTIVE AIR SERVICES	Occupation (for Individual) CORPORATE PILOT
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
480.00

Date of Receipt
11 / 04 / 2016
Transaction ID : SA11A.472356

Amount of Each Receipt this Period
50.00

Memo Item CONTRIBUTION

C. PIRNIA, GUY, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 9953 WOODLEY AVENUE

City NORTH HILLS	State CA	Zip Code 91343-1343
---------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
210.00

Date of Receipt
10 / 29 / 2016
Transaction ID : SA11A.460625

Amount of Each Receipt this Period
30.00

Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	105.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2903 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. PIRNIA, GUYT, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 9953 WOODLEY AVENUE
 City NORTH HILLS State CA Zip Code 91343-1343
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 210.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 29 / 2016
Transaction ID : SA11A.460633
 Amount of Each Receipt this Period
 30.00
 Memo Item
 CONTRIBUTION

B. PIRNIA, GUYT, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 9953 WOODLEY AVENUE
 City NORTH HILLS State CA Zip Code 91343-1343
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 210.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 29 / 2016
Transaction ID : SA11A.460642
 Amount of Each Receipt this Period
 25.00
 Memo Item
 CONTRIBUTION

C. PISACANE, FRED, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4756 CAMINITO DIABLO
 City SAN DIEGO State CA Zip Code 92130-2483
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) FOAMTEC Occupation (for Individual) SALES
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 27 / 2016
Transaction ID : SA11A.457085
 Amount of Each Receipt this Period
 250.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	305.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2904 OF 4311
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Team Ryan

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name A. PISACANE, FRED, , ,		Date of Receipt MM / DD / YYYY 11 / 04 / 2016 Transaction ID : SA11A.471507
Mailing Address 4756 CAMINITO DIABLO		Amount of Each Receipt this Period 250.00
City SAN DIEGO	State CA	Zip Code 92130-2483
FEC ID number of contributing federal political committee. C		<input type="checkbox"/> Memo Item CONTRIBUTION
Name of Employer (for Individual) FOAMTEC	Occupation (for Individual) SALES	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00	

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name B. PISANO, JEANNIE, , ,		Date of Receipt MM / DD / YYYY 10 / 26 / 2016 Transaction ID : SA11A.450139
Mailing Address 5144 STANFORD DRIVE		Amount of Each Receipt this Period 100.00
City NASHVILLE	State TN	Zip Code 37215-4230
FEC ID number of contributing federal political committee. C		<input type="checkbox"/> Memo Item CONTRIBUTION
Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1100.00	

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name C. PISANO, JEANNIE, , ,		Date of Receipt MM / DD / YYYY 10 / 26 / 2016 Transaction ID : SA11A.450140
Mailing Address 5144 STANFORD DRIVE		Amount of Each Receipt this Period 100.00
City NASHVILLE	State TN	Zip Code 37215-4230
FEC ID number of contributing federal political committee. C		<input type="checkbox"/> Memo Item CONTRIBUTION
Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Aggregate Year-to-Date ▼ 1100.00	

SUBTOTAL of Receipts This Page (optional).....▶	450.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2905 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. PITCAIRN, ELIZABETH, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 165 TOWNSHIP LINE RD
 City JENKINTOWN State PA Zip Code 19046-3531
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 850.00

Date of Receipt 11 / 07 / 2016
Transaction ID : SA11A.475047
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

B. PITCAIRN, ELIZABETH, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 165 TOWNSHIP LINE RD
 City JENKINTOWN State PA Zip Code 19046-3531
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 850.00

Date of Receipt 11 / 05 / 2016
Transaction ID : SA11A.478614
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

C. PITCAIRN, ELIZABETH, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 165 TOWNSHIP LINE RD
 City JENKINTOWN State PA Zip Code 19046-3531
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 850.00

Date of Receipt 11 / 05 / 2016
Transaction ID : SA11A.478615
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	750.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2906 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. PITTS, BEVERLY, L., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 596 OXBOW CIRCLE
 City PAGOSA SPRINGS State CO Zip Code 81147-8701
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 28 / 2016
Transaction ID : SA11A.481106
 Amount of Each Receipt this Period
 1000.00
 Memo Item
 CONTRIBUTION

B. PIXLEY, PAUL, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 488 RIVER CLIFF DRIVE
 City CANYON LAKE State TX Zip Code 78133-4545
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 268.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 26 / 2016
Transaction ID : SA11A.450964
 Amount of Each Receipt this Period
 25.00
 Memo Item
 CONTRIBUTION

C. PIXLEY, PAUL, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 488 RIVER CLIFF DRIVE
 City CANYON LAKE State TX Zip Code 78133-4545
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 268.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 26 / 2016
Transaction ID : SA11A.450993
 Amount of Each Receipt this Period
 25.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	1050.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2907 OF 4311
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. PIZZELLA, PATRICK, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 3818 JAY AVENUE

City ALEXANDRIA	State VA	Zip Code 22302-1813
--------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) INFORMATION REQUESTED PER BEST EFFORTS	Occupation (for Individual) INFORMATION REQUESTED PER BE
---	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	01	/	2016

Transaction ID : SA11A.461549

Amount of Each Receipt this Period
250.00

Memo Item
CONTRIBUTION

B. PLACE, EDYTHE, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1B SAWYER LANE

City SALISBURY	State MA	Zip Code 01952-2615
-------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) POSTERNAK	Occupation (for Individual) PARALEGAL
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
431.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	25	/	2016

Transaction ID : SA11A.449036

Amount of Each Receipt this Period
25.00

Memo Item
CONTRIBUTION

C. PLACE, EDYTHE, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1B SAWYER LANE

City SALISBURY	State MA	Zip Code 01952-2615
-------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) POSTERNAK	Occupation (for Individual) PARALEGAL
--	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
431.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	07	/	2016

Transaction ID : SA11A.474604

Amount of Each Receipt this Period
38.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	313.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2908 OF 4311
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Team Ryan

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
A. PLACE, EDYTHE, , ,

Mailing Address **1B SAWYER LANE**

City SALISBURY	State MA	Zip Code 01952-2615
--------------------------	--------------------	-------------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) POSTERNAK	Occupation (for Individual) PARALEGAL
---	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
431.00

Date of Receipt
11 / 07 / 2016

Transaction ID : SA11A.474605

Amount of Each Receipt this Period
38.00

Memo Item
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
B. PLACE, EDYTHE, , ,

Mailing Address **1B SAWYER LANE**

City SALISBURY	State MA	Zip Code 01952-2615
--------------------------	--------------------	-------------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) POSTERNAK	Occupation (for Individual) PARALEGAL
---	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
431.00

Date of Receipt
11 / 07 / 2016

Transaction ID : SA11A.475916

Amount of Each Receipt this Period
25.00

Memo Item
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
C. PLACE, EDYTHE, , ,

Mailing Address **1B SAWYER LANE**

City SALISBURY	State MA	Zip Code 01952-2615
--------------------------	--------------------	-------------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) POSTERNAK	Occupation (for Individual) PARALEGAL
---	---

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
431.00

Date of Receipt
11 / 07 / 2016

Transaction ID : SA11A.476543

Amount of Each Receipt this Period
30.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	93.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2909 OF 4311
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. PLACHY, ANTHONY, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 29 WILTON ROAD

City PLEASANTVILLE	State NY	Zip Code 10570-2021
-----------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
550.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	22	/	2016

Transaction ID : SA11A.446615

Amount of Each Receipt this Period
300.00

Memo Item CONTRIBUTION

B. PLACHY, ANTHONY, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 29 WILTON ROAD

City PLEASANTVILLE	State NY	Zip Code 10570-2021
-----------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
550.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	03	/	2016

Transaction ID : SA11A.468716

Amount of Each Receipt this Period
250.00

Memo Item CONTRIBUTION

C. PLATI, LILIANA, , MRS.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address PO. BOX 1888

City RANCHO MIRAGE	State CA	Zip Code 92270-
-----------------------	-------------	--------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
225.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	28	/	2016

Transaction ID : SA11A.455062

Amount of Each Receipt this Period
100.00

Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	650.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2910 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. PLATI, LILIANA, , MRS.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO. BOX 1888
 City RANCHO MIRAGE State CA Zip Code 92270-
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 225.00

Date of Receipt 11 / 03 / 2016
Transaction ID : SA11A.469321
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

B. PLATI, LILIANA, , MRS.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO. BOX 1888
 City RANCHO MIRAGE State CA Zip Code 92270-
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 225.00

Date of Receipt 11 / 07 / 2016
Transaction ID : SA11A.475466
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

C. PLATO, CAROLYN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2001 HOLCOMBE BLVD 3501
 City HOUSTON State TX Zip Code 77030-4222
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 650.00

Date of Receipt 11 / 03 / 2016
Transaction ID : SA11A.469031
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶ 175.00
TOTAL This Period (last page this line number only).....▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2911 OF 4311
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Team Ryan

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name A. PLATT, DAVID, , ,		Date of Receipt MM / DD / YYYY 11 / 03 / 2016
Mailing Address 1651 ANDERSON ROAD, APT 2 APT 2		Transaction ID : SA11A.465454
City MCLEAN	State VA	Zip Code 22102-1651
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 200.00
Name of Employer (for Individual) INFORMATION REQUESTED PER BEST EFFORTS	Occupation (for Individual) INFORMATION REQUESTED PER BE	<input type="checkbox"/> Memo Item CONTRIBUTION
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 400.00	

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name B. PLAYTIS, ANN, S., MRS.,		Date of Receipt MM / DD / YYYY 10 / 24 / 2016
Mailing Address 15 ETON CT		Transaction ID : SA11A.443718
City WASHINGTON	State WV	Zip Code 26181-9521
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 150.00
Name of Employer (for Individual) NONE	Occupation (for Individual) HOMEMAKER	<input type="checkbox"/> Memo Item CONTRIBUTION
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 765.00	

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name C. PLAYTIS, ANN, S., MRS.,		Date of Receipt MM / DD / YYYY 10 / 24 / 2016
Mailing Address 15 ETON CT		Transaction ID : SA11A.449337
City WASHINGTON	State WV	Zip Code 26181-9521
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 75.00
Name of Employer (for Individual) NONE	Occupation (for Individual) HOMEMAKER	<input type="checkbox"/> Memo Item CONTRIBUTION
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Aggregate Year-to-Date ▼ 765.00	

SUBTOTAL of Receipts This Page (optional).....	425.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2912 OF 4311
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. PLESKO, DAVID, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 374 SCHATTENBAUM DR

City FREDERICKSBURG	State TX	Zip Code 78624-6301
------------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) SELF EMPLOYED	Occupation (for Individual) BUSINESSMAN
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
2500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		25		2016

Transaction ID : SA11A.449092

Amount of Each Receipt this Period
2500.00

Memo Item
CONTRIBUTION

B. PLUMB, PATRICIA, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 76 ANN AVENUE

City TRINITY CENTER	State CA	Zip Code 96091-
------------------------	-------------	--------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
225.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		31		2016

Transaction ID : SA11A.458116

Amount of Each Receipt this Period
25.00

Memo Item
CONTRIBUTION

C. PLUMB, PATRICIA, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 76 ANN AVENUE

City TRINITY CENTER	State CA	Zip Code 96091-
------------------------	-------------	--------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
225.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11		07		2016

Transaction ID : SA11A.475654

Amount of Each Receipt this Period
25.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	2550.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2913 OF 4311
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. PLUMB, PATRICIA, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 76 ANN AVENUE

City TRINITY CENTER	State CA	Zip Code 96091-
------------------------	-------------	--------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
225.00

Date of Receipt
MM / DD / YYYY
11 / 06 / 2016

Transaction ID : SA11A.478059

Amount of Each Receipt this Period
25.00

Memo Item CONTRIBUTION

B. PLYLER, JUSTIN, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 916 NORTH OCEAN BLVD

City MYRTLE BEACH	State SC	Zip Code 29577-3751
----------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) GAY DOLPHIN INC	Occupation (for Individual) MERCHANT
--	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
5000.00

Date of Receipt
MM / DD / YYYY
10 / 22 / 2016

Transaction ID : SA11A.446629

Amount of Each Receipt this Period
5000.00

Memo Item CONTRIBUTION

C. POGELER, CHERI, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 279 COUNTRYHAVEN ROAD

City ENCINITAS	State CA	Zip Code 92024-3106
-------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) YMCA	Occupation (for Individual) FITNESS
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
630.00

Date of Receipt
MM / DD / YYYY
10 / 26 / 2016

Transaction ID : SA11A.451087

Amount of Each Receipt this Period
50.00

Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	5075.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2914 OF 4311
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. POGELER, CHERI, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 279 COUNTRYHAVEN ROAD

City ENCINITAS	State CA	Zip Code 92024-3106
-------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) YMCA	Occupation (for Individual) FITNESS
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
630.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	04	/	2016

Transaction ID : SA11A.470764

Amount of Each Receipt this Period
50.00

Memo Item
CONTRIBUTION

B. POGODZINSKI, ANTHONY, E., MR.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 9609 MANITOU PK DR

City MINOCQUA	State WI	Zip Code 54548-9362
------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
950.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	24	/	2016

Transaction ID : SA11A.445867

Amount of Each Receipt this Period
100.00

Memo Item
CONTRIBUTION

C. POGODZINSKI, ANTHONY, E., MR.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 9609 MANITOU PK DR

City MINOCQUA	State WI	Zip Code 54548-9362
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
950.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	03	/	2016

Transaction ID : SA11A.468742

Amount of Each Receipt this Period
100.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	250.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2915 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. POHRER, JACK, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 15 OVERBROOK DR.
 City ST. LOUIS State MO Zip Code 63124-
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) MIDLAND OIL CO Occupation (for Individual) EXECUTIVE
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt **11 / 07 / 2016**
Transaction ID : SA11A.475225
 Amount of Each Receipt this Period 400.00
 Memo Item CONTRIBUTION

B. POIRIER, BETTE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 7282 N PACIFIC AVE
 City FRESNO State CA Zip Code 93711-0528
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) SEMI-RETIRED CPA
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 289.00

Date of Receipt **10 / 25 / 2016**
Transaction ID : SA11A.447776
 Amount of Each Receipt this Period 30.00
 Memo Item CONTRIBUTION

C. POIRIER, BETTE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 7282 N PACIFIC AVE
 City FRESNO State CA Zip Code 93711-0528
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) SEMI-RETIRED CPA
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 289.00

Date of Receipt **10 / 25 / 2016**
Transaction ID : SA11A.447785
 Amount of Each Receipt this Period 30.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	460.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2916 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
Team Ryan

A. POIRIER, BETTE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 7282 N PACIFIC AVE
 City FRESNO State CA Zip Code 93711-0528
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) SEMI-RETIRED CPA
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 289.00

Date of Receipt 10 / 26 / 2016
Transaction ID : SA11A.449726
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

B. POIRIER, BETTE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 7282 N PACIFIC AVE
 City FRESNO State CA Zip Code 93711-0528
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) SEMI-RETIRED CPA
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 289.00

Date of Receipt 10 / 26 / 2016
Transaction ID : SA11A.449727
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

C. POIRIER, BETTE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 7282 N PACIFIC AVE
 City FRESNO State CA Zip Code 93711-0528
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) SEMI-RETIRED CPA
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 289.00

Date of Receipt 11 / 02 / 2016
Transaction ID : SA11A.465796
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	75.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2917 OF 4311
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. POKORNY, GEROLD, E., MR.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1046 E BUENA VISTA DRIVE

City TEMPE State AZ Zip Code 85284-2402

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 1600.00

Date of Receipt 11 / 02 / 2016
Transaction ID : SA11A.465130

Amount of Each Receipt this Period 75.00

Memo Item CONTRIBUTION

B. POLACHEK, DANIEL, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 335 SOUTH ST PO BOX 234

City NORTHAMPTON State MA Zip Code 01060-4124

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) DANIEL W POLACHEK, P.C. Occupation (for Individual) OWNER

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt 11 / 01 / 2016
Transaction ID : SA11A.462490

Amount of Each Receipt this Period 250.00

Memo Item CONTRIBUTION

C. POLK, CARL, RAY, , JR.
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address PO BOX 155108

City LUFKIN State TX Zip Code 75915-5108

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) INFORMATION REQUESTED PER BEST EFFORTS Occupation (for Individual) INFORMATION REQUESTED PER BEST EFFORTS

Receipt For: Primary General Other (specify)

Aggregate Year-to-Date ▼ 2500.00

Date of Receipt 11 / 08 / 2016
Transaction ID : SA11A.468128

Amount of Each Receipt this Period 2500.00

Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 2825.00

TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2918 OF 4311
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. POLLEY, WILLIAM, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address P/O/BOX 798

City TWAIN HARTE State CA Zip Code 95383-

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt 11 / 07 / 2016
Transaction ID : SA11A.475259

Amount of Each Receipt this Period 25.00

Memo Item CONTRIBUTION

B. POLLY, JAMES, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 105 SECLUDED WAY

City TITUSVILLE State FL Zip Code 32780-8128

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt 11 / 04 / 2016
Transaction ID : SA11A.473470

Amount of Each Receipt this Period 50.00

Memo Item CONTRIBUTION

C. POLUNSKY, ALLAN, B., MR.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 17806 I.H. 10 WEST EXPRESSWAY STE

City SAN ANTONIO State TX Zip Code 78257-

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) POLUNSKY BEITEL GREEN LLP Occupation (for Individual) ATTORNEY

Receipt For: Primary General Other (specify)

Aggregate Year-to-Date ▼ 10000.00

Date of Receipt 10 / 31 / 2016
Transaction ID : SA11A.454996

Amount of Each Receipt this Period 10000.00

Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 10075.00

TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2919 OF 4311
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
POMEROY, ALEXANDRA, , ,

Mailing Address **5 MARKWOOD LANE**

City RUMSON	State NJ	Zip Code 07760-1934
-----------------------	--------------------	-------------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NEUBERGER BERMAN	Occupation (for Individual) INVESTMENTS
--	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1000.00

Date of Receipt
10 / 25 / 2016

Transaction ID : SA11A.447877

Amount of Each Receipt this Period
1000.00

Memo Item CONTRIBUTION

B. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
POND, STEPHEN, , ,

Mailing Address **3515 WEST MARKET STREET**

City GREENSBORO	State NC	Zip Code 27403-4438
---------------------------	--------------------	-------------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) THE EDUCATION CENTER	Occupation (for Individual) PUBLISHER
--	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
2000.00

Date of Receipt
10 / 20 / 2016

Transaction ID : SA11A.441941

Amount of Each Receipt this Period
1000.00

Memo Item CONTRIBUTION

C. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
POND, STEPHEN, , ,

Mailing Address **3515 WEST MARKET STREET**

City GREENSBORO	State NC	Zip Code 27403-4438
---------------------------	--------------------	-------------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) THE EDUCATION CENTER	Occupation (for Individual) PUBLISHER
--	---

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
2000.00

Date of Receipt
10 / 24 / 2016

Transaction ID : SA11A.445766

Amount of Each Receipt this Period
1000.00

Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	3000.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2920 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. POOLE, MALCOLM, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 251 BLACK POINT ROAD

City SCARBOROUGH	State ME	Zip Code 04074-9356
---------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) POOLE GROUP OF COMPANIES	Occupation (for Individual) MANAGER
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
450.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	07	/	2016

Transaction ID : SA11A.467690

Amount of Each Receipt this Period
250.00

Memo Item CONTRIBUTION

B. POOLE, MICHELE, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 4200 STATE ROAD 7

City WELLINGTON	State FL	Zip Code 33449-8103
--------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NORTH RIDGE ELECTRIC INC	Occupation (for Individual) OWNER
---	--------------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	22	/	2016

Transaction ID : SA11A.446917

Amount of Each Receipt this Period
100.00

Memo Item CONTRIBUTION

C. POOLE, MICHELE, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 4200 STATE ROAD 7

City WELLINGTON	State FL	Zip Code 33449-8103
--------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NORTH RIDGE ELECTRIC INC	Occupation (for Individual) OWNER
---	--------------------------------------

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	04	/	2016

Transaction ID : SA11A.471322

Amount of Each Receipt this Period
100.00

Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	450.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2921 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. POOLE, SHARON, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 15931 ROSETO WAY
 City NAPLES State FL Zip Code 34110-2704
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 31 / 2016
Transaction ID : SA11A.463577
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION

B. POOLE, WILLIAM, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 8054 N VIA PALMA
 City SCOTTSDALE State AZ Zip Code 85258-2869
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 707.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 29 / 2016
Transaction ID : SA11A.460648
 Amount of Each Receipt this Period
 50.00
 Memo Item
 CONTRIBUTION

C. POOLE, WILLIAM, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 8054 N VIA PALMA
 City SCOTTSDALE State AZ Zip Code 85258-2869
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 707.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 29 / 2016
Transaction ID : SA11A.460656
 Amount of Each Receipt this Period
 50.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	200.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2922 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
A. POOLE, WILLIAM, , ,

Mailing Address **8054 N VIA PALMA**

City SCOTTSDALE	State AZ	Zip Code 85258-2869
---------------------------	--------------------	-------------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
--	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
707.00

Date of Receipt
11 / 04 / 2016

Transaction ID : SA11A.471486

Amount of Each Receipt this Period
50.00

Memo Item
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
B. POPA, THOMAS, , ,

Mailing Address **8101 EAST KRAIL STREET**

City SCOTTSDALE	State AZ	Zip Code 85250-5643
---------------------------	--------------------	-------------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) SELF EMPLOYED	Occupation (for Individual) REAL ESTATE BROKER
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
260.00

Date of Receipt
10 / 25 / 2016

Transaction ID : SA11A.451925

Amount of Each Receipt this Period
50.00

Memo Item
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
C. POPA, THOMAS, , ,

Mailing Address **8101 EAST KRAIL STREET**

City SCOTTSDALE	State AZ	Zip Code 85250-5643
---------------------------	--------------------	-------------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) SELF EMPLOYED	Occupation (for Individual) REAL ESTATE BROKER
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
260.00

Date of Receipt
10 / 25 / 2016

Transaction ID : SA11A.451927

Amount of Each Receipt this Period
50.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	150.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2923 OF 4311
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name A. POPKAVE, ARTHUR, , ,		Date of Receipt M M M / D D D / Y Y Y Y Y Y 10 / 25 / 2016
Mailing Address 1000 COVENTRY DRIVE		Transaction ID : SA11A.452079
City PHILLIPSBURG	State NJ	Zip Code 08865-1980
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 100.00
Name of Employer (for Individual) COVENTRY CARDIOLOGY ASSOCIATES	Occupation (for Individual) PHYSICIAN	<input type="checkbox"/> Memo Item CONTRIBUTION
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00	

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name B. POPKAVE, ARTHUR, , ,		Date of Receipt M M M / D D D / Y Y Y Y Y Y 11 / 01 / 2016
Mailing Address 1000 COVENTRY DRIVE		Transaction ID : SA11A.462380
City PHILLIPSBURG	State NJ	Zip Code 08865-1980
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 100.00
Name of Employer (for Individual) COVENTRY CARDIOLOGY ASSOCIATES	Occupation (for Individual) PHYSICIAN	<input type="checkbox"/> Memo Item CONTRIBUTION
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00	

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name C. POPKAVE, ARTHUR, , ,		Date of Receipt M M M / D D D / Y Y Y Y Y Y 10 / 29 / 2016
Mailing Address 1000 COVENTRY DRIVE		Transaction ID : SA11A.464981
City PHILLIPSBURG	State NJ	Zip Code 08865-1980
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 100.00
Name of Employer (for Individual) COVENTRY CARDIOLOGY ASSOCIATES	Occupation (for Individual) PHYSICIAN	<input type="checkbox"/> Memo Item CONTRIBUTION
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Aggregate Year-to-Date ▼ 300.00	

SUBTOTAL of Receipts This Page (optional).....▶	300.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2924 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
-----------------------------	-----------------------------	-----------------------------

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NAME OF COMMITTEE (In Full)
Team Ryan

A. PORTER, CARL, H., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3415 N SHERIDAN RD
 150
 City PEORIA State IL Zip Code 61604-1430
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 07 / 2016
Transaction ID : SA11A.475378
 Amount of Each Receipt this Period
 50.00
 Memo Item
 CONTRIBUTION

B. PORTER, DANIEL, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4184 ISLANDER WAY
 City ANACORTES State WA Zip Code 98221-8517
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 925.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 04 / 2016
Transaction ID : SA11A.472691
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION

C. PORTER, JAMES, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4420 MCFARLIN BLVD.
 City DALLAS State TX Zip Code 75205-1631
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 750.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 01 / 2016
Transaction ID : SA11A.462408
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	250.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2925 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. PORTER, RICHMOND, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 113 SOUTH BEACH DRIVE
 City SAINT AUGUSTINE State FL Zip Code 32084-0459
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt **10 / 31 / 2016**
Transaction ID : SA11A.458371
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

B. PORTER, VERNON, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5315 ALFRED AVE
 City ST LOUIS State MO Zip Code 63116-1314
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt **11 / 04 / 2016**
Transaction ID : SA11A.471614
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

C. PORTER, WILLIAM, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4 JULIE LANE
 City SELDEN State NY Zip Code 11784-1511
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt **10 / 25 / 2016**
Transaction ID : SA11A.447337
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	300.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2926 OF 4311
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. PORTER, WILLIAM, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 4 JULIE LANE

City SELDEN State NY Zip Code 11784-1511

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt 11 / 04 / 2016
Transaction ID : SA11A.467496

Amount of Each Receipt this Period 100.00

Memo Item CONTRIBUTION

B. PORTER, WILLIAM, B., MR.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 301 CUADRO ST. SE

City ALBUQUERQUE State NM Zip Code 87123-5983

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 225.00

Date of Receipt 11 / 01 / 2016
Transaction ID : SA11A.463034

Amount of Each Receipt this Period 25.00

Memo Item CONTRIBUTION

C. POST, JANET, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 30737 N 77TH WAY

City SCOTTSDALE State AZ Zip Code 85266-2786

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt 10 / 25 / 2016
Transaction ID : SA11A.447884

Amount of Each Receipt this Period 50.00

Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 175.00

TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2927 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. POST, JANET, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 30737 N 77TH WAY
 City SCOTTSDALE State AZ Zip Code 85266-2786
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 11 / 03 / 2016
Transaction ID : SA11A.468960
 Amount of Each Receipt this Period
 25.00
 Memo Item
 CONTRIBUTION

B. POST, RONALD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2271 DAWNWOOD DRIVE
 City PHILOMATH State OR Zip Code 97370-9091
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 900.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 10 / 20 / 2016
Transaction ID : SA11A.442430
 Amount of Each Receipt this Period
 50.00
 Memo Item
 CONTRIBUTION

C. POST, RONALD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2271 DAWNWOOD DRIVE
 City PHILOMATH State OR Zip Code 97370-9091
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 900.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 10 / 23 / 2016
Transaction ID : SA11A.446345
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	175.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2928 OF 4311
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. POST, RONALD, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 2271 DAWNWOOD DRIVE

City PHILOMATH	State OR	Zip Code 97370-9091
-------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
900.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
10		31		2016

Transaction ID : SA11A.458707

Amount of Each Receipt this Period
25.00

Memo Item
CONTRIBUTION

B. POST, RONALD, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 2271 DAWNWOOD DRIVE

City PHILOMATH	State OR	Zip Code 97370-9091
-------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
900.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
10		31		2016

Transaction ID : SA11A.458711

Amount of Each Receipt this Period
25.00

Memo Item
CONTRIBUTION

C. POST, RONALD, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 2271 DAWNWOOD DRIVE

City PHILOMATH	State OR	Zip Code 97370-9091
-------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
900.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
11		04		2016

Transaction ID : SA11A.473256

Amount of Each Receipt this Period
50.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	100.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2929 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. POTEET, JAX, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address CARRIAGE DR.
 City SAN ANTONIO State TX Zip Code 78217-
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt 10 / 23 / 2016
Transaction ID : SA11A.446581
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

B. POTEET, JAX, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address CARRIAGE DR.
 City SAN ANTONIO State TX Zip Code 78217-
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt 10 / 25 / 2016
Transaction ID : SA11A.451987
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

C. POTEET, JAX, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address CARRIAGE DR.
 City SAN ANTONIO State TX Zip Code 78217-
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt 10 / 25 / 2016
Transaction ID : SA11A.451989
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	150.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2930 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name A. POTEET, JAX, , ,		Date of Receipt MM / DD / YYYY 11 / 04 / 2016
Mailing Address CARRIAGE DR.		Transaction ID : SA11A.473061
City SAN ANTONIO	State TX	Zip Code 78217-
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 50.00
Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED	<input type="checkbox"/> Memo Item CONTRIBUTION
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 400.00	

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name B. POTTER, LINDA, , ,		Date of Receipt MM / DD / YYYY 11 / 04 / 2016
Mailing Address 95 GREENHORN RD		Transaction ID : SA11A.470413
City HAILEY	State ID	Zip Code 83333-5108
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 250.00
Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED	<input type="checkbox"/> Memo Item CONTRIBUTION
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name C. POTTER, MILES, , ,		Date of Receipt MM / DD / YYYY 11 / 02 / 2016
Mailing Address PO		Transaction ID : SA11A.466092
City SANTA CRUZ	State CA	Zip Code 95061-
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 250.00
Name of Employer (for Individual) PIECES INTERNATIONAL	Occupation (for Individual) CEO	<input type="checkbox"/> Memo Item CONTRIBUTION
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Aggregate Year-to-Date ▼ 250.00	

SUBTOTAL of Receipts This Page (optional).....▶	550.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2931 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. POTTER, TODD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 13000 SHERBURNE AV
 City BECKER State MN Zip Code 55308-8823
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) T J POTTER TRUCKING INC Occupation (for Individual) OWNER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 10 / 25 / 2016
Transaction ID : SA11A.448621
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

B. POTTER, TODD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 13000 SHERBURNE AV
 City BECKER State MN Zip Code 55308-8823
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) T J POTTER TRUCKING INC Occupation (for Individual) OWNER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 11 / 03 / 2016
Transaction ID : SA11A.469081
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

C. POTTER, WILLIAM, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 95 GREENHORN RD
 City HAILEY State ID Zip Code 83333-5108
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 10 / 23 / 2016
Transaction ID : SA11A.449632
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 600.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2932 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. POTTER, WILLIAM, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 95 GREENHORN RD
 City HAILEY State ID Zip Code 83333-5108
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 11 / 04 / 2016
Transaction ID : SA11A.470929
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

B. POTWIN, PETER, V., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 12716 SW EDGECLIFF ROAD
 City PORTLAND State OR Zip Code 97219-8427
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt 10 / 20 / 2016
Transaction ID : SA11A.433398
 Amount of Each Receipt this Period 200.00
 Memo Item CONTRIBUTION

C. POU, WILLIAM, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1234 EASTON DR
 City LAKELAND State FL Zip Code 33803-2334
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) W S BADCOCK CORP Occupation (for Individual) MANAGEMENT
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 10 / 31 / 2016
Transaction ID : SA11A.464089
 Amount of Each Receipt this Period 500.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	800.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2933 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. POULIN, LISA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 8501 BAYSIDE RD
 PH 3
 City CHESAPEAKE BEACH State MD Zip Code 20732-3350
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 25 / 2016
Transaction ID : SA11A.448781
 Amount of Each Receipt this Period
 1000.00
 Memo Item
 CONTRIBUTION

B. POULSEN, MARK, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 445 E TERRACE AVE
 City GILBERT State AZ Zip Code 85234-2416
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 225.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 28 / 2016
Transaction ID : SA11A.456032
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION

C. POULSEN, MARK, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 445 E TERRACE AVE
 City GILBERT State AZ Zip Code 85234-2416
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 225.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 05 / 2016
Transaction ID : SA11A.478670
 Amount of Each Receipt this Period
 25.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	1125.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2934 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. POUPKO, VICTORIA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 20 WASHINGTON ST.
 241
 City BRIGHTON State MA Zip Code 02135-7430
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 775.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 26 / 2016
Transaction ID : SA11A.450507
 Amount of Each Receipt this Period
 15.00
 Memo Item
 CONTRIBUTION

B. POUPKO, VICTORIA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 20 WASHINGTON ST.
 241
 City BRIGHTON State MA Zip Code 02135-7430
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 775.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 04 / 2016
Transaction ID : SA11A.473670
 Amount of Each Receipt this Period
 25.00
 Memo Item
 CONTRIBUTION

C. POUPKO, VICTORIA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 20 WASHINGTON ST.
 241
 City BRIGHTON State MA Zip Code 02135-7430
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 775.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 04 / 2016
Transaction ID : SA11A.474084
 Amount of Each Receipt this Period
 30.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	70.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2935 OF 4311
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. POUPKO, VICTORIA, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 20 WASHINGTON ST.
241

City BRIGHTON State MA Zip Code 02135-7430

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 775.00

Date of Receipt 11 / 07 / 2016
Transaction ID : SA11A.474726

Amount of Each Receipt this Period 10.00

Memo Item CONTRIBUTION

B. POUPKO, VICTORIA, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 20 WASHINGTON ST.
241

City BRIGHTON State MA Zip Code 02135-7430

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 775.00

Date of Receipt 11 / 07 / 2016
Transaction ID : SA11A.475163

Amount of Each Receipt this Period 15.00

Memo Item CONTRIBUTION

C. POUPKO, VICTORIA, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 20 WASHINGTON ST.
241

City BRIGHTON State MA Zip Code 02135-7430

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 775.00

Date of Receipt 11 / 05 / 2016
Transaction ID : SA11A.479311

Amount of Each Receipt this Period 15.00

Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 40.00

TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2936 OF 4311
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. POUPKO, VICTORIA, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 20 WASHINGTON ST.
241

City BRIGHTON State MA Zip Code 02135-7430

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
775.00

Date of Receipt
MM / DD / YYYY
11 / 07 / 2016

Transaction ID : SA11A.479974

Amount of Each Receipt this Period
5.00

Memo Item CONTRIBUTION

B. POWELL, DANIEL, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 8420 E LA SENDA DR

City SCOTTSDALE State AZ Zip Code 85255-4288

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt
MM / DD / YYYY
10 / 20 / 2016

Transaction ID : SA11A.442194

Amount of Each Receipt this Period
250.00

Memo Item CONTRIBUTION

C. POWELL, GEORGE, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 45 WEST BROAD OAKS DRIVE

City HOUSTON State TX Zip Code 77056-1203

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
831.00

Date of Receipt
MM / DD / YYYY
11 / 04 / 2016

Transaction ID : SA11A.472404

Amount of Each Receipt this Period
100.00

Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	355.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2937 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. POWELL, GEORGE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 45 WEST BROAD OAKS DRIVE
 City HOUSTON State TX Zip Code 77056-1203
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 831.00

Date of Receipt 11 / 04 / 2016
Transaction ID : SA11A.474091
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

B. POWELL, JAMES, L., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1311 S MADISON STREET
 City SAN ANGELO State TX Zip Code 76901-4444
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF Occupation (for Individual) RANCHER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 850.00

Date of Receipt 11 / 14 / 2016
Transaction ID : SA11A.468271
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

C. POWELL, STEVEN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 40701 WOODWARD AVENUE, SUITE 301
 City BLOOMFIELD HILLS State MI Zip Code 48304-5078
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) POWELL MURPHY Occupation (for Individual) ATTORNEY
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt 10 / 20 / 2016
Transaction ID : SA11A.444672
 Amount of Each Receipt this Period 400.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	750.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2938 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. POWELL, WILLIAM, NICHOLAS, MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2561 WILDWOOD ROAD
 City SALEM State VA Zip Code 24153-1662
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SALEM TOOLS INC Occupation (for Individual) MANAGEMENT
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1250.00

Date of Receipt 10 / 26 / 2016
Transaction ID : SA11A.447717
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

B. POWER, JAMES, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1490 CHEVIOT HILLS COURT
 City WESTLAKE VILLAGE State CA Zip Code 91361-1471
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) MARKETING CONSULTANT
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 10 / 30 / 2016
Transaction ID : SA11A.464918
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

C. POWER, JAMES, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1490 CHEVIOT HILLS COURT
 City WESTLAKE VILLAGE State CA Zip Code 91361-1471
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) MARKETING CONSULTANT
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 11 / 04 / 2016
Transaction ID : SA11A.472447
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 450.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2939 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. POWNEY, WILLIAM, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1333 TAMARACK DRIVE
 City MUNSTER State IN Zip Code 46321-4217
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt
 11 / 03 / 2016
Transaction ID : SA11A.474431
 Amount of Each Receipt this Period
 100.00
 Memo Item CONTRIBUTION

B. PRADA, IRISLEE, M., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 809 COURT STREET
 City FULTON State MO Zip Code 65251-1955
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt
 10 / 20 / 2016
Transaction ID : SA11A.433413
 Amount of Each Receipt this Period
 100.00
 Memo Item CONTRIBUTION

C. PRADA, IRISLEE, M., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 809 COURT STREET
 City FULTON State MO Zip Code 65251-1955
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt
 11 / 08 / 2016
Transaction ID : SA11A.468018
 Amount of Each Receipt this Period
 100.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	300.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2940 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
Team Ryan

A. PRASKIEWICZ, WE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO BOX 025331
 City MIAMI State FL Zip Code 33102-5331
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) WE PRASKIEWICZ Occupation (for Individual) TRADER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 225.00

Date of Receipt 11 / 07 / 2016
Transaction ID : SA11A.480516
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

B. PRATER, BEVERLY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3423 BRISTOL BRIDGE RD
 City ORANGE PARK State FL Zip Code 32073-2239
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 10 / 27 / 2016
Transaction ID : SA11A.456457
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

C. PRATER, BEVERLY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3423 BRISTOL BRIDGE RD
 City ORANGE PARK State FL Zip Code 32073-2239
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 11 / 02 / 2016
Transaction ID : SA11A.469612
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 175.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2941 OF 4311
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. PRATER, BEVERLY, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 3423 BRISTOL BRIDGE RD

City ORANGE PARK	State FL	Zip Code 32073-2239
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
300.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11		02		2016

Transaction ID : SA11A.469613

Amount of Each Receipt this Period
50.00

Memo Item CONTRIBUTION

B. PRATER, BEVERLY, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 3423 BRISTOL BRIDGE RD

City ORANGE PARK	State FL	Zip Code 32073-2239
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
300.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11		02		2016

Transaction ID : SA11A.469635

Amount of Each Receipt this Period
50.00

Memo Item CONTRIBUTION

C. PRATER, BEVERLY, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 3423 BRISTOL BRIDGE RD

City ORANGE PARK	State FL	Zip Code 32073-2239
---------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
300.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11		02		2016

Transaction ID : SA11A.469642

Amount of Each Receipt this Period
50.00

Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	150.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2942 OF 4311
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. PRATER, BURT, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 4 OLDFIELD VILLAGE ROAD

City OKATIE	State SC	Zip Code 29909-7011
----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) SELF EMPLOYED	Occupation (for Individual) PHYSICIAN
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
225.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		27		2016

Transaction ID : SA11A.456580

Amount of Each Receipt this Period
25.00

Memo Item CONTRIBUTION

B. PRATHER, LORENE, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 3763 MISSOURI ROAD

City MARIANNA	State FL	Zip Code 32446-5628
------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
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Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
355.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11		01		2016

Transaction ID : SA11A.462610

Amount of Each Receipt this Period
25.00

Memo Item CONTRIBUTION

C. PRATT, BILL, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 432 CHESTNUT LANE

City ROANOKE	State TX	Zip Code 76262-1497
-----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
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Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		27		2016

Transaction ID : SA11A.452857

Amount of Each Receipt this Period
250.00

Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	300.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2943 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. PRATT, DONALD, H., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3615 RURAL ST
 City ROCKFORD State IL Zip Code 61107-3503
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 700.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 24 / 2016
Transaction ID : SA11A.445581
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION

B. PRATT, DONALD, H., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3615 RURAL ST
 City ROCKFORD State IL Zip Code 61107-3503
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 700.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 07 / 2016
Transaction ID : SA11A.475475
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION

C. PRATT, IRVING, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO BOX 53391
 City LAFAYETTE State LA Zip Code 70505-3391
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) WAI Occupation (for Individual) SALES
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 375.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 31 / 2016
Transaction ID : SA11A.464226
 Amount of Each Receipt this Period
 30.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	230.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2944 OF 4311
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. PRATT, IRVING, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address PO BOX 53391

City LAFAYETTE	State LA	Zip Code 70505-3391
-------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) WAI	Occupation (for Individual) SALES
--	--------------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
375.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		31		2016

Transaction ID : SA11A.464257

Amount of Each Receipt this Period
25.00

Memo Item
CONTRIBUTION

B. PRESSLEY, HOMER, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 126 HUNINGTON CHASE DRIVE

City MADISON	State AL	Zip Code 35758-6921
-----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		28		2016

Transaction ID : SA11A.461354

Amount of Each Receipt this Period
250.00

Memo Item
CONTRIBUTION

C. PREWITT, WILLIAM, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 2302 SCOTNEY COURT

City COLLEGE STATION	State TX	Zip Code 77845-1933
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
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Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		28		2016

Transaction ID : SA11A.454711

Amount of Each Receipt this Period
250.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	525.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2945 OF 4311
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name A. PRICE, C., , ,		Date of Receipt M M / D D / Y Y Y Y Y Y 11 / 04 / 2016
Mailing Address 502 FRUITVILLE ROAD NONE		Transaction ID : SA11A.471150
City GREENVILLE	State SC	Zip Code 29607-6011
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 100.00
Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED	<input type="checkbox"/> Memo Item CONTRIBUTION
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 750.00	

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name B. PRICE, C., , ,		Date of Receipt M M / D D / Y Y Y Y Y Y 11 / 07 / 2016
Mailing Address 502 FRUITVILLE ROAD NONE		Transaction ID : SA11A.476565
City GREENVILLE	State SC	Zip Code 29607-6011
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 250.00
Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED	<input type="checkbox"/> Memo Item CONTRIBUTION
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 750.00	

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name C. PRICE, GLORIA, , ,		Date of Receipt M M / D D / Y Y Y Y Y Y 10 / 21 / 2016
Mailing Address 17427 WOODS EDGE		Transaction ID : SA11A.444276
City DALLAS	State TX	Zip Code 75287-7541
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 25.00
Name of Employer (for Individual) PRIME LENDING	Occupation (for Individual) MORTGAGE BROKER	<input type="checkbox"/> Memo Item CONTRIBUTION
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Aggregate Year-to-Date ▼ 225.00	

SUBTOTAL of Receipts This Page (optional).....▶	375.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2946 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
Team Ryan

A. PRICE, GLORIA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 17427 WOODS EDGE
 City DALLAS State TX Zip Code 75287-7541
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) PRIME LENDING Occupation (for Individual) MORTGAGE BROKER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 225.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 10 / 26 / 2016
Transaction ID : SA11A.450885
 Amount of Each Receipt this Period
 25.00
 Memo Item
 CONTRIBUTION

B. PRICE, GLORIA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 17427 WOODS EDGE
 City DALLAS State TX Zip Code 75287-7541
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) PRIME LENDING Occupation (for Individual) MORTGAGE BROKER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 225.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 11 / 03 / 2016
Transaction ID : SA11A.468851
 Amount of Each Receipt this Period
 25.00
 Memo Item
 CONTRIBUTION

C. PRICE, GLORIA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 17427 WOODS EDGE
 City DALLAS State TX Zip Code 75287-7541
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) PRIME LENDING Occupation (for Individual) MORTGAGE BROKER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 225.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 11 / 05 / 2016
Transaction ID : SA11A.479142
 Amount of Each Receipt this Period
 25.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	75.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2947 OF 4311
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Team Ryan

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name A. PRICE JR, JAY, , ,		Date of Receipt MM / DD / YYYY 11 / 04 / 2016 Transaction ID : SA11A.467620
Mailing Address 339 W BARRY AVENUE APT 26 B		Amount of Each Receipt this Period 100.00
City CHICAGO	State IL	Zip Code 60657-5601
FEC ID number of contributing federal political committee. C		<input type="checkbox"/> Memo Item CONTRIBUTION
Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00	

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name B. PRICE, JOAN, , ,		Date of Receipt MM / DD / YYYY 11 / 03 / 2016 Transaction ID : SA11A.465484
Mailing Address 3301 STOREY LAKE DRIVE		Amount of Each Receipt this Period 200.00
City TYLER	State TX	Zip Code 75707-1759
FEC ID number of contributing federal political committee. C		<input type="checkbox"/> Memo Item CONTRIBUTION
Name of Employer (for Individual) LARRY PRICE	Occupation (for Individual) TRUCK DEALERSHIP	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 400.00	

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name C. PRICKETT, CAROLINE, , ,		Date of Receipt MM / DD / YYYY 11 / 03 / 2016 Transaction ID : SA11A.469187
Mailing Address 16 GREAT HOUSE FARM LANE		Amount of Each Receipt this Period 150.00
City CHESAPEAKE CITY	State MD	Zip Code 21915-2107
FEC ID number of contributing federal political committee. C		<input type="checkbox"/> Memo Item CONTRIBUTION
Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Aggregate Year-to-Date ▼ 450.00	

SUBTOTAL of Receipts This Page (optional).....	450.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2948 OF 4311
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. PRIEST, KATHLEEN, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 725 WINDFIELD DRIVE

City LOVELAND	State OH	Zip Code 45140-9160
------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) PROCTER & GAMBLE	Occupation (for Individual) IT MANAGER
---	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
217.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		30		2016

Transaction ID : SA11A.464916

Amount of Each Receipt this Period
32.00

Memo Item
CONTRIBUTION

B. PRIEST, KATHLEEN, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 725 WINDFIELD DRIVE

City LOVELAND	State OH	Zip Code 45140-9160
------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) PROCTER & GAMBLE	Occupation (for Individual) IT MANAGER
---	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
217.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11		04		2016

Transaction ID : SA11A.471874

Amount of Each Receipt this Period
32.00

Memo Item
CONTRIBUTION

C. PRIESTLEY, ROBERT, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 161 IONE DRIVE

City MERIDEN	State CT	Zip Code 06450-6669
-----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
243.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11		05		2016

Transaction ID : SA11A.478675

Amount of Each Receipt this Period
18.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	82.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2949 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
Team Ryan

A. PRIESTLEY, ROBERT, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 161 IONE DRIVE
 City MERIDEN State CT Zip Code 06450-6669
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 243.00

Date of Receipt 11 / 05 / 2016
Transaction ID : SA11A.478682
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

B. PRILL, SALLY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5590 NORWICH PARKWAY APT 426
 City OAK PARK HEIGHTS State MN Zip Code 55082-4577
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 11 / 04 / 2016
Transaction ID : SA11A.467531
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

C. PRINCE, TODD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2224 REGENCY WOODS DR
 City LISLE State IL Zip Code 60532-1178
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) SELF
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 1250.00

Date of Receipt 10 / 29 / 2016
Transaction ID : SA11A.460942
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	550.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2950 OF 4311
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. PRINCE, TODD, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 2224 REGENCY WOODS DR
City LISLE State IL Zip Code 60532-1178
FEC ID number of contributing federal political committee. **C**
Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) SELF
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 1250.00

Date of Receipt 10 / 29 / 2016
Transaction ID : SA11A.460944
Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

B. PRINCE, TODD, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 2224 REGENCY WOODS DR
City LISLE State IL Zip Code 60532-1178
FEC ID number of contributing federal political committee. **C**
Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) SELF
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 1250.00

Date of Receipt 10 / 29 / 2016
Transaction ID : SA11A.460949
Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

C. PRINCE, TODD, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 2224 REGENCY WOODS DR
City LISLE State IL Zip Code 60532-1178
FEC ID number of contributing federal political committee. **C**
Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) SELF
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 1250.00

Date of Receipt 10 / 29 / 2016
Transaction ID : SA11A.460951
Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 750.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2951 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. PRITCHARD, JACK, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1004 HOLIDAY
 City PLAINVIEW State TX Zip Code 79072-6044
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 775.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 21 / 2016
Transaction ID : SA11A.444497
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION

B. PRITCHARD, JACK, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1004 HOLIDAY
 City PLAINVIEW State TX Zip Code 79072-6044
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 775.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 26 / 2016
Transaction ID : SA11A.454557
 Amount of Each Receipt this Period
 250.00
 Memo Item
 CONTRIBUTION

C. PRITCHETT, V, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 433 RINCON RD
 City EL SOBRANTE State CA Zip Code 94803-1628
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 04 / 2016
Transaction ID : SA11A.473790
 Amount of Each Receipt this Period
 50.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	400.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2952 OF 4311
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. PRITCHETT, V, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 433 RINCON RD

City EL SOBRANTE	State CA	Zip Code 94803-1628
---------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
300.00

Date of Receipt

M M / D D / Y Y Y Y Y
11 / 07 / 2016

Transaction ID : SA11A.476667

Amount of Each Receipt this Period
50.00

Memo Item CONTRIBUTION

B. PRITCHETT, V, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 433 RINCON RD

City EL SOBRANTE	State CA	Zip Code 94803-1628
---------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
300.00

Date of Receipt

M M / D D / Y Y Y Y Y
11 / 06 / 2016

Transaction ID : SA11A.477413

Amount of Each Receipt this Period
50.00

Memo Item CONTRIBUTION

C. PRITZKER, ANTHONY, , MR.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 11111 SANTA MONICA BLVD STE 1650

City LOS ANGELES	State CA	Zip Code 90025-3350
---------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) INFORMATION REQUESTED PER BEST EFFORTS	Occupation (for Individual) INFORMATION REQUESTED PER BES
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
25000.00

Date of Receipt

M M / D D / Y Y Y Y Y
11 / 08 / 2016

Transaction ID : SA11A.467811

Amount of Each Receipt this Period
25000.00

Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	25100.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2953 OF 4311
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. PRIVETT, DARRIN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 21071 PLACERITA CANYON ROAD
 City NEWHALL State CA Zip Code 91321-1924
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SCEPG Occupation (for Individual) EMERGENCY PHYSICIAN
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 10 / 24 / 2016
Transaction ID : SA11A.449172
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

B. PROCTOR, DANIEL, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 810 BLACKBERRY HILL
 City NASHVILLE State TN Zip Code 37221-4347
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) DANIEL A PROCTOR Occupation (for Individual) BI
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 10 / 25 / 2016
Transaction ID : SA11A.451660
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

C. PROCTOR, DANIEL, E., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5401 VERNER DR.
 City LA PALMA State CA Zip Code 90623-2043
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) WHOLESALE Occupation (for Individual) TRI WEST LTD
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 1900.00

Date of Receipt 10 / 25 / 2016
Transaction ID : SA11A.448627
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 450.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2954 OF 4311
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. PROCTOR, DANIEL, E., MR.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 5401 VERNER DR.

City LA PALMA	State CA	Zip Code 90623-2043
------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) WHOLESALE	Occupation (for Individual) TRI WEST LTD
--	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1900.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	25	/	2016

Transaction ID : SA11A.448649

Amount of Each Receipt this Period
250.00

Memo Item
CONTRIBUTION

B. PROCTOR, RUSSELL, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 222 66TH STREET

City VIRGINIA BEACH	State VA	Zip Code 23451-2041
------------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) SELF EMPLOYED	Occupation (for Individual) CONSULTANT
--	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
600.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	31	/	2016

Transaction ID : SA11A.459263

Amount of Each Receipt this Period
100.00

Memo Item
CONTRIBUTION

C. PROCTOR, RUSSELL, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 222 66TH STREET

City VIRGINIA BEACH	State VA	Zip Code 23451-2041
------------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) SELF EMPLOYED	Occupation (for Individual) CONSULTANT
--	---

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
600.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	02	/	2016

Transaction ID : SA11A.466315

Amount of Each Receipt this Period
100.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	450.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2955 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. PROCTOR, RUSSELL, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 222 66TH STREET

City VIRGINIA BEACH	State VA	Zip Code 23451-2041
------------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) SELF EMPLOYED	Occupation (for Individual) CONSULTANT
--	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
600.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
11		04		2016

Transaction ID : SA11A.470467

Amount of Each Receipt this Period
100.00

Memo Item
CONTRIBUTION

B. PROCTOR, RUSSELL, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 222 66TH STREET

City VIRGINIA BEACH	State VA	Zip Code 23451-2041
------------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) SELF EMPLOYED	Occupation (for Individual) CONSULTANT
--	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
600.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
11		04		2016

Transaction ID : SA11A.474287

Amount of Each Receipt this Period
100.00

Memo Item
CONTRIBUTION

C. PROCTOR, RUSSELL, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 222 66TH STREET

City VIRGINIA BEACH	State VA	Zip Code 23451-2041
------------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) SELF EMPLOYED	Occupation (for Individual) CONSULTANT
--	---

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
600.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
11		07		2016

Transaction ID : SA11A.475657

Amount of Each Receipt this Period
100.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	300.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2956 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
-----------------------------	-----------------------------	-----------------------------

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NAME OF COMMITTEE (In Full)
Team Ryan

A. PROCTOR, RUSSELL, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 222 66TH STREET
 City VIRGINIA BEACH State VA Zip Code 23451-2041
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) CONSULTANT
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 600.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 06 / 2016
Transaction ID : SA11A.477707
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION

B. PROUDFIT, NANCY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1411 WILLOWBROOK DRIVE
 City WASHINGTON State PA Zip Code 15301-5083
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) HOMEMAKER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 21 / 2016
Transaction ID : SA11A.481022
 Amount of Each Receipt this Period
 400.00
 Memo Item
 CONTRIBUTION

C. PROUTY, RICHARD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4380 LAZY CREEK DRIVE
 City TYLER State TX Zip Code 75707-1554
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 225.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 20 / 2016
Transaction ID : SA11A.442651
 Amount of Each Receipt this Period
 50.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	550.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2957 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. PRUESSNER, ROBERT, D., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 255N EGRET BAY BLVD.
 1123
 City LEAGUE CITY State TX Zip Code 77573-6533
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt **10 / 22 / 2016**
Transaction ID : SA11A.446746
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

B. PRUESSNER, ROBERT, D., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 255N EGRET BAY BLVD.
 1123
 City LEAGUE CITY State TX Zip Code 77573-6533
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt **11 / 03 / 2016**
Transaction ID : SA11A.468588
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

C. PRYOR, J., R., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5535 MEMORIAL DR STE F 611
 City HOUSTON State TX Zip Code 77007-8021
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) INFORMATION REQUESTED PER BEST EFFORTS Occupation (for Individual) INFORMATION REQUESTED PER BEST EFFORTS
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 5000.00

Date of Receipt **10 / 24 / 2016**
Transaction ID : SA11A.443483
 Amount of Each Receipt this Period 5000.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	5200.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2958 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. PUBLOW, ANDREW, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 896 HIGHLAND AVE.
 City ROCHESTER State NY Zip Code 14620-1861
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt **10 / 22 / 2016**
Transaction ID : SA11A.446931
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

B. PUBLOW, ANDREW, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 896 HIGHLAND AVE.
 City ROCHESTER State NY Zip Code 14620-1861
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt **11 / 04 / 2016**
Transaction ID : SA11A.471298
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

C. PUENTE, JACQUELYN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4402 RESERVOIR ROAD, NW
 City WASHINGTON State DC Zip Code 20007-2041
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) COMCAST CORPORATION Occupation (for Individual) EXECUTIVE DIRECTOR, EXTERNAL A
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt **10 / 28 / 2016**
Transaction ID : SA11A.455477
 Amount of Each Receipt this Period 500.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	700.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 2959 OF 4311
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Team Ryan

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name A. PUGH, DALE, , ,			Date of Receipt MM / DD / YYYY 10 / 26 / 2016
Mailing Address 303 MUSGRAVE STREET			Transaction ID : SA11A.450998
City PITTSBURGH	State PA	Zip Code 15207-1494	Amount of Each Receipt this Period 30.00
FEC ID number of contributing federal political committee. C			<input type="checkbox"/> Memo Item CONTRIBUTION
Name of Employer (for Individual) ALLEGHENY COUNTY SHERIFF'S OFFICE		Occupation (for Individual) DEPUTY SHERIFF	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 230.00	

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name B. PUGH, DALE, , ,			Date of Receipt MM / DD / YYYY 10 / 28 / 2016
Mailing Address 303 MUSGRAVE STREET			Transaction ID : SA11A.461491
City PITTSBURGH	State PA	Zip Code 15207-1494	Amount of Each Receipt this Period 25.00
FEC ID number of contributing federal political committee. C			<input type="checkbox"/> Memo Item CONTRIBUTION
Name of Employer (for Individual) ALLEGHENY COUNTY SHERIFF'S OFFICE		Occupation (for Individual) DEPUTY SHERIFF	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 230.00	

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name C. PUGH, DALE, , ,			Date of Receipt MM / DD / YYYY 11 / 01 / 2016
Mailing Address 303 MUSGRAVE STREET			Transaction ID : SA11A.462765
City PITTSBURGH	State PA	Zip Code 15207-1494	Amount of Each Receipt this Period 25.00
FEC ID number of contributing federal political committee. C			<input type="checkbox"/> Memo Item CONTRIBUTION
Name of Employer (for Individual) ALLEGHENY COUNTY SHERIFF'S OFFICE		Occupation (for Individual) DEPUTY SHERIFF	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		Aggregate Year-to-Date ▼ 230.00	

SUBTOTAL of Receipts This Page (optional).....	80.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2960 OF 4311		
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14	<input type="checkbox"/> 11c <input type="checkbox"/> 15	<input type="checkbox"/> 12 <input type="checkbox"/> 16

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NAME OF COMMITTEE (In Full)
Team Ryan

A. PUGH, DALE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 303 MUSGRAVE STREET
 City PITTSBURGH State PA Zip Code 15207-1494
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) ALLEGHENY COUNTY SHERIFF'S OFFICE Occupation (for Individual) DEPUTY SHERIFF
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 230.00

Date of Receipt 11 / 07 / 2016
Transaction ID : SA11A.480118
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

B. PUGIL, GERARD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 922 91ST STREET
 City GALVESTON State TX Zip Code 77554-9148
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 500.00

Date of Receipt 10 / 28 / 2016
Transaction ID : SA11A.454729
 Amount of Each Receipt this Period 500.00
 Memo Item CONTRIBUTION

C. PUGMIRE, RONALD, J., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 7923 WILLOWCREST ROAD
 City SALT LAKE CITY State UT Zip Code 84121-5726
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 700.00

Date of Receipt 10 / 22 / 2016
Transaction ID : SA11A.446935
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	550.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2961 OF 4311
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. PUGMIRE, RONALD, J., ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 7923 WILLOWCREST ROAD

City SALT LAKE CITY	State UT	Zip Code 84121-5726
------------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
700.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		25		2016

Transaction ID : SA11A.447397

Amount of Each Receipt this Period
25.00

Memo Item CONTRIBUTION

B. PUGMIRE, RONALD, J., ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 7923 WILLOWCREST ROAD

City SALT LAKE CITY	State UT	Zip Code 84121-5726
------------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
700.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		26		2016

Transaction ID : SA11A.451412

Amount of Each Receipt this Period
30.00

Memo Item CONTRIBUTION

C. PUGMIRE, RONALD, J., ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 7923 WILLOWCREST ROAD

City SALT LAKE CITY	State UT	Zip Code 84121-5726
------------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
700.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		26		2016

Transaction ID : SA11A.451418

Amount of Each Receipt this Period
30.00

Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	85.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2962 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. PUGMIRE, RONALD, J., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 7923 WILLOWCREST ROAD
 City SALT LAKE CITY State UT Zip Code 84121-5726
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 700.00

Date of Receipt **10 / 31 / 2016**
Transaction ID : SA11A.458862
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

B. PUGMIRE, RONALD, J., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 7923 WILLOWCREST ROAD
 City SALT LAKE CITY State UT Zip Code 84121-5726
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 700.00

Date of Receipt **11 / 04 / 2016**
Transaction ID : SA11A.471740
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

C. PUGMIRE, RONALD, J., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 7923 WILLOWCREST ROAD
 City SALT LAKE CITY State UT Zip Code 84121-5726
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 700.00

Date of Receipt **11 / 04 / 2016**
Transaction ID : SA11A.473465
 Amount of Each Receipt this Period 30.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	80.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2963 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. PUGMIRE, RONALD, J., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 7923 WILLOWCREST ROAD
 City SALT LAKE CITY State UT Zip Code 84121-5726
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 700.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 11 / 04 / 2016
Transaction ID : SA11A.473506
 Amount of Each Receipt this Period
 25.00
 Memo Item
 CONTRIBUTION

B. PUGMIRE, RONALD, J., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 7923 WILLOWCREST ROAD
 City SALT LAKE CITY State UT Zip Code 84121-5726
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 700.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 11 / 04 / 2016
Transaction ID : SA11A.474095
 Amount of Each Receipt this Period
 25.00
 Memo Item
 CONTRIBUTION

C. PUGMIRE, RONALD, J., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 7923 WILLOWCREST ROAD
 City SALT LAKE CITY State UT Zip Code 84121-5726
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 700.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 11 / 06 / 2016
Transaction ID : SA11A.477109
 Amount of Each Receipt this Period
 30.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 80.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2964 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. PUGMIRE, RONALD, J., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 7923 WILLOWCREST ROAD
 City SALT LAKE CITY State UT Zip Code 84121-5726
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 700.00

Date of Receipt 11 / 05 / 2016
Transaction ID : SA11A.478868
 Amount of Each Receipt this Period 30.00
 Memo Item CONTRIBUTION

B. PULEO, JEAN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 18600 HASKINS RD
 City CHAGRIN FALLS State OH Zip Code 44023-1825
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 10 / 28 / 2016
Transaction ID : SA11A.461429
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

C. PULLMAN, JOHN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2914 MANAGUA PLACE
 City CARLSBAD State CA Zip Code 92009-7105
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 700.00

Date of Receipt 10 / 31 / 2016
Transaction ID : SA11A.459167
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	380.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2965 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name A. PULLMAN, JOHN, , ,			Date of Receipt					
Mailing Address 2914 MANAGUA PLACE			<table border="1" style="width: 100%;"> <tr> <td style="width: 33%;">M M M 11</td> <td style="width: 33%;">D D D 04</td> <td style="width: 33%;">Y Y Y Y Y Y 2016</td> </tr> </table>			M M M 11	D D D 04	Y Y Y Y Y Y 2016
M M M 11	D D D 04	Y Y Y Y Y Y 2016						
City CARLSBAD State CA Zip Code 92009-7105			Transaction ID : SA11A.471633					
FEC ID number of contributing federal political committee. C			Amount of Each Receipt this Period 100.00					
Name of Employer (for Individual) NONE		Occupation (for Individual) RETIRED	<input type="checkbox"/> Memo Item CONTRIBUTION					
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 700.00						

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name B. PULVER, BURK, , ,			Date of Receipt					
Mailing Address 4019 E 82PL			<table border="1" style="width: 100%;"> <tr> <td style="width: 33%;">M M M 11</td> <td style="width: 33%;">D D D 04</td> <td style="width: 33%;">Y Y Y Y Y Y 2016</td> </tr> </table>			M M M 11	D D D 04	Y Y Y Y Y Y 2016
M M M 11	D D D 04	Y Y Y Y Y Y 2016						
City TULSA State OK Zip Code 74137-			Transaction ID : SA11A.472029					
FEC ID number of contributing federal political committee. C			Amount of Each Receipt this Period 50.00					
Name of Employer (for Individual) AMERICAN AIRLINES		Occupation (for Individual) MANAGEMENT	<input type="checkbox"/> Memo Item CONTRIBUTION					
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 300.00						

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name C. PURCE, JOSEPH, , ,			Date of Receipt					
Mailing Address 2412 WESTGATE DRIVE			<table border="1" style="width: 100%;"> <tr> <td style="width: 33%;">M M M 10</td> <td style="width: 33%;">D D D 29</td> <td style="width: 33%;">Y Y Y Y Y Y 2016</td> </tr> </table>			M M M 10	D D D 29	Y Y Y Y Y Y 2016
M M M 10	D D D 29	Y Y Y Y Y Y 2016						
City SANFORD State NC Zip Code 27330-7680			Transaction ID : SA11A.461163					
FEC ID number of contributing federal political committee. C			Amount of Each Receipt this Period 100.00					
Name of Employer (for Individual) NONE		Occupation (for Individual) RETIRED	<input type="checkbox"/> Memo Item CONTRIBUTION					
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		Aggregate Year-to-Date ▼ 300.00						

SUBTOTAL of Receipts This Page (optional).....▶	250.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2966 OF 4311
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. PURCE, JOSEPH, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 2412 WESTGATE DRIVE

City SANFORD	State NC	Zip Code 27330-7680
-----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
300.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	04	/	2016

Transaction ID : SA11A.471729

Amount of Each Receipt this Period
100.00

Memo Item CONTRIBUTION

B. PURDON, RICHARD, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address P. O. BOX 906

City LAURIE	State MO	Zip Code 65038-0906
----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	31	/	2016

Transaction ID : SA11A.464455

Amount of Each Receipt this Period
50.00

Memo Item CONTRIBUTION

C. PURDY, GILBERT, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 3411 BOONE ROAD SE
105

City SALEM	State OR	Zip Code 97317-9336
---------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
353.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	04	/	2016

Transaction ID : SA11A.471855

Amount of Each Receipt this Period
30.00

Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	180.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2967 OF 4311
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. PURDY, VERL, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 4804 PELLYN FARM COURT

City CHARLOTTE	State NC	Zip Code 28226-6213
-------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) CADRILLION CAPITAL	Occupation (for Individual) OWNER
---	--------------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
750.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	28	/	2016

Transaction ID : SA11A.456031

Amount of Each Receipt this Period
250.00

Memo Item
CONTRIBUTION

B. PURDY, VERL, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 4804 PELLYN FARM COURT

City CHARLOTTE	State NC	Zip Code 28226-6213
-------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) CADRILLION CAPITAL	Occupation (for Individual) OWNER
---	--------------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
750.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	04	/	2016

Transaction ID : SA11A.473219

Amount of Each Receipt this Period
250.00

Memo Item
CONTRIBUTION

C. PURVIS, MARGARET, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address P. O. BOX 5140.

City MIDLAND	State TX	Zip Code 79704-5140
-----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) SELF EMPLOYED	Occupation (for Individual) OIL AND GAS
--	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	24	/	2016

Transaction ID : SA11A.445655

Amount of Each Receipt this Period
250.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	750.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2968 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. PUSSEY, GERALD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2709 W EDGEFIELD ROAD
 City FLORENCE State SC Zip Code 29501-1953
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Occupation (for Individual)
 INFORMATION REQUESTED PER BEST EFFORTS INFORMATION REQUESTED PER BE
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt
 11 / 03 / 2016
Transaction ID : SA11A.465529
 Amount of Each Receipt this Period
 150.00
 Memo Item
 CONTRIBUTION

B. PUTMAN, PAUL, T., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1501 OLD MONROVIA RD 13119
 City HUNTSVILLE State AL Zip Code 35806-5253
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Occupation (for Individual)
 BRAND BLACKWELL CO PC CPA
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt
 10 / 20 / 2016
Transaction ID : SA11A.441967
 Amount of Each Receipt this Period
 50.00
 Memo Item
 CONTRIBUTION

C. PUTMAN, PAUL, T., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1501 OLD MONROVIA RD 13119
 City HUNTSVILLE State AL Zip Code 35806-5253
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Occupation (for Individual)
 BRAND BLACKWELL CO PC CPA
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt
 10 / 31 / 2016
Transaction ID : SA11A.458052
 Amount of Each Receipt this Period
 50.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	250.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2969 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. PUTNAM, MARIE, H., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2055 N 26TH W
 City IDAHO FALLS State ID Zip Code 83402-5320
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt 10 / 21 / 2016
Transaction ID : SA11A.444122
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

B. PUTNAM, MARIE, H., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2055 N 26TH W
 City IDAHO FALLS State ID Zip Code 83402-5320
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt 10 / 21 / 2016
Transaction ID : SA11A.444125
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

C. PUTNAM, MARIE, H., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2055 N 26TH W
 City IDAHO FALLS State ID Zip Code 83402-5320
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt 10 / 31 / 2016
Transaction ID : SA11A.458703
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶ 125.00
TOTAL This Period (last page this line number only).....▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2970 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
Team Ryan

A. PUTNAM, MARIE, H., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2055 N 26TH W
 City IDAHO FALLS State ID Zip Code 83402-5320
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt 10 / 31 / 2016
Transaction ID : SA11A.458710
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

B. PUTNAM, MARIE, H., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2055 N 26TH W
 City IDAHO FALLS State ID Zip Code 83402-5320
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt 11 / 04 / 2016
Transaction ID : SA11A.479442
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

C. PUTNAM, MARIE, H., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2055 N 26TH W
 City IDAHO FALLS State ID Zip Code 83402-5320
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt 11 / 04 / 2016
Transaction ID : SA11A.479443
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	75.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2971 OF 4311		
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14	<input type="checkbox"/> 11c <input type="checkbox"/> 15	<input type="checkbox"/> 12 <input type="checkbox"/> 16

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NAME OF COMMITTEE (In Full)
Team Ryan

A. PUTNAM, MARIE, H., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2055 N 26TH W
 City IDAHO FALLS State ID Zip Code 83402-5320
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt 11 / 08 / 2016
Transaction ID : SA11A.479685
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

B. PYLE, SARAH, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3707 GILBERT AVE # 17
 City DALLAS State TX Zip Code 75219-6700
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 3650.00

Date of Receipt 11 / 07 / 2016
Transaction ID : SA11A.476641
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

C. QU Aid, MARVIN, M., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 15 PINEHILL WAY
 City MONTEREY State CA Zip Code 93940-4107
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 10 / 25 / 2016
Transaction ID : SA11A.448354
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	450.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2972 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
Team Ryan

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name A. QUALY, JOHN, , ,		Date of Receipt MM / DD / YYYY 11 / 07 / 2016 Transaction ID : SA11A.474879
Mailing Address 13 BRENTMOOR PARK		Amount of Each Receipt this Period 100.00
City CLAYTON	State MO	Zip Code 63105-3067
FEC ID number of contributing federal political committee. C		<input type="checkbox"/> Memo Item CONTRIBUTION
Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 2050.00	

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name B. QUALY, JOHN, , ,		Date of Receipt MM / DD / YYYY 11 / 07 / 2016 Transaction ID : SA11A.476167
Mailing Address 13 BRENTMOOR PARK		Amount of Each Receipt this Period 100.00
City CLAYTON	State MO	Zip Code 63105-3067
FEC ID number of contributing federal political committee. C		<input type="checkbox"/> Memo Item CONTRIBUTION
Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 2050.00	

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name C. QUALY, JOHN, , ,		Date of Receipt MM / DD / YYYY 11 / 07 / 2016 Transaction ID : SA11A.476169
Mailing Address 13 BRENTMOOR PARK		Amount of Each Receipt this Period 100.00
City CLAYTON	State MO	Zip Code 63105-3067
FEC ID number of contributing federal political committee. C		<input type="checkbox"/> Memo Item CONTRIBUTION
Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Aggregate Year-to-Date ▼ 2050.00	

SUBTOTAL of Receipts This Page (optional).....▶	300.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2973 OF 4311		
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14	<input type="checkbox"/> 11c <input type="checkbox"/> 15	<input type="checkbox"/> 12 <input type="checkbox"/> 16

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NAME OF COMMITTEE (In Full)
Team Ryan

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name A. QUARLS, HARRY, F., ,			Date of Receipt M M / D D / Y Y Y Y Y Y 10 / 27 / 2016 Transaction ID : SA11A.452367		
Mailing Address 3832 GREENBRIER DRIVE			Amount of Each Receipt this Period 1500.00		
City DALLAS	State TX	Zip Code 75225-5217	Memo Item <input type="checkbox"/> CONTRIBUTION		
FEC ID number of contributing federal political committee. C					
Name of Employer (for Individual) GLOBAL INFRASTRUCTURE PARTNERS		Occupation (for Individual) PRIVATE EQUITY			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 5000.00			

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name B. QUILTY, MICHAEL, , ,			Date of Receipt M M / D D / Y Y Y Y Y Y 11 / 05 / 2016 Transaction ID : SA11A.479211		
Mailing Address 1 SURREY LANE			Amount of Each Receipt this Period 250.00		
City ROCKVILLE CENTRE	State NY	Zip Code 11570-1853	Memo Item <input type="checkbox"/> CONTRIBUTION		
FEC ID number of contributing federal political committee. C					
Name of Employer (for Individual) SURREY CAPITAL		Occupation (for Individual) ENTREPRENEUR			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 600.00			

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name C. QUINN, H, , ,			Date of Receipt M M / D D / Y Y Y Y Y Y 10 / 28 / 2016 Transaction ID : SA11A.455680		
Mailing Address 4222 HARLESS ROAD			Amount of Each Receipt this Period 50.00		
City EAU CLAIRE	State WI	Zip Code 54701-8126	Memo Item <input type="checkbox"/> CONTRIBUTION		
FEC ID number of contributing federal political committee. C					
Name of Employer (for Individual) QUINNPRO SOLUTIONS / SELF		Occupation (for Individual) PRODUCT DESIGN CONSULTANT			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		Aggregate Year-to-Date ▼ 225.00			

SUBTOTAL of Receipts This Page (optional).....▶	1800.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2974 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. QUIRUS, IRENE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 74 BUCK RD
 315
 City WARRINGTON State PA Zip Code 18976-1035
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 700.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 26 / 2016
Transaction ID : SA11A.450857
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION

B. QUIRUS, IRENE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 74 BUCK RD
 315
 City WARRINGTON State PA Zip Code 18976-1035
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 700.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 04 / 2016
Transaction ID : SA11A.474284
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION

C. QUIRUS, IRENE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 74 BUCK RD
 315
 City WARRINGTON State PA Zip Code 18976-1035
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 700.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 04 / 2016
Transaction ID : SA11A.474285
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	300.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2975 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. QUIRUS, IRENE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 74 BUCK RD
 315
 City WARRINGTON State PA Zip Code 18976-1035
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 700.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 04 / 2016
Transaction ID : SA11A.474290
 Amount of Each Receipt this Period
 100.00
 Memo Item CONTRIBUTION

B. QUODOMINE JR., RICHARD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 9598 HALYARDS COURT
 14
 City FORT MYERS State FL Zip Code 33919-4457
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 315.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 24 / 2016
Transaction ID : SA11A.446173
 Amount of Each Receipt this Period
 25.00
 Memo Item CONTRIBUTION

C. QUODOMINE JR., RICHARD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 9598 HALYARDS COURT
 14
 City FORT MYERS State FL Zip Code 33919-4457
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 315.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 04 / 2016
Transaction ID : SA11A.472778
 Amount of Each Receipt this Period
 25.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	150.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2976 OF 4311
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. QUODOMINE JR., RICHARD, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 9598 HALYARDS COURT
14

City FORT MYERS State FL Zip Code 33919-4457

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
315.00

Date of Receipt
11 / 04 / 2016
Transaction ID : SA11A.474145

Amount of Each Receipt this Period
30.00

Memo Item CONTRIBUTION

B. RACHWITZ, JOHN, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 2405 VERNICE DR

City COPPERAS COVE State TX Zip Code 76522-7597

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
300.00

Date of Receipt
11 / 02 / 2016
Transaction ID : SA11A.465840

Amount of Each Receipt this Period
100.00

Memo Item CONTRIBUTION

C. RADCLIFFE, CHARLES, W., ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1912 MARSH ROAD
APT 115

City WILMINGTON State DE Zip Code 19810-3950

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
400.00

Date of Receipt
10 / 28 / 2016
Transaction ID : SA11A.454707

Amount of Each Receipt this Period
100.00

Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 230.00

TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2977 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. RADDON, LYNDA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 10233 S GRAYBOULDER COURT
 City SANDY State UT Zip Code 84092-4508
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) INFORMATION REQUESTED PER BEST EFFORTS Occupation (for Individual) INFORMATION REQUESTED PER BE
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 450.00

Date of Receipt 10 / 25 / 2016
Transaction ID : SA11A.447465
 Amount of Each Receipt this Period 200.00
 Memo Item CONTRIBUTION

B. RADO, BRUCE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1717 N. DECATUR RD. 304
 City ATLANTA State GA Zip Code 30307-1013
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 400.00

Date of Receipt 10 / 28 / 2016
Transaction ID : SA11A.455944
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

C. RADO, BRUCE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1717 N. DECATUR RD. 304
 City ATLANTA State GA Zip Code 30307-1013
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 400.00

Date of Receipt 11 / 04 / 2016
Transaction ID : SA11A.472577
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... 300.00
TOTAL This Period (last page this line number only).....

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2978 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. RADZIKOWSKI , GIA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 9 MARION'S WAY
 City GEORGETOWN State MA Zip Code 01833-
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 10 / 25 / 2016
Transaction ID : SA11A.448338
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

B. RADZIKOWSKI , GIA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 9 MARION'S WAY
 City GEORGETOWN State MA Zip Code 01833-
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 10 / 25 / 2016
Transaction ID : SA11A.448340
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

C. RADZIKOWSKI , GIA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 9 MARION'S WAY
 City GEORGETOWN State MA Zip Code 01833-
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 11 / 02 / 2016
Transaction ID : SA11A.466761
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶ 125.00
TOTAL This Period (last page this line number only).....▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2979 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. RADZIKOWSKI , GIA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 9 MARION'S WAY
 City GEORGETOWN State MA Zip Code 01833-
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 06 / 2016
Transaction ID : SA11A.477149
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

B. RADZIKOWSKI , GIA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 9 MARION'S WAY
 City GEORGETOWN State MA Zip Code 01833-
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 06 / 2016
Transaction ID : SA11A.477150
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

C. RAFF, GAROLD, D., MR., JR.
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 16095 SAINT CROIX CIR
 City HUNTINGTON BEACH State CA Zip Code 92649-2047
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 2000.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 02 / 2016
Transaction ID : SA11A.465121
 Amount of Each Receipt this Period 1000.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	1050.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2980 OF 4311
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
Team Ryan

A. RAFFENSBERGER, VERN, E., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 214 GLEN ROCK ROAD
 City GLEN ROCK State PA Zip Code 17327-8300
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 305.00

Date of Receipt 10 / 25 / 2016
Transaction ID : SA11A.447326
 Amount of Each Receipt this Period 35.00
 Memo Item CONTRIBUTION

B. RAFFENSBERGER, VERN, E., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 214 GLEN ROCK ROAD
 City GLEN ROCK State PA Zip Code 17327-8300
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 305.00

Date of Receipt 10 / 31 / 2016
Transaction ID : SA11A.457329
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

C. RAGER, IRA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 19097 GEMMILL RD
 City STEWARTSTOWN State PA Zip Code 17363-7965
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 275.00

Date of Receipt 10 / 27 / 2016
Transaction ID : SA11A.456736
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶ 160.00
TOTAL This Period (last page this line number only).....▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2981 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. RAGLAND, JOHN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2522 E LUKE AVENUE
 City PHOENIX State AZ Zip Code 85016-2241
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 2000.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 02 / 2016
Transaction ID : SA11A.465111
 Amount of Each Receipt this Period
 1000.00
 Memo Item
 CONTRIBUTION

B. RAGLAND, SUSAN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 310 ARBOR ROAD
 City WINSTON SALEM State NC Zip Code 27104-1910
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 04 / 2016
Transaction ID : SA11A.473291
 Amount of Each Receipt this Period
 50.00
 Memo Item
 CONTRIBUTION

C. RAINEY, BENJAMIN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1995 NW CARY PKWY 110
 City MORRISVILLE State NC Zip Code 27560-4600
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 280.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 02 / 2016
Transaction ID : SA11A.466818
 Amount of Each Receipt this Period
 25.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	1075.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2982 OF 4311
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. RAINES, BOBBY, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 154 SAINT ANDREWS DRIVE

City JACKSON State MS Zip Code 39211-2517

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
875.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 24 / 2016

Transaction ID : SA11A.446170

Amount of Each Receipt this Period
50.00

Memo Item CONTRIBUTION

B. RAINES, BOBBY, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 154 SAINT ANDREWS DRIVE

City JACKSON State MS Zip Code 39211-2517

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
875.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 04 / 2016

Transaction ID : SA11A.472041

Amount of Each Receipt this Period
50.00

Memo Item CONTRIBUTION

C. RAINES, CYNTHIA, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 17214 TAMARACK DRIVE

City WILLIAMSPORT State MD Zip Code 21795-1603

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
1300.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 25 / 2016

Transaction ID : SA11A.447940

Amount of Each Receipt this Period
100.00

Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	200.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2983 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. RAINES, CYNTHIA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 17214 TAMARACK DRIVE
 City WILLIAMSPORT State MD Zip Code 21795-1603
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1300.00

Date of Receipt **10 / 25 / 2016**
Transaction ID : SA11A.447943
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

B. RAINES, CYNTHIA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 17214 TAMARACK DRIVE
 City WILLIAMSPORT State MD Zip Code 21795-1603
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1300.00

Date of Receipt **10 / 30 / 2016**
Transaction ID : SA11A.459387
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

C. RAINES, CYNTHIA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 17214 TAMARACK DRIVE
 City WILLIAMSPORT State MD Zip Code 21795-1603
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1300.00

Date of Receipt **10 / 30 / 2016**
Transaction ID : SA11A.459389
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	200.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2984 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. RAINES, CYNTHIA, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 17214 TAMARACK DRIVE
City WILLIAMSPORT State MD Zip Code 21795-1603
FEC ID number of contributing federal political committee. **C**
Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 1300.00

Date of Receipt **11 / 02 / 2016**
Transaction ID : SA11A.466096
Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

B. RAINES, CYNTHIA, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 17214 TAMARACK DRIVE
City WILLIAMSPORT State MD Zip Code 21795-1603
FEC ID number of contributing federal political committee. **C**
Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 1300.00

Date of Receipt **11 / 07 / 2016**
Transaction ID : SA11A.474917
Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

C. RAINES, CYNTHIA, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 17214 TAMARACK DRIVE
City WILLIAMSPORT State MD Zip Code 21795-1603
FEC ID number of contributing federal political committee. **C**
Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 1300.00

Date of Receipt **11 / 06 / 2016**
Transaction ID : SA11A.476726
Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	300.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2985 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. RAINES, CYNTHIA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 17214 TAMARACK DRIVE
 City WILLIAMSPORT State MD Zip Code 21795-1603
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1300.00

Date of Receipt
 11 / 06 / 2016
Transaction ID : SA11A.476915
 Amount of Each Receipt this Period
 50.00
 Memo Item CONTRIBUTION

B. RAINES, CYNTHIA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 17214 TAMARACK DRIVE
 City WILLIAMSPORT State MD Zip Code 21795-1603
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1300.00

Date of Receipt
 11 / 06 / 2016
Transaction ID : SA11A.476918
 Amount of Each Receipt this Period
 50.00
 Memo Item CONTRIBUTION

C. RAINES, CYNTHIA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 17214 TAMARACK DRIVE
 City WILLIAMSPORT State MD Zip Code 21795-1603
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1300.00

Date of Receipt
 11 / 06 / 2016
Transaction ID : SA11A.476942
 Amount of Each Receipt this Period
 50.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 150.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2986 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. RAINES, CYNTHIA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 17214 TAMARACK DRIVE
 City WILLIAMSPORT State MD Zip Code 21795-1603
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1300.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 06 / 2016
Transaction ID : SA11A.476945
 Amount of Each Receipt this Period
 50.00
 Memo Item
 CONTRIBUTION

B. RAINES, CYNTHIA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 17214 TAMARACK DRIVE
 City WILLIAMSPORT State MD Zip Code 21795-1603
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1300.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 06 / 2016
Transaction ID : SA11A.477672
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION

C. RAINES, CYNTHIA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 17214 TAMARACK DRIVE
 City WILLIAMSPORT State MD Zip Code 21795-1603
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1300.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 06 / 2016
Transaction ID : SA11A.477673
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	250.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2987 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. RAINES, DAVID, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 611 GRAMMONT ST
 City MONROE State LA Zip Code 71201-7516
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) GI CLINIC Occupation (for Individual) PHYSICIAN
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt 10 / 20 / 2016
Transaction ID : SA11A.444895
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

B. RAINES, DAVID, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 611 GRAMMONT ST
 City MONROE State LA Zip Code 71201-7516
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) GI CLINIC Occupation (for Individual) PHYSICIAN
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt 10 / 20 / 2016
Transaction ID : SA11A.444901
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

C. RAINES, DAVID, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 611 GRAMMONT ST
 City MONROE State LA Zip Code 71201-7516
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) GI CLINIC Occupation (for Individual) PHYSICIAN
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt 10 / 27 / 2016
Transaction ID : SA11A.453840
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	300.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2988 OF 4311
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. RAINES, DAVID, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 611 GRAMMONT ST
City MONROE State LA Zip Code 71201-7516
FEC ID number of contributing federal political committee. **C**
Name of Employer (for Individual) GI CLINIC Occupation (for Individual) PHYSICIAN
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 1000.00

Date of Receipt 11 / 04 / 2016
Transaction ID : SA11A.473690
Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

B. RALONDE, RAYMOND, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 8720 S.W. ASH MEADOWS RD 1222
City WILSONVILLE State OR Zip Code 97070-4060
FEC ID number of contributing federal political committee. **C**
Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 250.00

Date of Receipt 11 / 04 / 2016
Transaction ID : SA11A.473069
Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

C. RAMBHAROSE, RITA, , MS.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 25781 AMAPOLAS STREET
City LOMA LINDA State CA Zip Code 92354-2501
FEC ID number of contributing federal political committee. **C**
Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
Receipt For: Primary General Other (specify)
Aggregate Year-to-Date ▼ 2610.00

Date of Receipt 10 / 24 / 2016
Transaction ID : SA11A.443802
Amount of Each Receipt this Period 185.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 335.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2989 OF 4311
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. RAMBHAROSE, RITA, , MS.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 25781 AMAPOLAS STREET

City LOMA LINDA	State CA	Zip Code 92354-2501
--------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
2610.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		31		2016

Transaction ID : SA11A.457281

Amount of Each Receipt this Period
500.00

Memo Item CONTRIBUTION

B. RAMBHAROSE, RITA, , MS.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 25781 AMAPOLAS STREET

City LOMA LINDA	State CA	Zip Code 92354-2501
--------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
2610.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11		01		2016

Transaction ID : SA11A.461590

Amount of Each Receipt this Period
200.00

Memo Item CONTRIBUTION

C. RAMBHAROSE, RITA, , MS.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 25781 AMAPOLAS STREET

City LOMA LINDA	State CA	Zip Code 92354-2501
--------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
2610.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11		02		2016

Transaction ID : SA11A.464990

Amount of Each Receipt this Period
100.00

Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	800.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2990 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. RAMBHAROSE, RITA, , MS.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 25781 AMAPOLAS STREET
 City LOMA LINDA State CA Zip Code 92354-2501
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 2610.00

Date of Receipt 11 / 08 / 2016
Transaction ID : SA11A.468021
 Amount of Each Receipt this Period 200.00
 Memo Item CONTRIBUTION

B. RAMMING, JOHN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3413 VINTAGE DR
 City ROUND ROCK State TX Zip Code 78664-7902
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) LOANSTAR PAVING Occupation (for Individual) CONSTRUCTION
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 2250.00

Date of Receipt 11 / 02 / 2016
Transaction ID : SA11A.469781
 Amount of Each Receipt this Period 1000.00
 Memo Item CONTRIBUTION

C. RAMOS, PHILLIP, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 15315 CORNET AVENUE
 City SANTA FE SPRINGS State CA Zip Code 90670-5531
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) PHILATRON Occupation (for Individual) PHILATRON
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 1100.00

Date of Receipt 10 / 27 / 2016
Transaction ID : SA11A.453967
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	1450.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2991 OF 4311
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. RAMOS, PHILLIP, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 15315 CORNET AVENUE

City SANTA FE SPRINGS	State CA	Zip Code 90670-5531
--------------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) PHILATRON	Occupation (for Individual) PHILATRON
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1100.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	27	/	2016

Transaction ID : SA11A.453983

Amount of Each Receipt this Period
250.00

Memo Item
CONTRIBUTION

B. RAMOS, PHILLIP, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 15315 CORNET AVENUE

City SANTA FE SPRINGS	State CA	Zip Code 90670-5531
--------------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) PHILATRON	Occupation (for Individual) PHILATRON
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1100.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	04	/	2016

Transaction ID : SA11A.471090

Amount of Each Receipt this Period
250.00

Memo Item
CONTRIBUTION

C. RAMSEY, MELONY, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 10 ASH COURT

City LAFAYETTE	State IN	Zip Code 47905-3902
-------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) RAMZS EMPORIUM	Occupation (for Individual) OFFICE MANAGER
---	---

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	24	/	2016

Transaction ID : SA11A.449302

Amount of Each Receipt this Period
100.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	600.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2992 OF 4311
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. RAMSEY, MELONY, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 10 ASH COURT

City LAFAYETTE	State IN	Zip Code 47905-3902
-------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) RAMZS EMPORIUM	Occupation (for Individual) OFFICE MANAGER
---	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		24		2016

Transaction ID : SA11A.449305

Amount of Each Receipt this Period
100.00

Memo Item
CONTRIBUTION

B. RAMSEY, MELONY, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 10 ASH COURT

City LAFAYETTE	State IN	Zip Code 47905-3902
-------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) RAMZS EMPORIUM	Occupation (for Individual) OFFICE MANAGER
---	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		25		2016

Transaction ID : SA11A.451769

Amount of Each Receipt this Period
100.00

Memo Item
CONTRIBUTION

C. RAMSEY, MELONY, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 10 ASH COURT

City LAFAYETTE	State IN	Zip Code 47905-3902
-------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) RAMZS EMPORIUM	Occupation (for Individual) OFFICE MANAGER
---	---

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11		02		2016

Transaction ID : SA11A.465862

Amount of Each Receipt this Period
50.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	250.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2993 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. RAMSEY, MELONY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 10 ASH COURT
 City LAFAYETTE State IN Zip Code 47905-3902
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RAMZS EMPORIUM Occupation (for Individual) OFFICE MANAGER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt
 11 / 04 / 2016
Transaction ID : SA11A.470442
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

B. RAMSEY, MELONY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 10 ASH COURT
 City LAFAYETTE State IN Zip Code 47905-3902
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RAMZS EMPORIUM Occupation (for Individual) OFFICE MANAGER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt
 11 / 04 / 2016
Transaction ID : SA11A.472761
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

C. RANDLE, MARK, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 864 CHELSEA LANE
 City ENCINITAS State CA Zip Code 92024-6675
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt
 10 / 20 / 2016
Transaction ID : SA11A.442106
 Amount of Each Receipt this Period 1000.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	1150.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2994 OF 4311
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. RANDLETT, WILLIAM, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 204 CHARLIE LACKEY RD.

City HIDDENITE	State NC	Zip Code 28636-8233
-------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
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Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
500.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
11 / 02 / 2016

Transaction ID : SA11A.469745

Amount of Each Receipt this Period
100.00

Memo Item CONTRIBUTION

B. RANDLETT, WILLIAM, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 204 CHARLIE LACKEY RD.

City HIDDENITE	State NC	Zip Code 28636-8233
-------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
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Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
500.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
11 / 02 / 2016

Transaction ID : SA11A.469776

Amount of Each Receipt this Period
100.00

Memo Item CONTRIBUTION

C. RANDOLPH, RICHARD, G., ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 207 GARFIELD STREET
PO BOX 218

City LINDSEY	State OH	Zip Code 43442-
-----------------	-------------	--------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
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Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
250.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
11 / 01 / 2016

Transaction ID : SA11A.462684

Amount of Each Receipt this Period
50.00

Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	250.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2995 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
Team Ryan

A. RANEY, JOHN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5759 W. BERYK AVE
 N.A.
 City GLENDALE State AZ Zip Code 85302-1324
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) PSYCHIATRIC CONSULTANT
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1850.00

Date of Receipt
 11 / 01 / 2016
Transaction ID : SA11A.463020
 Amount of Each Receipt this Period
 550.00
 Memo Item
 CONTRIBUTION

B. RANEY, JOHN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5759 W. BERYK AVE
 N.A.
 City GLENDALE State AZ Zip Code 85302-1324
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) PSYCHIATRIC CONSULTANT
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1850.00

Date of Receipt
 11 / 01 / 2016
Transaction ID : SA11A.463025
 Amount of Each Receipt this Period
 1000.00
 Memo Item
 CONTRIBUTION

C. RANEY, JOHN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5759 W. BERYK AVE
 N.A.
 City GLENDALE State AZ Zip Code 85302-1324
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) PSYCHIATRIC CONSULTANT
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1850.00

Date of Receipt
 11 / 07 / 2016
Transaction ID : SA11A.476668
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	1650.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2996 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
Team Ryan

A. RANEY, JOHN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5759 W. BERYK AVE
 N.A.
 City GLENDALE State AZ Zip Code 85302-1324
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) PSYCHIATRIC CONSULTANT
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1850.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 07 / 2016
Transaction ID : SA11A.476675
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION

B. RANFT, DONALD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 64 CUPSAW AVE
 City RINGWOOD State NJ Zip Code 07456-2920
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) COLLEN IP Occupation (for Individual) PATENT ATTORNEY
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 475.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 20 / 2016
Transaction ID : SA11A.441977
 Amount of Each Receipt this Period
 50.00
 Memo Item
 CONTRIBUTION

C. RANFT, DONALD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 64 CUPSAW AVE
 City RINGWOOD State NJ Zip Code 07456-2920
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) COLLEN IP Occupation (for Individual) PATENT ATTORNEY
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 475.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 31 / 2016
Transaction ID : SA11A.458251
 Amount of Each Receipt this Period
 25.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	175.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2997 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name A. RANSCHAU, CAROL, , ,		Date of Receipt MM / DD / YYYY 10 / 31 / 2016 Transaction ID : SA11A.458802
Mailing Address 121 ENSENADA AVE.		Amount of Each Receipt this Period 25.00
City THOUSAND OAKS	State CA	Zip Code 91320-3628
FEC ID number of contributing federal political committee. C		<input type="checkbox"/> Memo Item CONTRIBUTION
Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 390.00	

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name B. RANSCHAU, CAROL, , ,		Date of Receipt MM / DD / YYYY 10 / 29 / 2016 Transaction ID : SA11A.460750
Mailing Address 121 ENSENADA AVE.		Amount of Each Receipt this Period 25.00
City THOUSAND OAKS	State CA	Zip Code 91320-3628
FEC ID number of contributing federal political committee. C		<input type="checkbox"/> Memo Item CONTRIBUTION
Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 390.00	

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name C. RAO, TANNIRU, , ,		Date of Receipt MM / DD / YYYY 10 / 27 / 2016 Transaction ID : SA11A.453810
Mailing Address 14950 DEL PRADO CT		Amount of Each Receipt this Period 100.00
City ELM GROVE	State WI	Zip Code 53122-1513
FEC ID number of contributing federal political committee. C		<input type="checkbox"/> Memo Item CONTRIBUTION
Name of Employer (for Individual) TANNIRU R RAO	Occupation (for Individual) CEO	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Aggregate Year-to-Date ▼ 1050.00	

SUBTOTAL of Receipts This Page (optional).....▶	150.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2998 OF 4311
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. RASCH, KENNETH, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1834 JOHNSON AVE

City FORT DODGE	State IA	Zip Code 50501-8572
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) KENNETH RASCH	Occupation (for Individual) FARMER
--	---------------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
916.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	30	/	2016

Transaction ID : SA11A.460286

Amount of Each Receipt this Period
25.00

Memo Item
CONTRIBUTION

B. RASCH, KENNETH, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1834 JOHNSON AVE

City FORT DODGE	State IA	Zip Code 50501-8572
--------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) KENNETH RASCH	Occupation (for Individual) FARMER
--	---------------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
916.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	04	/	2016

Transaction ID : SA11A.472405

Amount of Each Receipt this Period
25.00

Memo Item
CONTRIBUTION

C. RATH, DELMAR, L., ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 160 HIGH STREET

City COCHRANTON	State PA	Zip Code 16314-8612
--------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
252.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	24	/	2016

Transaction ID : SA11A.443758

Amount of Each Receipt this Period
70.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	120.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2999 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. RATH, MARY, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 510 OLD CANEY RD.
6

City WHARTON	State TX	Zip Code 77488-4656
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) SELF EMPLOYED	Occupation (for Individual) PSYCHOTHERAPIST
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
225.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	27	/	2016

Transaction ID : SA11A.453770

Amount of Each Receipt this Period
25.00

Memo Item CONTRIBUTION

B. RATH, MARY, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 510 OLD CANEY RD.
6

City WHARTON	State TX	Zip Code 77488-4656
-----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) SELF EMPLOYED	Occupation (for Individual) PSYCHOTHERAPIST
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
225.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	04	/	2016

Transaction ID : SA11A.473571

Amount of Each Receipt this Period
25.00

Memo Item CONTRIBUTION

C. RATHS, ELEANOR, L., ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1144 GRANNY WHITE COURT

City NASHVILLE	State TN	Zip Code 37204-4115
-------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
700.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	27	/	2016

Transaction ID : SA11A.452782

Amount of Each Receipt this Period
50.00

Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	100.00
TOTAL This Period (last page this line number only).....▶	

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3000 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. RATHS, ELEANOR, L., ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 1144 GRANNY WHITE COURT

City NASHVILLE	State TN	Zip Code 37204-4115
FEC ID number of contributing federal political committee. C		
Name of Employer (for Individual) NONE		Occupation (for Individual) RETIRED
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 700.00

Date of Receipt
MM / DD / YYYY
10 / 27 / 2016
Transaction ID : SA11A.452785

Amount of Each Receipt this Period
50.00

Memo Item CONTRIBUTION

B. RATHS, ELEANOR, L., ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 1144 GRANNY WHITE COURT

City NASHVILLE	State TN	Zip Code 37204-4115
FEC ID number of contributing federal political committee. C		
Name of Employer (for Individual) NONE		Occupation (for Individual) RETIRED
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 700.00

Date of Receipt
MM / DD / YYYY
11 / 04 / 2016
Transaction ID : SA11A.472881

Amount of Each Receipt this Period
50.00

Memo Item CONTRIBUTION

C. RAUB, DAVID, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 125 S. WILKE ROAD
200E

City ARLINGTON HEIGHTS	State IL	Zip Code 60005-1522
FEC ID number of contributing federal political committee. C		
Name of Employer (for Individual) OUTLOOK CAPITAL MANAGEMENT, LLC		Occupation (for Individual) INVESTMENT ADVISOR
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		Aggregate Year-to-Date ▼ 250.00

Date of Receipt
MM / DD / YYYY
10 / 20 / 2016
Transaction ID : SA11A.444899

Amount of Each Receipt this Period
50.00

Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	150.00
TOTAL This Period (last page this line number only).....▶	

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3001 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. RAUH, GLENN, E., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 841 WOODMONT DRIVE
 City MARIETTA State GA Zip Code 30062-3810
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 20 / 2016
Transaction ID : SA11A.433459
 Amount of Each Receipt this Period
 50.00
 Memo Item
 CONTRIBUTION

B. RAUH, GLENN, E., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 841 WOODMONT DRIVE
 City MARIETTA State GA Zip Code 30062-3810
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 08 / 2016
Transaction ID : SA11A.467982
 Amount of Each Receipt this Period
 50.00
 Memo Item
 CONTRIBUTION

C. RAUS, JOHN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 7254 JAMES COURT
 City DENVER State NC Zip Code 28037-7842
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 275.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 04 / 2016
Transaction ID : SA11A.472250
 Amount of Each Receipt this Period
 50.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	150.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3002 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
Team Ryan

A. RAUS, JOHN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 7254 JAMES COURT
 City DENVER State NC Zip Code 28037-7842
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 275.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 07 / 2016
Transaction ID : SA11A.475894
 Amount of Each Receipt this Period
 25.00
 Memo Item
 CONTRIBUTION

B. RAWLINGS, YVONNE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4202 E BROADWAY RD #132
 City MESA State AZ Zip Code 85206-1067
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 325.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 25 / 2016
Transaction ID : SA11A.448258
 Amount of Each Receipt this Period
 50.00
 Memo Item
 CONTRIBUTION

C. RAWLINGS, YVONNE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4202 E BROADWAY RD #132
 City MESA State AZ Zip Code 85206-1067
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 325.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 25 / 2016
Transaction ID : SA11A.448260
 Amount of Each Receipt this Period
 50.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	125.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3003 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. RAWLINGS, YVONNE, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 4202 E BROADWAY RD #132

City MESA	State AZ	Zip Code 85206-1067
--------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
325.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		25		2016

Transaction ID : SA11A.448283

Amount of Each Receipt this Period
50.00

Memo Item
CONTRIBUTION

B. RAY, JOHN, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 223 HIDDEN HARBOUR DR

City MT JULIET	State TN	Zip Code 37122-6910
-------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) JOHN RAY	Occupation (for Individual) INSURANCE AGENT
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
800.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		28		2016

Transaction ID : SA11A.455564

Amount of Each Receipt this Period
500.00

Memo Item
CONTRIBUTION

C. RAY, JOHN, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 223 HIDDEN HARBOUR DR

City MT JULIET	State TN	Zip Code 37122-6910
-------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) JOHN RAY	Occupation (for Individual) INSURANCE AGENT
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
800.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11		07		2016

Transaction ID : SA11A.476301

Amount of Each Receipt this Period
100.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	650.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3004 OF 4311
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. RAY, ROBERT, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 50 WEEPINGWOOD

City IRVINE	State CA	Zip Code 92614-5460
----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
300.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	02	/	2016

Transaction ID : SA11A.469361

Amount of Each Receipt this Period
100.00

Memo Item
CONTRIBUTION

B. RAYMOND, LAWRENCE, W., DR.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1613 BARDSTOWN ROAD

City CHARLOTTE	State NC	Zip Code 28226-0914
-------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) CAROLINA HEALTHCARE SYSTEM	Occupation (for Individual) PHYSICIAN
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
290.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	25	/	2016

Transaction ID : SA11A.447287

Amount of Each Receipt this Period
129.00

Memo Item
CONTRIBUTION

C. REAGAN, RICHARD, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 155 CRESCENT DRIVE

City PUNTA GORDA	State FL	Zip Code 33950-5112
---------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
947.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	21	/	2016

Transaction ID : SA11A.444119

Amount of Each Receipt this Period
100.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	329.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3005 OF 4311
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
REAGAN, RICHARD, , ,

Mailing Address **155 CRESCENT DRIVE**

City PUNTA GORDA	State FL	Zip Code 33950-5112
----------------------------	--------------------	-------------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
--	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **947.00**

Date of Receipt
10 / 23 / 2016

Transaction ID : SA11A.446289

Amount of Each Receipt this Period
25.00

Memo Item CONTRIBUTION

B. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
REAGAN, RICHARD, , ,

Mailing Address **155 CRESCENT DRIVE**

City PUNTA GORDA	State FL	Zip Code 33950-5112
----------------------------	--------------------	-------------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
--	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **947.00**

Date of Receipt
10 / 25 / 2016

Transaction ID : SA11A.447777

Amount of Each Receipt this Period
100.00

Memo Item CONTRIBUTION

C. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
REAGAN, RICHARD, , ,

Mailing Address **155 CRESCENT DRIVE**

City PUNTA GORDA	State FL	Zip Code 33950-5112
----------------------------	--------------------	-------------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
--	---

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼ **947.00**

Date of Receipt
10 / 25 / 2016

Transaction ID : SA11A.447788

Amount of Each Receipt this Period
100.00

Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	225.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3006 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. REAGAN, RICHARD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 155 CRESCENT DRIVE
 City PUNTA GORDA State FL Zip Code 33950-5112
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 947.00

Date of Receipt 10 / 23 / 2016
Transaction ID : SA11A.449582
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

B. REAGAN, RICHARD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 155 CRESCENT DRIVE
 City PUNTA GORDA State FL Zip Code 33950-5112
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 947.00

Date of Receipt 10 / 28 / 2016
Transaction ID : SA11A.455389
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

C. REAGAN, RICHARD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 155 CRESCENT DRIVE
 City PUNTA GORDA State FL Zip Code 33950-5112
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 947.00

Date of Receipt 11 / 01 / 2016
Transaction ID : SA11A.462819
 Amount of Each Receipt this Period 32.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	182.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3007 OF 4311
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. REAGAN, RICHARD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 155 CRESCENT DRIVE
 City PUNTA GORDA State FL Zip Code 33950-5112
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 947.00

Date of Receipt **11 / 06 / 2016**
Transaction ID : SA11A.480908
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

B. REBHOLZ SR., EDWARD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1900 SOUTH OCEAN DR APT 501
 City FORT LAUDERDALE State FL Zip Code 33316-3723
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 750.00

Date of Receipt **10 / 29 / 2016**
Transaction ID : SA11A.461040
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

C. REBHOLZ SR., EDWARD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1900 SOUTH OCEAN DR APT 501
 City FORT LAUDERDALE State FL Zip Code 33316-3723
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 750.00

Date of Receipt **11 / 04 / 2016**
Transaction ID : SA11A.471041
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	250.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3008 OF 4311
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. RECH, LEANA, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 2832 W. WILDWIND CIR
City THE WOODLANDS State TX Zip Code 77380-1344
FEC ID number of contributing federal political committee. **C**
Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 400.00

Date of Receipt 10 / 26 / 2016
Transaction ID : SA11A.450799
Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

B. REDD, DOROTHY, F., ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 1884 E 2825 N
City LAYTON State UT Zip Code 84040-3219
FEC ID number of contributing federal political committee. **C**
Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 350.00

Date of Receipt 10 / 31 / 2016
Transaction ID : SA11A.459116
Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

C. REDD, DOROTHY, F., ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 1884 E 2825 N
City LAYTON State UT Zip Code 84040-3219
FEC ID number of contributing federal political committee. **C**
Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 350.00

Date of Receipt 11 / 04 / 2016
Transaction ID : SA11A.471139
Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 200.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 3009 OF 4311
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. REDDY, SANATH, K., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1081 GREAT MEADOW DRIEV
 City ALLEN State TX Zip Code 75013-5678
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 205.00

Date of Receipt **11 / 02 / 2016**
Transaction ID : SA11A.469401
 Amount of Each Receipt this Period 30.00
 Memo Item CONTRIBUTION

B. REDDY, SANATH, K., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1081 GREAT MEADOW DRIEV
 City ALLEN State TX Zip Code 75013-5678
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 205.00

Date of Receipt **11 / 04 / 2016**
Transaction ID : SA11A.473807
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

C. REDFERN, KEN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 6203 SKAHAN LANE
 City AUSTIN State TX Zip Code 78739-1687
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) DANIELS-HEAD MANAGEMENT CORP. Occupation (for Individual) PRESIDENT
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt **10 / 20 / 2016**
Transaction ID : SA11A.442461
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶ 155.00
TOTAL This Period (last page this line number only).....▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3010 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. REDFERN, KEN, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 6203 SKAHAN LANE

City AUSTIN	State TX	Zip Code 78739-1687
----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) DANIELS-HEAD MANAGEMENT CORP.	Occupation (for Individual) PRESIDENT
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	04	/	2016

Transaction ID : SA11A.473469

Amount of Each Receipt this Period
100.00

Memo Item
CONTRIBUTION

B. REECE, LAWRENCE, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 1720 BUCKTHORN CT

City MINDEN	State NV	Zip Code 89423-4127
----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) RFI ENTERPRISES	Occupation (for Individual) CONSULTANT
--	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1200.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	24	/	2016

Transaction ID : SA11A.446141

Amount of Each Receipt this Period
500.00

Memo Item
CONTRIBUTION

C. REECE, LAWRENCE, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 1720 BUCKTHORN CT

City MINDEN	State NV	Zip Code 89423-4127
----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) RFI ENTERPRISES	Occupation (for Individual) CONSULTANT
--	---

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
1200.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	04	/	2016

Transaction ID : SA11A.471226

Amount of Each Receipt this Period
500.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	1100.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3011 OF 4311
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. REED, CAROLYN, J., MRS.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1084 CORMAR DRIVE

City LAKE ZURICH	State IL	Zip Code 60047-1457
---------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) RUSH V MEDERAL	Occupation (for Individual) DIRECOTR
---	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		24		2016

Transaction ID : SA11A.443706

Amount of Each Receipt this Period
250.00

Memo Item
CONTRIBUTION

B. REED, DONNA, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 212 MAPLELEAF ST

City DEARBORN	State MO	Zip Code 64439-9085
------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		27		2016

Transaction ID : SA11A.457105

Amount of Each Receipt this Period
250.00

Memo Item
CONTRIBUTION

C. REED, KIM, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 612 POMONA DR

City BRENTWOOD	State CA	Zip Code 94513-6947
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
260.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		26		2016

Transaction ID : SA11A.451394

Amount of Each Receipt this Period
30.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	530.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3012 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. REED, KIM, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 612 POMONA DR
 City BRENTWOOD State CA Zip Code 94513-6947
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 260.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 03 / 2016
Transaction ID : SA11A.468573
 Amount of Each Receipt this Period 30.00
 Memo Item CONTRIBUTION

B. REED, KIM, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 612 POMONA DR
 City BRENTWOOD State CA Zip Code 94513-6947
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 260.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 04 / 2016
Transaction ID : SA11A.473712
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

C. REED, KIM, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 612 POMONA DR
 City BRENTWOOD State CA Zip Code 94513-6947
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 260.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 07 / 2016
Transaction ID : SA11A.476686
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶ 105.00
TOTAL This Period (last page this line number only).....▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3013 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. REED, KIM, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 612 POMONA DR
 City BRENTWOOD State CA Zip Code 94513-6947
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 260.00

Date of Receipt
 11 / 07 / 2016
Transaction ID : SA11A.476696
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

B. REED, KIM, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 612 POMONA DR
 City BRENTWOOD State CA Zip Code 94513-6947
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 260.00

Date of Receipt
 11 / 07 / 2016
Transaction ID : SA11A.476697
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

C. REED, RICHARD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 123 JOHNS NECK RAOD.
 City SHIRLEY State NY Zip Code 11967-4100
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt
 10 / 30 / 2016
Transaction ID : SA11A.464911
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶ 150.00
TOTAL This Period (last page this line number only).....▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3014 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. REED, RICHARD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 123 JOHNS NECK RAOD.
 City SHIRLEY State NY Zip Code 11967-4100
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 04 / 2016
Transaction ID : SA11A.474166
 Amount of Each Receipt this Period
 50.00
 Memo Item
 CONTRIBUTION

B. REED, ROBERT, A., MR., MD
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address P. O. BOX 167; 679 BASS LAKE DRIVE
 City BLOWING ROCK State NC Zip Code 28605-0167
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 25 / 2016
Transaction ID : SA11A.451833
 Amount of Each Receipt this Period
 50.00
 Memo Item
 CONTRIBUTION

C. REED, ROBERT, A., MR., MD
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address P. O. BOX 167; 679 BASS LAKE DRIVE
 City BLOWING ROCK State NC Zip Code 28605-0167
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 25 / 2016
Transaction ID : SA11A.451852
 Amount of Each Receipt this Period
 50.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	150.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3015 OF 4311
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. REED, ROBERT, A., MR., MD
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address P. O. BOX 167; 679 BASS LAKE DRIVE

City BLOWING ROCK	State NC	Zip Code 28605-0167
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
400.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	25	/	2016

Transaction ID : SA11A.451853

Amount of Each Receipt this Period
50.00

Memo Item
CONTRIBUTION

B. REED, ROBERT, A., MR., MD
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address P. O. BOX 167; 679 BASS LAKE DRIVE

City BLOWING ROCK	State NC	Zip Code 28605-0167
----------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
400.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	02	/	2016

Transaction ID : SA11A.470016

Amount of Each Receipt this Period
50.00

Memo Item
CONTRIBUTION

C. REED, ROBERT, A., MR., MD
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address P. O. BOX 167; 679 BASS LAKE DRIVE

City BLOWING ROCK	State NC	Zip Code 28605-0167
----------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
400.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	02	/	2016

Transaction ID : SA11A.470019

Amount of Each Receipt this Period
50.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	150.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3016 OF 4311
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. REED, ROBERT, A., MR., MD
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address P. O. BOX 167; 679 BASS LAKE DRIVE

City BLOWING ROCK	State NC	Zip Code 28605-0167
----------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
400.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	02	/	2016

Transaction ID : SA11A.470030

Amount of Each Receipt this Period
50.00

Memo Item
CONTRIBUTION

B. REED, ROBERT, A., MR., MD
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address P. O. BOX 167; 679 BASS LAKE DRIVE

City BLOWING ROCK	State NC	Zip Code 28605-0167
----------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
400.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	02	/	2016

Transaction ID : SA11A.470031

Amount of Each Receipt this Period
50.00

Memo Item
CONTRIBUTION

C. REED, RON, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 2138 BUENA VISTA DR

City MOAB	State UT	Zip Code 84532-3491
--------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NATIONAL PARK SERVICE	Occupation (for Individual) IT SPECIALIST
--	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
350.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	24	/	2016

Transaction ID : SA11A.449424

Amount of Each Receipt this Period
100.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	200.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3017 OF 4311
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. REED, RON, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 2138 BUENA VISTA DR

City MOAB	State UT	Zip Code 84532-3491
--------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NATIONAL PARK SERVICE	Occupation (for Individual) IT SPECIALIST
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
350.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	30	/	2016

Transaction ID : SA11A.460214

Amount of Each Receipt this Period
100.00

Memo Item
CONTRIBUTION

B. REED, TIMOTHY, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 3182 BRADBURY RD

City ROSSMOOR	State CA	Zip Code 90720-4507
------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
225.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	02	/	2016

Transaction ID : SA11A.465954

Amount of Each Receipt this Period
25.00

Memo Item
CONTRIBUTION

C. REED, TIMOTHY, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 3182 BRADBURY RD

City ROSSMOOR	State CA	Zip Code 90720-4507
------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
225.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	07	/	2016

Transaction ID : SA11A.475021

Amount of Each Receipt this Period
25.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	150.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3018 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. REEDER, MARTINIQUE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 15690 SE 227TH STREET
 City KENT State WA Zip Code 98042-3723
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) MARTINIQUE REEDER REALTOR Occupation (for Individual) REALTOR
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 450.00

Date of Receipt 11 / 03 / 2016
Transaction ID : SA11A.469040
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

B. REEDER, SAMMY, JO, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 7515 GIBRALTAR ST.
 City CARLSBAD State CA Zip Code 92009-7459
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) BUSINESS OWNER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 207.00

Date of Receipt 11 / 01 / 2016
Transaction ID : SA11A.462701
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

C. REEG, MICHAEL, , MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2330 N POWERS BLVD
 City COLO SPGS State CO Zip Code 80915-1505
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) BRICKLAYER
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 710.00

Date of Receipt 11 / 03 / 2016
Transaction ID : SA11A.468543
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶ 175.00
TOTAL This Period (last page this line number only).....▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 3019 OF 4311
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
Team Ryan

A. REEG, MICHAEL, , MR.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 2330 N POWERS BLVD

City COLO SPGS	State CO	Zip Code 80915-1505
-------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) SELF EMPLOYED	Occupation (for Individual) BRICKLAYER
--	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
710.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	04	/	2016

Transaction ID : SA11A.479631

Amount of Each Receipt this Period
250.00

Memo Item
CONTRIBUTION

B. REEG, MICHAEL, , MR.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 2330 N POWERS BLVD

City COLO SPGS	State CO	Zip Code 80915-1505
-------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) SELF EMPLOYED	Occupation (for Individual) BRICKLAYER
--	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
710.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	04	/	2016

Transaction ID : SA11A.479632

Amount of Each Receipt this Period
250.00

Memo Item
CONTRIBUTION

C. REESE, F, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 6927 SPANKY BRANCH CT.

City DALLAS	State TX	Zip Code 75248-1450
----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) SELF EMPLOYED	Occupation (for Individual) F.CURTIS REESE MD
--	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
450.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	02	/	2016

Transaction ID : SA11A.466993

Amount of Each Receipt this Period
250.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	750.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3020 OF 4311
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
Team Ryan

A. REESE, JOHN, R., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO BOX 703
 City LOCUST VALLEY State NY Zip Code 11560-0703
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 20 / 2016
Transaction ID : SA11A.433438
 Amount of Each Receipt this Period
 100.00
 Memo Item CONTRIBUTION

B. REESE, JOHN, R., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO BOX 703
 City LOCUST VALLEY State NY Zip Code 11560-0703
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 03 / 2016
Transaction ID : SA11A.465368
 Amount of Each Receipt this Period
 200.00
 Memo Item CONTRIBUTION

C. REESE, JUDITH, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 12014 IRVINE AVE NW
 City BEMIDJI State MN Zip Code 56601-7146
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 350.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 02 / 2016
Transaction ID : SA11A.465983
 Amount of Each Receipt this Period
 100.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	400.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3021 OF 4311
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. REEVES, BETTY, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 12167 TURTLE BEACH RD

City NORTH PALM BEACH	State FL	Zip Code 33408-2940
--------------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) INFORMATION REQUESTED PER BEST EFFORTS	Occupation (for Individual) INFORMATION REQUESTED PER BE
---	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
25000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		20		2016

Transaction ID : SA11A.433370

Amount of Each Receipt this Period
25000.00

Memo Item
CONTRIBUTION

B. REEVES, FRANK, H., ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 2016 NEW MARKET AVENUE

City LEBANON	State TN	Zip Code 37087-4258
-----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) SELF EMPLOYED	Occupation (for Individual) ATTORNEY
--	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
700.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		25		2016

Transaction ID : SA11A.447258

Amount of Each Receipt this Period
200.00

Memo Item
CONTRIBUTION

C. REEVES, JESS, L., REV.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1210 OXFORD VILLAGE CIRCLE
185

City COLUMBIA	State TN	Zip Code 38401-4784
------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
410.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		25		2016

Transaction ID : SA11A.448941

Amount of Each Receipt this Period
50.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	25250.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3022 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. REEVES, JESS, L., REV.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1210 OXFORD VILLAGE CIRCLE
 185
 City COLUMBIA State TN Zip Code 38401-4784
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 410.00

Date of Receipt 10 / 31 / 2016
Transaction ID : SA11A.459234
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

B. REEVES, JESS, L., REV.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1210 OXFORD VILLAGE CIRCLE
 185
 City COLUMBIA State TN Zip Code 38401-4784
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 410.00

Date of Receipt 11 / 05 / 2016
Transaction ID : SA11A.479127
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

C. REEVES, SALLY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5801 ST. CHARLES AVENUE
 City NEW ORLEANS State LA Zip Code 70115-5053
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) CLERK OF CIVIL DISTRICT COURT Occupation (for Individual) ARCHIVIST
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 10 / 23 / 2016
Transaction ID : SA11A.446384
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	325.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3023 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. REEVES, SAM, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 12167 TURTLE BEACH RD
 City NORTH PALM BEACH State FL Zip Code 33408-2940
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) PINNACLE TRADING Occupation (for Individual) TRADER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 50000.00

Date of Receipt 10 / 20 / 2016
Transaction ID : SA11A.433371
 Amount of Each Receipt this Period 25000.00
 Memo Item
 CONTRIBUTION

B. REEVES, SIMS, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1302 E. BRISTOW DR.
 City TUPELO State MS Zip Code 38801-2416
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 360.00

Date of Receipt 10 / 25 / 2016
Transaction ID : SA11A.448335
 Amount of Each Receipt this Period 30.00
 Memo Item
 CONTRIBUTION

C. REEVES, SIMS, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1302 E. BRISTOW DR.
 City TUPELO State MS Zip Code 38801-2416
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 360.00

Date of Receipt 11 / 02 / 2016
Transaction ID : SA11A.466550
 Amount of Each Receipt this Period 25.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	25055.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3024 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. REEVES, SIMS, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1302 E. BRISTOW DR.
 City TUPELO State MS Zip Code 38801-2416
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 360.00

Date of Receipt
 11 / 02 / 2016
Transaction ID : SA11A.466556
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

B. REEVES, SIMS, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1302 E. BRISTOW DR.
 City TUPELO State MS Zip Code 38801-2416
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 360.00

Date of Receipt
 11 / 03 / 2016
Transaction ID : SA11A.468498
 Amount of Each Receipt this Period 10.00
 Memo Item CONTRIBUTION

C. REEVES, SIMS, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1302 E. BRISTOW DR.
 City TUPELO State MS Zip Code 38801-2416
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 360.00

Date of Receipt
 11 / 06 / 2016
Transaction ID : SA11A.476854
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶ 60.00
TOTAL This Period (last page this line number only).....▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3025 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
Team Ryan

A. REGAN, VICKI, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3 LEGION ROAD
 City WESTON State MA Zip Code 02493-2119
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 800.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 28 / 2016
Transaction ID : SA11A.455955
 Amount of Each Receipt this Period
 200.00
 Memo Item
 CONTRIBUTION

B. REGAN, VICKI, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3 LEGION ROAD
 City WESTON State MA Zip Code 02493-2119
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 800.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 04 / 2016
Transaction ID : SA11A.472641
 Amount of Each Receipt this Period
 200.00
 Memo Item
 CONTRIBUTION

C. REGAN, VICKI, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3 LEGION ROAD
 City WESTON State MA Zip Code 02493-2119
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 800.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 07 / 2016
Transaction ID : SA11A.480187
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	500.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3026 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name A. REICHERT, DENNIS, , ,		Date of Receipt M M M / D D D / Y Y Y Y Y Y 10 / 24 / 2016
Mailing Address 11295 BRIARSTONE DR.		Transaction ID : SA11A.446090
City ST. LOUIS	State MO	Zip Code 63126-3442
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 25.00
Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED	<input type="checkbox"/> Memo Item CONTRIBUTION
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 215.00	

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name B. REICHERT, WALTER, P., , ,		Date of Receipt M M M / D D D / Y Y Y Y Y Y 10 / 21 / 2016
Mailing Address 3907 CHATSWORTH GREENE		Transaction ID : SA11A.443662
City SARASOTA	State FL	Zip Code 34235-6852
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 200.00
Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED	<input type="checkbox"/> Memo Item CONTRIBUTION
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00	

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name C. REID, DOUGLAS, M., MR.,		Date of Receipt M M M / D D D / Y Y Y Y Y Y 10 / 25 / 2016
Mailing Address 258 MULBERRY HILL ROAD		Transaction ID : SA11A.447359
City FAIRFIELD	State CT	Zip Code 06824-1622
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 100.00
Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED	<input type="checkbox"/> Memo Item CONTRIBUTION
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Aggregate Year-to-Date ▼ 225.00	

SUBTOTAL of Receipts This Page (optional).....▶	325.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3027 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. REID, ELIZABETH, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2061 EVERGREEN STREET
 City SAN DIEGO State CA Zip Code 92106-1828
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) INFORMATION REQUESTED PER BEST EFFORTS Occupation (for Individual) INFORMATION REQUESTED PER BE
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 550.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 11 / 02 / 2016
Transaction ID : SA11A.465124
 Amount of Each Receipt this Period
 500.00
 Memo Item
 CONTRIBUTION

B. REILLY, SUSAN, W., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 9225 NE 13TH STREET
 City CLYDE HILL State WA Zip Code 98004-3449
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 425.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 10 / 31 / 2016
Transaction ID : SA11A.463845
 Amount of Each Receipt this Period
 50.00
 Memo Item
 CONTRIBUTION

C. REILLY, SUSAN, W., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 9225 NE 13TH STREET
 City CLYDE HILL State WA Zip Code 98004-3449
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 425.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 10 / 31 / 2016
Transaction ID : SA11A.463864
 Amount of Each Receipt this Period
 50.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	600.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3028 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. REINER, MICHAEL, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1316 E CALVADA BLVD
 City PAHRUMP State NV Zip Code 89048-5692
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) HOPE MEDICAL LLC Occupation (for Individual) PHYSICIAN
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 925.00

Date of Receipt 11 / 04 / 2016
Transaction ID : SA11A.472258
 Amount of Each Receipt this Period 135.00
 Memo Item CONTRIBUTION

B. REINER, MICHAEL, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1316 E CALVADA BLVD
 City PAHRUMP State NV Zip Code 89048-5692
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) HOPE MEDICAL LLC Occupation (for Individual) PHYSICIAN
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 925.00

Date of Receipt 11 / 06 / 2016
Transaction ID : SA11A.478167
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

C. REINER, MICHAEL, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1316 E CALVADA BLVD
 City PAHRUMP State NV Zip Code 89048-5692
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) HOPE MEDICAL LLC Occupation (for Individual) PHYSICIAN
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 925.00

Date of Receipt 11 / 06 / 2016
Transaction ID : SA11A.478168
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	235.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3029 OF 4311
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. REINHARDT, JAMES, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 5263 HARMONY CH RD

City EDGEMOOR	State SC	Zip Code 29712-7783
------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
268.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		26		2016

Transaction ID : SA11A.449902

Amount of Each Receipt this Period
30.00

Memo Item CONTRIBUTION

B. REINHARDT, JAMES, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 5263 HARMONY CH RD

City EDGEMOOR	State SC	Zip Code 29712-7783
------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
268.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		28		2016

Transaction ID : SA11A.45419

Amount of Each Receipt this Period
50.00

Memo Item CONTRIBUTION

C. REIS, THOMAS, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 2232 W.231ST

City TORRANCE	State CA	Zip Code 90501-5211
------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
275.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		28		2016

Transaction ID : SA11A.461430

Amount of Each Receipt this Period
25.00

Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	105.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3030 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. REIS, THOMAS, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2232 W.231ST
 City TORRANCE State CA Zip Code 90501-5211
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 275.00

Date of Receipt
 11 / 03 / 2016
Transaction ID : SA11A.469248
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

B. REIS, THOMAS, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2232 W.231ST
 City TORRANCE State CA Zip Code 90501-5211
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 275.00

Date of Receipt
 11 / 03 / 2016
Transaction ID : SA11A.469251
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

C. REIS, THOMAS, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2232 W.231ST
 City TORRANCE State CA Zip Code 90501-5211
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 275.00

Date of Receipt
 11 / 03 / 2016
Transaction ID : SA11A.469252
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶ 150.00
TOTAL This Period (last page this line number only).....▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3031 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. REIS, THOMAS, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2232 W.231ST
 City TORRANCE State CA Zip Code 90501-5211
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 275.00

Date of Receipt
 11 / 05 / 2016
Transaction ID : SA11A.479295
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

B. REIS, THOMAS, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2232 W.231ST
 City TORRANCE State CA Zip Code 90501-5211
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 275.00

Date of Receipt
 11 / 08 / 2016
Transaction ID : SA11A.479820
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

C. REISCHMAN, ROSALYN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2102 COLLEGE STREET
 City JACKSONVILLE State FL Zip Code 32204-3706
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt
 10 / 20 / 2016
Transaction ID : SA11A.442167
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	300.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3032 OF 4311
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. REISER, CHARLES, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 4 JOHNSTON AVE

City NORTHPORT	State NY	Zip Code 11768-2908
-------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
225.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	24	/	2016

Transaction ID : SA11A.445768

Amount of Each Receipt this Period
25.00

Memo Item
CONTRIBUTION

B. REISER, FRANCES, A., MS.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 177 S 165 W

City OREM	State UT	Zip Code 84058-3044
--------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
300.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	01	/	2016

Transaction ID : SA11A.461611

Amount of Each Receipt this Period
200.00

Memo Item
CONTRIBUTION

C. REITINGER, DEBORAH, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 500 ELMINGTON AVE
402

City NASHVILLE	State TN	Zip Code 37205-2513
-------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
600.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	29	/	2016

Transaction ID : SA11A.460598

Amount of Each Receipt this Period
100.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	325.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3033 OF 4311
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. REITINGER, DEBORAH, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 500 ELMINGTON AVE
 402
 City NASHVILLE State TN Zip Code 37205-2513
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 600.00

Date of Receipt 11 / 01 / 2016
Transaction ID : SA11A.462538
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

B. RENAUD, GILES, A., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 202 VISTA POINTE COURT
 City SAINT AUGUSTINE State FL Zip Code 32080-9165
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt 11 / 28 / 2016
Transaction ID : SA11A.481113
 Amount of Each Receipt this Period 200.00
 Memo Item CONTRIBUTION

C. RENNICK, ELIZABETH, A., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 136 MARYLAND AVE.
 City SOMERSET State MA Zip Code 02726-3783
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 540.00

Date of Receipt 10 / 26 / 2016
Transaction ID : SA11A.449968
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶ 325.00
TOTAL This Period (last page this line number only).....▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3034 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. RENNICK, ELIZABETH, A., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 136 MARYLAND AVE.
 City SOMERSET State MA Zip Code 02726-3783
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 540.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 26 / 2016
Transaction ID : SA11A.449980
 Amount of Each Receipt this Period
 25.00
 Memo Item
 CONTRIBUTION

B. RENNICK, ELIZABETH, A., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 136 MARYLAND AVE.
 City SOMERSET State MA Zip Code 02726-3783
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 540.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 28 / 2016
Transaction ID : SA11A.455638
 Amount of Each Receipt this Period
 30.00
 Memo Item
 CONTRIBUTION

C. RENNICK, ELIZABETH, A., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 136 MARYLAND AVE.
 City SOMERSET State MA Zip Code 02726-3783
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 540.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 31 / 2016
Transaction ID : SA11A.458623
 Amount of Each Receipt this Period
 50.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	105.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3035 OF 4311
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. RENSHAW, HAL, L., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4229 EDGEWOOD CT
 City OWENSBORO State KY Zip Code 42303-7609
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 265.00

Date of Receipt 10 / 26 / 2016
Transaction ID : SA11A.450040
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

B. REPP, MIKE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1413 RIVER OAKS DRIVE
 City MODESTO State CA Zip Code 95356-9685
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) BELL-CARTER PACKAGING Occupation (for Individual) MANAGEMENT
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 550.00

Date of Receipt 10 / 24 / 2016
Transaction ID : SA11A.449382
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

C. REPP, MIKE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1413 RIVER OAKS DRIVE
 City MODESTO State CA Zip Code 95356-9685
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) BELL-CARTER PACKAGING Occupation (for Individual) MANAGEMENT
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 550.00

Date of Receipt 10 / 24 / 2016
Transaction ID : SA11A.449386
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 250.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3036 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. REPP, MIKE, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1413 RIVER OAKS DRIVE

City MODESTO	State CA	Zip Code 95356-9685
-----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) BELL-CARTER PACKAGING	Occupation (for Individual) MANAGEMENT
--	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
550.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		31		2016

Transaction ID : SA11A.464028

Amount of Each Receipt this Period
100.00

Memo Item CONTRIBUTION

B. REPP, MIKE, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1413 RIVER OAKS DRIVE

City MODESTO	State CA	Zip Code 95356-9685
-----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) BELL-CARTER PACKAGING	Occupation (for Individual) MANAGEMENT
--	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
550.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11		07		2016

Transaction ID : SA11A.476332

Amount of Each Receipt this Period
50.00

Memo Item CONTRIBUTION

C. REPP, MIKE, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1413 RIVER OAKS DRIVE

City MODESTO	State CA	Zip Code 95356-9685
-----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) BELL-CARTER PACKAGING	Occupation (for Individual) MANAGEMENT
--	---

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
550.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11		07		2016

Transaction ID : SA11A.479873

Amount of Each Receipt this Period
50.00

Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	200.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3037 OF 4311
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. REYNOLDS, ALBERT, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1005 BURGA LOOP

City CHULA VISTA	State CA	Zip Code 91910-8071
---------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
800.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	01	/	2016

Transaction ID : SA11A.462201

Amount of Each Receipt this Period
100.00

Memo Item
CONTRIBUTION

B. REYNOLDS, ALBERT, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1005 BURGA LOOP

City CHULA VISTA	State CA	Zip Code 91910-8071
---------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
800.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	04	/	2016

Transaction ID : SA11A.472470

Amount of Each Receipt this Period
100.00

Memo Item
CONTRIBUTION

C. REYNOLDS, ARTHUR, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 6013 RIVER DR

City MASON NECK	State VA	Zip Code 22079-4125
--------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
750.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	25	/	2016

Transaction ID : SA11A.451859

Amount of Each Receipt this Period
250.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	450.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3038 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. REYNOLDS, CLIFTON, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address PO BOX 97

City LAGRANGE	State IN	Zip Code 46761-0097
FEC ID number of contributing federal political committee. C		
Name of Employer (for Individual) MASTERCRAFT INC		Occupation (for Individual) MANAGER
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 450.00

Date of Receipt
11 / 07 / 2016
Transaction ID : SA11A.480189

Amount of Each Receipt this Period
100.00

Memo Item
CONTRIBUTION

B. REYNOLDS, CLIFTON, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address PO BOX 97

City LAGRANGE	State IN	Zip Code 46761-0097
FEC ID number of contributing federal political committee. C		
Name of Employer (for Individual) MASTERCRAFT INC		Occupation (for Individual) MANAGER
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 450.00

Date of Receipt
11 / 07 / 2016
Transaction ID : SA11A.480192

Amount of Each Receipt this Period
100.00

Memo Item
CONTRIBUTION

C. REYNOLDS, DON, F., ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address PO BOX 2097

City BIG SPRING	State TX	Zip Code 79721-2097
FEC ID number of contributing federal political committee. C		
Name of Employer (for Individual) LEE, REYNOLDS WELCH CO FC		Occupation (for Individual) CPA
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		Aggregate Year-to-Date ▼ 1600.00

Date of Receipt
10 / 20 / 2016
Transaction ID : SA11A.433407

Amount of Each Receipt this Period
400.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	600.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3039 OF 4311
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
Team Ryan

A. REYNOLDS, DON, F., ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address **PO BOX 2097**

City **BIG SPRING** State **TX** Zip Code **79721-2097**

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) **LEE, REYNOLDS WELCH CO FC** Occupation (for Individual) **CPA**

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **1600.00**

Date of Receipt **10 / 25 / 2016**

Transaction ID : SA11A.447267

Amount of Each Receipt this Period **1000.00**

Memo Item CONTRIBUTION

B. REYNOLDS, KEVIN, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address **21 HOLLY GLEN WAY**

City **EATONTOWN** State **NJ** Zip Code **07724-2309**

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) **NONE** Occupation (for Individual) **RETIRED**

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **250.00**

Date of Receipt **10 / 27 / 2016**

Transaction ID : SA11A.456799

Amount of Each Receipt this Period **250.00**

Memo Item CONTRIBUTION

C. REYNOLDS, ROBERT, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address **5768 MAJESTIC OAK LN**

City **PARKER** State **CO** Zip Code **80134-5847**

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) **NONE** Occupation (for Individual) **RETIRED**

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼ **250.00**

Date of Receipt **10 / 20 / 2016**

Transaction ID : SA11A.444723

Amount of Each Receipt this Period **50.00**

Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... **1300.00**

TOTAL This Period (last page this line number only).....

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3040 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
Team Ryan

A. REYNOLDS, ROBERT, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5768 MAJESTIC OAK LN
 City PARKER State CO Zip Code 80134-5847
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 07 / 2016
Transaction ID : SA11A.475184
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION

B. REYNOLDS, ROBERT, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5768 MAJESTIC OAK LN
 City PARKER State CO Zip Code 80134-5847
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 07 / 2016
Transaction ID : SA11A.475195
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION

C. REYNOLDS, ROLAND, L., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 745 CENTAURI
 City GRAND JUNCTION State CO Zip Code 81506-1805
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 455.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 04 / 2016
Transaction ID : SA11A.472989
 Amount of Each Receipt this Period
 50.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	250.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3041 OF 4311
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. REYNOLDS, RONALD, L., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 102 SAKONNET TRAIL
 City PINEHURST State NC Zip Code 28374-6802
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 750.00

Date of Receipt 10 / 27 / 2016
Transaction ID : SA11A.452272
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

B. REYNOLDS, SHERRY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 6217 MORI STREET
 City MC LEAN State VA Zip Code 22101-3150
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 350.00

Date of Receipt 10 / 25 / 2016
Transaction ID : SA11A.451566
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

C. RHEIN, PETE, , MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1407 SOUTH HOLMBY AVENUE
 City LOS ANGELES State CA Zip Code 90024-5104
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) REAL ESTATE
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 2500.00

Date of Receipt 10 / 24 / 2016
Transaction ID : SA11A.446073
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 600.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3042 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
Team Ryan

A. RHEIN, PETE, , MR.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 1407 SOUTH HOLMBY AVENUE

City LOS ANGELES	State CA	Zip Code 90024-5104
---------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) SELF EMPLOYED	Occupation (for Individual) REAL ESTATE
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
2500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	28	/	2016

Transaction ID : SA11A.455723

Amount of Each Receipt this Period
250.00

Memo Item
CONTRIBUTION

B. RHINESMITH, BEVERLEY, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 42 SOUTH CHAPMAN ROAD

City DOYLESTOWN	State PA	Zip Code 18901-2305
--------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) SELF EMPLOYED	Occupation (for Individual) SALES & MARKETING
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
300.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	02	/	2016

Transaction ID : SA11A.466892

Amount of Each Receipt this Period
25.00

Memo Item
CONTRIBUTION

C. RHINESMITH, BEVERLEY, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 42 SOUTH CHAPMAN ROAD

City DOYLESTOWN	State PA	Zip Code 18901-2305
--------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) SELF EMPLOYED	Occupation (for Individual) SALES & MARKETING
--	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
300.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	05	/	2016

Transaction ID : SA11A.478656

Amount of Each Receipt this Period
25.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	300.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3043 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name A. RHINES, WALDEN, , ,		Date of Receipt MM / DD / YYYY 11 / 01 / 2016 Transaction ID : SA11A.467277
Mailing Address 01605 SW COMUS ST		Amount of Each Receipt this Period 5000.00
City PORTLAND	State OR	Zip Code 97219-7858
FEC ID number of contributing federal political committee. C		<input type="checkbox"/> Memo Item CONTRIBUTION
Name of Employer (for Individual) MENTOR GRAPHICS CORPORATION	Occupation (for Individual) GRAPHICS	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 5000.00	

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name B. RHODES, MELVIN, , ,		Date of Receipt MM / DD / YYYY 10 / 27 / 2016 Transaction ID : SA11A.452380
Mailing Address 100 THOMPSON DRIVE SE APT 218		Amount of Each Receipt this Period 200.00
City CEDAR RAPIDS	State IA	Zip Code 52403-1738
FEC ID number of contributing federal political committee. C		<input type="checkbox"/> Memo Item CONTRIBUTION
Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 400.00	

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name C. RIBAKOFF, CHARLES, , , II		Date of Receipt MM / DD / YYYY 11 / 01 / 2016 Transaction ID : SA11A.461871
Mailing Address PO BOX 912		Amount of Each Receipt this Period 1000.00
City WORCESTER	State MA	Zip Code 01613-0912
FEC ID number of contributing federal political committee. C		<input type="checkbox"/> Memo Item CONTRIBUTION
Name of Employer (for Individual) AUTOMATIVE MANAGEMENT INC	Occupation (for Individual) EXECUTIVE	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Aggregate Year-to-Date ▼ 1000.00	

SUBTOTAL of Receipts This Page (optional).....▶	6200.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3044 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. RICE, DOUGLAS, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 83 STONEHEDGE LANE SOUTH
 City GUILFORD State CT Zip Code 06437-2205
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) DOUGLAS RICE Occupation (for Individual) OWNER/PRESIDENT
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 10 / 21 / 2016
Transaction ID : SA11A.444586
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

B. RICE, DOUGLAS, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 83 STONEHEDGE LANE SOUTH
 City GUILFORD State CT Zip Code 06437-2205
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) DOUGLAS RICE Occupation (for Individual) OWNER/PRESIDENT
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 10 / 27 / 2016
Transaction ID : SA11A.453588
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

C. RICE, DOUGLAS, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 83 STONEHEDGE LANE SOUTH
 City GUILFORD State CT Zip Code 06437-2205
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) DOUGLAS RICE Occupation (for Individual) OWNER/PRESIDENT
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 11 / 04 / 2016
Transaction ID : SA11A.472443
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶ 100.00
TOTAL This Period (last page this line number only).....▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3045 OF 4311
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. RICE, JAY, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address **875 PLUMAS STREET**

City SUSANVILLE	State CA	Zip Code 96130-4861
---------------------------	--------------------	-------------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) SIERRA ARMY DEPOT	Occupation (for Individual) ACCOUNTANT
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **843.00**

Date of Receipt
10 / 31 / 2016

Transaction ID : SA11A.463213

Amount of Each Receipt this Period
50.00

Memo Item
CONTRIBUTION

B. RICE, JAY, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address **875 PLUMAS STREET**

City SUSANVILLE	State CA	Zip Code 96130-4861
---------------------------	--------------------	-------------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) SIERRA ARMY DEPOT	Occupation (for Individual) ACCOUNTANT
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **843.00**

Date of Receipt
11 / 05 / 2016

Transaction ID : SA11A.478503

Amount of Each Receipt this Period
100.00

Memo Item
CONTRIBUTION

C. RICH, J., , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address **15474 DUOMO VIA**

City LOS ANGELES	State CA	Zip Code 90077-1515
----------------------------	--------------------	-------------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) MCDERMOTT WILL & EMERY LLP	Occupation (for Individual) ATTORNEY
--	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼ **350.00**

Date of Receipt
10 / 31 / 2016

Transaction ID : SA11A.458716

Amount of Each Receipt this Period
25.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	175.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3046 OF 4311
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. RICH, J., , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 15474 DUOMO VIA

City LOS ANGELES	State CA	Zip Code 90077-1515
---------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) MCDERMOTT WILL & EMERY LLP	Occupation (for Individual) ATTORNEY
---	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
350.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		31		2016

Transaction ID : SA11A.458719

Amount of Each Receipt this Period
25.00

Memo Item
CONTRIBUTION

B. RICH, MARTIN, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 435 L AMBIANCE DRIVE
708

City LONGBOAT KEY	State FL	Zip Code 34228-3927
----------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
750.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		20		2016

Transaction ID : SA11A.442130

Amount of Each Receipt this Period
100.00

Memo Item
CONTRIBUTION

C. RICH, MARTIN, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 435 L AMBIANCE DRIVE
708

City LONGBOAT KEY	State FL	Zip Code 34228-3927
----------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
750.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11		05		2016

Transaction ID : SA11A.478862

Amount of Each Receipt this Period
100.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	225.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3047 OF 4311
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. RICH, MARTIN, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 435 L AMBIANCE DRIVE
708

City LONGBOAT KEY State FL Zip Code 34228-3927

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
750.00

Date of Receipt
11 / 05 / 2016
Transaction ID : SA11A.478864

Amount of Each Receipt this Period
100.00

Memo Item CONTRIBUTION

B. RICH, STEPHANIE, L., MRS.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 3 BARKERS POINT RD

City PORT WASHINGTON State NY Zip Code 11050-1107

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
685.00

Date of Receipt
10 / 20 / 2016
Transaction ID : SA11A.442085

Amount of Each Receipt this Period
25.00

Memo Item CONTRIBUTION

C. RICH, STEPHANIE, L., MRS.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 3 BARKERS POINT RD

City PORT WASHINGTON State NY Zip Code 11050-1107

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
685.00

Date of Receipt
11 / 01 / 2016
Transaction ID : SA11A.462704

Amount of Each Receipt this Period
50.00

Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 175.00

TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3048 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. RICH, WILLIS, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 150 ST ANDREWS CT
 City CLAYTON State GA Zip Code 30525-5551
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 325.00

Date of Receipt 10 / 31 / 2016
Transaction ID : SA11A.459004
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

B. RICHARDS, CYNTHIA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1901 HARBOUR CIRCLE
 City CAPE CORAL State FL Zip Code 33914-2521
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 10 / 20 / 2016
Transaction ID : SA11A.442422
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

C. RICHARDS, CYNTHIA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1901 HARBOUR CIRCLE
 City CAPE CORAL State FL Zip Code 33914-2521
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 10 / 23 / 2016
Transaction ID : SA11A.446381
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶ 150.00
TOTAL This Period (last page this line number only).....▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3049 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. RICHARDS, CYNTHIA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1901 HARBOUR CIRCLE
 City CAPE CORAL State FL Zip Code 33914-2521
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 10 / 26 / 2016
Transaction ID : SA11A.451239
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

B. RICHARDS, CYNTHIA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1901 HARBOUR CIRCLE
 City CAPE CORAL State FL Zip Code 33914-2521
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 10 / 26 / 2016
Transaction ID : SA11A.451240
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

C. RICHARDS, CYNTHIA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1901 HARBOUR CIRCLE
 City CAPE CORAL State FL Zip Code 33914-2521
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 11 / 04 / 2016
Transaction ID : SA11A.471809
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	150.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3050 OF 4311
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. RICHARDS, CYNTHIA, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1901 HARBOUR CIRCLE

City CAPE CORAL	State FL	Zip Code 33914-2521
--------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	04	/	2016

Transaction ID : SA11A.473864

Amount of Each Receipt this Period
50.00

Memo Item CONTRIBUTION

B. RICHARDSON, GUY, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 11216 TAMIAMI TRAIL N
146

City NAPLES	State FL	Zip Code 34110-1640
----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) ACCESSPOINTHR	Occupation (for Individual) ADVISOR
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	03	/	2016

Transaction ID : SA11A.469113

Amount of Each Receipt this Period
250.00

Memo Item CONTRIBUTION

C. RICHARD, JAMES, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 3924 COLGATE AVE.

City DALLAS	State TX	Zip Code 75225-5423
----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) LALA U.S.	Occupation (for Individual) SVP SALE AND CCO
--	---

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	21	/	2016

Transaction ID : SA11A.444452

Amount of Each Receipt this Period
250.00

Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	550.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3051 OF 4311
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. RICHARDSON, JUDY, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 2507 NO. BEACHWOOD DR., #3
3

City LOS ANGELES State CA Zip Code 90068-2346

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) JUDY RICHARDSON Occupation (for Individual) PSYCHOTHERAPIST

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 380.00

Date of Receipt 10 / 24 / 2016
Transaction ID : SA11A.449214

Amount of Each Receipt this Period 30.00

Memo Item CONTRIBUTION

B. RICHARDSON, JUDY, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 2507 NO. BEACHWOOD DR., #3
3

City LOS ANGELES State CA Zip Code 90068-2346

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) JUDY RICHARDSON Occupation (for Individual) PSYCHOTHERAPIST

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 380.00

Date of Receipt 11 / 03 / 2016
Transaction ID : SA11A.469346

Amount of Each Receipt this Period 25.00

Memo Item CONTRIBUTION

C. RICHARDSON, MARSHALL, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 369 EDMONDS DRIVE

City GRANT State AL Zip Code 35747-9197

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) TARA MFG.,INC Occupation (for Individual) BUSINESSMAN

Receipt For: Primary General Other (specify)

Aggregate Year-to-Date ▼ 400.00

Date of Receipt 11 / 02 / 2016
Transaction ID : SA11A.466728

Amount of Each Receipt this Period 100.00

Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 155.00

TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3052 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. RICHARDSON, MARSHALL, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 369 EDMONDS DRIVE
 City GRANT State AL Zip Code 35747-9197
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) TARA MFG.,INC Occupation (for Individual) BUSINESSMAN
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt 11 / 02 / 2016
Transaction ID : SA11A.466729
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

B. RICHARDSON, MARSHALL, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 369 EDMONDS DRIVE
 City GRANT State AL Zip Code 35747-9197
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) TARA MFG.,INC Occupation (for Individual) BUSINESSMAN
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt 11 / 05 / 2016
Transaction ID : SA11A.478879
 Amount of Each Receipt this Period 200.00
 Memo Item CONTRIBUTION

C. RICHARDS, PAMELA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 320 DREXEL DRIVE
 City GRAPEVINE State TX Zip Code 76051-5101
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF Occupation (for Individual) BACKSTREET SALON
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 11 / 03 / 2016
Transaction ID : SA11A.468504
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	550.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3053 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. RICHARDS, ROBERT, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 362 S. BAY SHORE BLVD.
 City GILBERT State AZ Zip Code 85233-6156
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 255.00

Date of Receipt 11 / 02 / 2016
Transaction ID : SA11A.469910
 Amount of Each Receipt this Period 30.00
 Memo Item CONTRIBUTION

B. RICHERT, JOSEPH, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 34180 HURON RIVER DRIVE
 City NEW BOSTON State MI Zip Code 48164-9779
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 2925.00

Date of Receipt 11 / 04 / 2016
Transaction ID : SA11A.472389
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

C. RICHINS, ROBERT, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 6900 HELENA DR NE
 City BREMERTON State WA Zip Code 98311-9534
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) US DEPT OF NAVY Occupation (for Individual) HR SPECIALIST
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 600.00

Date of Receipt 10 / 20 / 2016
Transaction ID : SA11A.442284
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶ 155.00
TOTAL This Period (last page this line number only).....▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3054 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
Team Ryan

A. RICHINS, ROBERT, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 6900 HELENA DR NE
 City BREMERTON State WA Zip Code 98311-9534
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) US DEPT OF NAVY Occupation (for Individual) HR SPECIALIST
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 600.00

Date of Receipt 10 / 23 / 2016
Transaction ID : SA11A.446461
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

B. RICHINS, ROBERT, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 6900 HELENA DR NE
 City BREMERTON State WA Zip Code 98311-9534
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) US DEPT OF NAVY Occupation (for Individual) HR SPECIALIST
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 600.00

Date of Receipt 10 / 21 / 2016
Transaction ID : SA11A.447122
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

C. RICHINS, ROBERT, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 6900 HELENA DR NE
 City BREMERTON State WA Zip Code 98311-9534
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) US DEPT OF NAVY Occupation (for Individual) HR SPECIALIST
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 600.00

Date of Receipt 10 / 24 / 2016
Transaction ID : SA11A.449451
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	75.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3055 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. RICHINS, ROBERT, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 6900 HELENA DR NE
 City BREMERTON State WA Zip Code 98311-9534
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) US DEPT OF NAVY Occupation (for Individual) HR SPECIALIST
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 600.00

Date of Receipt 10 / 29 / 2016
Transaction ID : SA11A.460477
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

B. RICHINS, ROBERT, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 6900 HELENA DR NE
 City BREMERTON State WA Zip Code 98311-9534
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) US DEPT OF NAVY Occupation (for Individual) HR SPECIALIST
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 600.00

Date of Receipt 11 / 02 / 2016
Transaction ID : SA11A.465806
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

C. RICHINS, ROBERT, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 6900 HELENA DR NE
 City BREMERTON State WA Zip Code 98311-9534
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) US DEPT OF NAVY Occupation (for Individual) HR SPECIALIST
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 600.00

Date of Receipt 11 / 07 / 2016
Transaction ID : SA11A.476477
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	75.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3056 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. RICHINS, ROBERT, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 6900 HELENA DR NE
 City BREMERTON State WA Zip Code 98311-9534
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) US DEPT OF NAVY Occupation (for Individual) HR SPECIALIST
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 600.00

Date of Receipt 11 / 05 / 2016
Transaction ID : SA11A.479061
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

B. RICHINS, ROBERT, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 6900 HELENA DR NE
 City BREMERTON State WA Zip Code 98311-9534
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) US DEPT OF NAVY Occupation (for Individual) HR SPECIALIST
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 600.00

Date of Receipt 11 / 04 / 2016
Transaction ID : SA11A.479407
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

C. RICHINS, ROBERT, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 6900 HELENA DR NE
 City BREMERTON State WA Zip Code 98311-9534
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) US DEPT OF NAVY Occupation (for Individual) HR SPECIALIST
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 600.00

Date of Receipt 11 / 07 / 2016
Transaction ID : SA11A.479874
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 75.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3057 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. RICHMOND, CHARLES, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 10228 NE 52ND ST
 City KIRKLAND State WA Zip Code 98033-7605
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 10 / 26 / 2016
Transaction ID : SA11A.449973
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

B. RICHMOND, CHARLES, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 10228 NE 52ND ST
 City KIRKLAND State WA Zip Code 98033-7605
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 10 / 31 / 2016
Transaction ID : SA11A.457707
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

C. RICHMOND, CHARLES, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 10228 NE 52ND ST
 City KIRKLAND State WA Zip Code 98033-7605
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 10 / 31 / 2016
Transaction ID : SA11A.457709
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	150.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3058 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. RICHMOND, CHARLES, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 10228 NE 52ND ST

City KIRKLAND	State WA	Zip Code 98033-7605
------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	01	/	2016

Transaction ID : SA11A.462251

Amount of Each Receipt this Period
50.00

Memo Item CONTRIBUTION

B. RICHTER, GARY, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 5737 CLEVEDON LN

City OSHKOSH	State WI	Zip Code 54904-9729
-----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
407.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	26	/	2016

Transaction ID : SA11A.449885

Amount of Each Receipt this Period
25.00

Memo Item CONTRIBUTION

C. RICHTER, GARY, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 5737 CLEVEDON LN

City OSHKOSH	State WI	Zip Code 54904-9729
-----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
407.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	31	/	2016

Transaction ID : SA11A.457812

Amount of Each Receipt this Period
25.00

Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	100.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3059 OF 4311
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. RICHTER, GARY, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 5737 CLEVEDON LN

City OSHKOSH	State WI	Zip Code 54904-9729
FEC ID number of contributing federal political committee. C		
Name of Employer (for Individual) NONE		Occupation (for Individual) RETIRED
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 407.00

Date of Receipt
11 / 02 / 2016
Transaction ID : **SA11A.466428**

Amount of Each Receipt this Period
25.00

Memo Item CONTRIBUTION

B. RICHTER, GARY, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 5737 CLEVEDON LN

City OSHKOSH	State WI	Zip Code 54904-9729
FEC ID number of contributing federal political committee. C		
Name of Employer (for Individual) NONE		Occupation (for Individual) RETIRED
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 407.00

Date of Receipt
11 / 02 / 2016
Transaction ID : **SA11A.466429**

Amount of Each Receipt this Period
25.00

Memo Item CONTRIBUTION

C. RICKERT, DAVID, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 87 MOUNT MADONNA ROAD

City WATSONVILLE	State CA	Zip Code 95076-8605
FEC ID number of contributing federal political committee. C		
Name of Employer (for Individual) NONE		Occupation (for Individual) RETIRED
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		Aggregate Year-to-Date ▼ 450.00

Date of Receipt
11 / 03 / 2016
Transaction ID : **SA11A.465448**

Amount of Each Receipt this Period
150.00

Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	200.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3060 OF 4311
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
Team Ryan

A. RICKETTS, MARLENE, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address P.O. BOX 31519

City OMAHA	State NE	Zip Code 68131-0519
FEC ID number of contributing federal political committee. C		
Name of Employer (for Individual) NONE		Occupation (for Individual) RETIRED
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 100000.00

Date of Receipt
M M M / D D D / Y Y Y Y Y Y
10 / 25 / 2016
Transaction ID : SA11A.444913

Amount of Each Receipt this Period
100000.00

Memo Item
CONTRIBUTION

B. RICKERSON, MAX, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address PO BOX 431

City CHANUTE	State KS	Zip Code 66720-0431
FEC ID number of contributing federal political committee. C		
Name of Employer (for Individual) NONE		Occupation (for Individual) RETIRED
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 500.00

Date of Receipt
M M M / D D D / Y Y Y Y Y Y
10 / 26 / 2016
Transaction ID : SA11A.450757

Amount of Each Receipt this Period
500.00

Memo Item
CONTRIBUTION

C. RICKERSHAUSER, PETER, J., MR.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 545 ADAMS STREET

City DENVER	State CO	Zip Code 80206-4412
FEC ID number of contributing federal political committee. C		
Name of Employer (for Individual) NONE		Occupation (for Individual) RETIRED
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		Aggregate Year-to-Date ▼ 832.00

Date of Receipt
M M M / D D D / Y Y Y Y Y Y
10 / 26 / 2016
Transaction ID : SA11A.454496

Amount of Each Receipt this Period
100.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	100600.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3061 OF 4311
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. RICKERSHAUSER, PETER, J., MR.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 545 ADAMS STREET

City DENVER	State CO	Zip Code 80206-4412
----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
832.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11		04		2016

Transaction ID : SA11A.473695

Amount of Each Receipt this Period
50.00

Memo Item CONTRIBUTION

B. RIDDICK, MAX, F., MR.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 3618 TIGER POINT BLVD

City GULF BREEZE	State FL	Zip Code 32563-3443
---------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		25		2016

Transaction ID : SA11A.448187

Amount of Each Receipt this Period
60.00

Memo Item CONTRIBUTION

C. RIDDICK, MAX, F., MR.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 3618 TIGER POINT BLVD

City GULF BREEZE	State FL	Zip Code 32563-3443
---------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		24		2016

Transaction ID : SA11A.449193

Amount of Each Receipt this Period
60.00

Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	170.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3062 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. RIDER, ALAN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 12206 QUORN LANE
 City RESTON State VA Zip Code 20191-2627
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1350.00

Date of Receipt 10 / 23 / 2016
Transaction ID : SA11A.446301
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

B. RIDER, ALAN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 12206 QUORN LANE
 City RESTON State VA Zip Code 20191-2627
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1350.00

Date of Receipt 10 / 23 / 2016
Transaction ID : SA11A.446306
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

C. RIDER, ALAN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 12206 QUORN LANE
 City RESTON State VA Zip Code 20191-2627
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1350.00

Date of Receipt 10 / 25 / 2016
Transaction ID : SA11A.448139
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶ 150.00
TOTAL This Period (last page this line number only).....▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3063 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name A. RIDER, ALAN, , ,		Date of Receipt M M M / D D D / Y Y Y Y Y Y 10 / 25 / 2016
Mailing Address 12206 QUORN LANE		Transaction ID : SA11A.448146
City RESTON	State VA	Zip Code 20191-2627
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 50.00
Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED	<input type="checkbox"/> Memo Item CONTRIBUTION
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1350.00	

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name B. RIDER, ALAN, , ,		Date of Receipt M M M / D D D / Y Y Y Y Y Y 10 / 27 / 2016
Mailing Address 12206 QUORN LANE		Transaction ID : SA11A.453918
City RESTON	State VA	Zip Code 20191-2627
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 100.00
Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED	<input type="checkbox"/> Memo Item CONTRIBUTION
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1350.00	

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name C. RIDER, ALAN, , ,		Date of Receipt M M M / D D D / Y Y Y Y Y Y 10 / 30 / 2016
Mailing Address 12206 QUORN LANE		Transaction ID : SA11A.459533
City RESTON	State VA	Zip Code 20191-2627
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 50.00
Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED	<input type="checkbox"/> Memo Item CONTRIBUTION
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Aggregate Year-to-Date ▼ 1350.00	

SUBTOTAL of Receipts This Page (optional).....▶	200.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3064 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
Team Ryan

A. RIDER, ALAN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 12206 QUORN LANE
 City RESTON State VA Zip Code 20191-2627
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1350.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 30 / 2016
Transaction ID : SA11A.459535
 Amount of Each Receipt this Period
 50.00
 Memo Item
 CONTRIBUTION

B. RIDER, ALAN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 12206 QUORN LANE
 City RESTON State VA Zip Code 20191-2627
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1350.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 02 / 2016
Transaction ID : SA11A.466305
 Amount of Each Receipt this Period
 50.00
 Memo Item
 CONTRIBUTION

C. RIDER, ALAN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 12206 QUORN LANE
 City RESTON State VA Zip Code 20191-2627
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1350.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 02 / 2016
Transaction ID : SA11A.466308
 Amount of Each Receipt this Period
 50.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	150.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3065 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. RIDER, ALAN, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 12206 QUORN LANE

City RESTON	State VA	Zip Code 20191-2627
----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1350.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	04	/	2016

Transaction ID : SA11A.471308

Amount of Each Receipt this Period
50.00

Memo Item
CONTRIBUTION

B. RIDER, ALAN, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 12206 QUORN LANE

City RESTON	State VA	Zip Code 20191-2627
----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1350.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	04	/	2016

Transaction ID : SA11A.474126

Amount of Each Receipt this Period
100.00

Memo Item
CONTRIBUTION

C. RIDGE, EDWARD, M., MR.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1642 GIBSON ROAD

City BENSALEM	State PA	Zip Code 19020-3008
------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) TOP OF THE RIDGE INC	Occupation (for Individual) OWNER
---	--------------------------------------

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
850.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	24	/	2016

Transaction ID : SA11A.443870

Amount of Each Receipt this Period
500.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	650.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3066 OF 4311
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. RIDLEY, CHARLES, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 595 CIRCLEWOOD DR.

City AURORA	State OH	Zip Code 44202-9716
----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) INFORMATION REQUESTED PER BEST EFFORTS	Occupation (for Individual) INFORMATION REQUESTED PER BE
---	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
275.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		29		2016

Transaction ID : SA11A.460473

Amount of Each Receipt this Period
100.00

Memo Item
CONTRIBUTION

B. RIDLEY, DAVE, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 3537 RANKIN

City DALLAS	State TX	Zip Code 75205-1208
----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) SELF EMPLOYED	Occupation (for Individual) CONSULTANT
--	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1156.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		23		2016

Transaction ID : SA11A.446360

Amount of Each Receipt this Period
50.00

Memo Item
CONTRIBUTION

C. RIDLEY, DAVE, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 3537 RANKIN

City DALLAS	State TX	Zip Code 75205-1208
----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) SELF EMPLOYED	Occupation (for Individual) CONSULTANT
--	---

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
1156.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		30		2016

Transaction ID : SA11A.460113

Amount of Each Receipt this Period
59.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	209.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3067 OF 4311
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. RIDLEY, DAVE, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 3537 RANKIN

City DALLAS	State TX	Zip Code 75205-1208
----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) SELF EMPLOYED	Occupation (for Individual) CONSULTANT
--	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1156.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		31		2016

Transaction ID : SA11A.463224

Amount of Each Receipt this Period
25.00

Memo Item
CONTRIBUTION

B. RIDLEY, DAVE, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 3537 RANKIN

City DALLAS	State TX	Zip Code 75205-1208
----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) SELF EMPLOYED	Occupation (for Individual) CONSULTANT
--	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1156.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11		04		2016

Transaction ID : SA11A.472702

Amount of Each Receipt this Period
59.00

Memo Item
CONTRIBUTION

C. RIDLEY, DAVE, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 3537 RANKIN

City DALLAS	State TX	Zip Code 75205-1208
----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) SELF EMPLOYED	Occupation (for Individual) CONSULTANT
--	---

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
1156.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11		06		2016

Transaction ID : SA11A.478151

Amount of Each Receipt this Period
50.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	134.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3068 OF 4311
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. RIEBE, BARBARA, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 620 E LAKE JASMINE CIR
UNIT 106

City VERO BEACH State FL Zip Code 32962-5730

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
335.00

Date of Receipt
10 / 20 / 2016
Transaction ID : SA11A.442432

Amount of Each Receipt this Period
25.00

Memo Item CONTRIBUTION

B. RIEBE, BARBARA, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 620 E LAKE JASMINE CIR
UNIT 106

City VERO BEACH State FL Zip Code 32962-5730

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
335.00

Date of Receipt
10 / 27 / 2016
Transaction ID : SA11A.454191

Amount of Each Receipt this Period
30.00

Memo Item CONTRIBUTION

C. RIEBE, BARBARA, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 620 E LAKE JASMINE CIR
UNIT 106

City VERO BEACH State FL Zip Code 32962-5730

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
335.00

Date of Receipt
11 / 04 / 2016
Transaction ID : SA11A.471386

Amount of Each Receipt this Period
30.00

Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 85.00

TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3069 OF 4311
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. RIEDER, GEOFF, D., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO BOX 1607
 City ALBUQUERQUE State NM Zip Code 87103-1607
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) FOSTER RIEDER AND JACKSON, PC Occupation (for Individual) ATTORNEY
 Receipt For: Primary General Other (specify) Aggregate Year-to-Date **1886.00**

Date of Receipt **10 / 24 / 2016**
Transaction ID : SA11A.445891
 Amount of Each Receipt this Period **100.00**
 Memo Item CONTRIBUTION

B. RIEDER, GEOFF, D., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO BOX 1607
 City ALBUQUERQUE State NM Zip Code 87103-1607
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) FOSTER RIEDER AND JACKSON, PC Occupation (for Individual) ATTORNEY
 Receipt For: Primary General Other (specify) Aggregate Year-to-Date **1886.00**

Date of Receipt **10 / 24 / 2016**
Transaction ID : SA11A.445904
 Amount of Each Receipt this Period **100.00**
 Memo Item CONTRIBUTION

C. RIEDER, GEOFF, D., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO BOX 1607
 City ALBUQUERQUE State NM Zip Code 87103-1607
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) FOSTER RIEDER AND JACKSON, PC Occupation (for Individual) ATTORNEY
 Receipt For: Primary General Other (specify) Aggregate Year-to-Date **1886.00**

Date of Receipt **10 / 25 / 2016**
Transaction ID : SA11A.448877
 Amount of Each Receipt this Period **250.00**
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	450.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3070 OF 4311
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. RIEDER, GEOFF, D., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO BOX 1607
 City ALBUQUERQUE State NM Zip Code 87103-1607
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) FOSTER RIEDER AND JACKSON, PC Occupation (for Individual) ATTORNEY
 Receipt For: Primary General Other (specify) Aggregate Year-to-Date **1886.00**

Date of Receipt **11 / 09 / 2016**
Transaction ID : SA11A.480967
 Amount of Each Receipt this Period **18.00**
 Memo Item CONTRIBUTION

B. RIEDER, GEOFF, D., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO BOX 1607
 City ALBUQUERQUE State NM Zip Code 87103-1607
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) FOSTER RIEDER AND JACKSON, PC Occupation (for Individual) ATTORNEY
 Receipt For: Primary General Other (specify) Aggregate Year-to-Date **1886.00**

Date of Receipt **11 / 09 / 2016**
Transaction ID : SA11A.480968
 Amount of Each Receipt this Period **18.00**
 Memo Item CONTRIBUTION

C. RIESENBECK, MICHAEL, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1508 LAKE HOLIDAY DR
 City SANDWICH State IL Zip Code 60548-9305
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) Aggregate Year-to-Date **600.00**

Date of Receipt **11 / 07 / 2016**
Transaction ID : SA11A.475939
 Amount of Each Receipt this Period **25.00**
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	61.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3071 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. RIESENBECK, MICHAEL, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1508 LAKE HOLIDAY DR
 City SANDWICH State IL Zip Code 60548-9305
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 600.00

Date of Receipt 11 / 07 / 2016
Transaction ID : SA11A.475941
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

B. RIGGI, VINCENT, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 41 OLD GICK ROAD NA
 City SARATOGA SPRINGS State NY Zip Code 12866-9450
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) TURBINESERVICES,LTD. Occupation (for Individual) PRESIDENT
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1750.00

Date of Receipt 11 / 04 / 2016
Transaction ID : SA11A.472879
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

C. RIKER, FRANK, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 6643 NW 65TH PLACE
 City OCALA State FL Zip Code 34482-7729
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) CULLIGAN WATER Occupation (for Individual) MANAGER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 10 / 26 / 2016
Transaction ID : SA11A.450313
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 525.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3072 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. RILEY, CINDY, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 405 N I 27

City LUBBOCK	State TX	Zip Code 79403-3200
-----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) WEST TEXAS BRICK & STONE	Occupation (for Individual) RETAILER BRICK & STONE
---	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
300.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		27		2016

Transaction ID : SA11A.453896

Amount of Each Receipt this Period
100.00

Memo Item
CONTRIBUTION

B. RILEY, CINDY, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 405 N I 27

City LUBBOCK	State TX	Zip Code 79403-3200
-----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) WEST TEXAS BRICK & STONE	Occupation (for Individual) RETAILER BRICK & STONE
---	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
300.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11		04		2016

Transaction ID : SA11A.470993

Amount of Each Receipt this Period
100.00

Memo Item
CONTRIBUTION

C. RILEY, DAVID, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 2 S COVE DRIVE

City BARRINGTON	State IL	Zip Code 60010-9592
--------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
1000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		26		2016

Transaction ID : SA11A.447727

Amount of Each Receipt this Period
1000.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	1200.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3073 OF 4311
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
Team Ryan

A. RILEY, RUTH, L., ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 2909 WOODLAMD
618

City DES MOINES State IA Zip Code 50312-3885

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
645.00

Date of Receipt
MM / DD / YYYY
10 / 22 / 2016

Transaction ID : SA11A.446741

Amount of Each Receipt this Period
50.00

Memo Item CONTRIBUTION

B. RILEY, RUTH, L., ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 2909 WOODLAMD
618

City DES MOINES State IA Zip Code 50312-3885

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
645.00

Date of Receipt
MM / DD / YYYY
11 / 04 / 2016

Transaction ID : SA11A.473970

Amount of Each Receipt this Period
100.00

Memo Item CONTRIBUTION

C. RILEY, RUTH, L., ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 2909 WOODLAMD
618

City DES MOINES State IA Zip Code 50312-3885

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
645.00

Date of Receipt
MM / DD / YYYY
11 / 04 / 2016

Transaction ID : SA11A.474231

Amount of Each Receipt this Period
25.00

Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 175.00

TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3074 OF 4311
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. RIMMER, MARY, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 3120 CIRCA DE TIERRA

City ENCINITAS	State CA	Zip Code 92024-6905
-------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) SELF EMPLOYED	Occupation (for Individual) ART THERAPIST
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
400.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		26		2016

Transaction ID : SA11A.450534

Amount of Each Receipt this Period
100.00

Memo Item CONTRIBUTION

B. RINKER, NANCY, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 5095 SQUIRREL BEND

City COLUMBUS	State OH	Zip Code 43220-2279
------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) SELF EMPLOYED	Occupation (for Individual) SALES
--	--------------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		27		2016

Transaction ID : SA11A.456489

Amount of Each Receipt this Period
50.00

Memo Item CONTRIBUTION

C. RINKER, NANCY, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 5095 SQUIRREL BEND

City COLUMBUS	State OH	Zip Code 43220-2279
------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) SELF EMPLOYED	Occupation (for Individual) SALES
--	--------------------------------------

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11		05		2016

Transaction ID : SA11A.478856

Amount of Each Receipt this Period
50.00

Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	200.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3075 OF 4311
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. RIPAK, LAWRENCE, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 5 TAMMI CT.

City KINGS PARK	State NY	Zip Code 11754-5034
--------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
400.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		27		2016

Transaction ID : SA11A.456661

Amount of Each Receipt this Period
100.00

Memo Item
CONTRIBUTION

B. RIPPIS, GEORGE, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1759 WALKER AVE.

City WINTER PARK	State FL	Zip Code 32789-3978
---------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) ATLANTIC PATHOLOGY	Occupation (for Individual) PHYSICIAN
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
381.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		20		2016

Transaction ID : SA11A.442133

Amount of Each Receipt this Period
250.00

Memo Item
CONTRIBUTION

C. RISCH, JONATHAN, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 816 N 3RD ST

City BELLAIRE	State TX	Zip Code 77401-2804
------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) SELF EMPLOYED	Occupation (for Individual) CONSULTANT
--	---

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
650.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		25		2016

Transaction ID : SA11A.448795

Amount of Each Receipt this Period
100.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	450.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3076 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. RISCH, JONATHAN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 816 N 3RD ST
 City BELLAIRE State TX Zip Code 77401-2804
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) CONSULTANT
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 650.00

Date of Receipt 10 / 25 / 2016
Transaction ID : SA11A.448798
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

B. RISING, SUSAN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 6524 GARNET AVE
 City PORT ARTHUR State TX Zip Code 77640-1310
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SUSAN RISING Occupation (for Individual) ACTION RESTORATION INC.
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt 10 / 28 / 2016
Transaction ID : SA11A.456123
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

C. RISING, SUSAN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 6524 GARNET AVE
 City PORT ARTHUR State TX Zip Code 77640-1310
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SUSAN RISING Occupation (for Individual) ACTION RESTORATION INC.
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt 11 / 04 / 2016
Transaction ID : SA11A.473536
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	200.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3077 OF 4311
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. RISMILLER, DAVID, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4021 GULF SHORES BOULEVARD N APT 1 #1006
 City NAPLES State FL Zip Code 34103-2234
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 350.00

Date of Receipt 10 / 27 / 2016
Transaction ID : SA11A.452401
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

B. RISSER, ED, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 6623 FOREST COVE
 City SOUTH BEND State IN Zip Code 46614-6495
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) QUALITY WINDOW AND DOOR Occupation (for Individual) SALES
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 225.00

Date of Receipt 10 / 27 / 2016
Transaction ID : SA11A.456765
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

C. RISSER, ED, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 6623 FOREST COVE
 City SOUTH BEND State IN Zip Code 46614-6495
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) QUALITY WINDOW AND DOOR Occupation (for Individual) SALES
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 225.00

Date of Receipt 11 / 06 / 2016
Transaction ID : SA11A.477263
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶ 150.00
TOTAL This Period (last page this line number only).....▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3078 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. RISSER, THOMAS, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 70 TODD POND ROAD
 City LINCOLN State MA Zip Code 01773-3808
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) PHYSICIAN
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 11 / 07 / 2016
Transaction ID : SA11A.475659
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

B. RISSER, THOMAS, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 70 TODD POND ROAD
 City LINCOLN State MA Zip Code 01773-3808
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) PHYSICIAN
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 11 / 07 / 2016
Transaction ID : SA11A.475664
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

C. RISSER, THOMAS, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 70 TODD POND ROAD
 City LINCOLN State MA Zip Code 01773-3808
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) PHYSICIAN
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 11 / 07 / 2016
Transaction ID : SA11A.475665
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	300.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3079 OF 4311
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. RISTKOK, TUULI-ANN, , MRS.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 16 W 16TH STREET
APT 6J N

City NEW YORK State NY Zip Code 10011-6333

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) RETIRED Occupation (for Individual) LAWYER

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1200.00

Date of Receipt
10 / 24 / 2016
Transaction ID : SA11A.443910

Amount of Each Receipt this Period
500.00

Memo Item CONTRIBUTION

B. RITCH, BRADLEY, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 504 VIA VAQUERO

City FAIRFIELD State CA Zip Code 94534-1546

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) ACCOUNTANT

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt
11 / 07 / 2016
Transaction ID : SA11A.467847

Amount of Each Receipt this Period
100.00

Memo Item CONTRIBUTION

C. RITCH, PHILIP, E., MR.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 146 KALUAMOO STREET

City KAILUA State HI Zip Code 96734-2144

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
435.00

Date of Receipt
10 / 26 / 2016
Transaction ID : SA11A.447650

Amount of Each Receipt this Period
35.00

Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 635.00

TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3080 OF 4311
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. RITCH, PHILIP, E., MR.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 146 KALUAMOO STREET

City KAILUA	State HI	Zip Code 96734-2144
----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
435.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	26	/	2016

Transaction ID : SA11A.447697

Amount of Each Receipt this Period
50.00

Memo Item
CONTRIBUTION

B. RITTER, JACK, , , JR.
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address PO BOX 2068

City AUSTIN	State TX	Zip Code 78768-2068
----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) SELF EMPLOYED	Occupation (for Individual) BUSINESS MANAGER
--	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	07	/	2016

Transaction ID : SA11A.467866

Amount of Each Receipt this Period
500.00

Memo Item
CONTRIBUTION

C. RIVARD, STEPHANIE, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 14910 FLOWERWOOD DR

City HOUSTON	State TX	Zip Code 77062-2816
-----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	20	/	2016

Transaction ID : SA11A.442138

Amount of Each Receipt this Period
250.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	800.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3081 OF 4311
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. ROA, ZOE, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 233 CORAL LANE

City PALM BEACH	State FL	Zip Code 33480-3604
--------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	31	/	2016

Transaction ID : SA11A.459046

Amount of Each Receipt this Period
500.00

Memo Item CONTRIBUTION

B. ROATH, KENNETH, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 22 CANYON FAIRWAY DRIVE

City NEWPORT BEACH	State CA	Zip Code 92660-5916
-----------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	07	/	2016

Transaction ID : SA11A.474789

Amount of Each Receipt this Period
500.00

Memo Item CONTRIBUTION

C. ROATH, MICHAEL, S., DR., M.D.
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 501 ARNON RIDGE CT

City GREAT FALLS	State VA	Zip Code 22066-3929
---------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
300.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	28	/	2016

Transaction ID : SA11A.455239

Amount of Each Receipt this Period
50.00

Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	1050.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3082 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. ROATH, MICHAEL, S., DR., M.D.
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 501 ARNON RIDGE CT
 City GREAT FALLS State VA Zip Code 22066-3929
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 10 / 28 / 2016
Transaction ID : SA11A.455244
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

B. ROATH, MICHAEL, S., DR., M.D.
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 501 ARNON RIDGE CT
 City GREAT FALLS State VA Zip Code 22066-3929
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 10 / 28 / 2016
Transaction ID : SA11A.455247
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

C. ROATH, MICHAEL, S., DR., M.D.
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 501 ARNON RIDGE CT
 City GREAT FALLS State VA Zip Code 22066-3929
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 11 / 04 / 2016
Transaction ID : SA11A.470753
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶ 150.00
TOTAL This Period (last page this line number only).....▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3083 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. ROBBINS, MICHAEL, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 105 COLCHESTER STREET
 City BROOKLINE State MA Zip Code 02446-5439
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) MAYFLOWER ADVISOR Occupation (for Individual) BROKER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt 10 / 25 / 2016
Transaction ID : SA11A.447462
 Amount of Each Receipt this Period 200.00
 Memo Item CONTRIBUTION

B. ROBBINS, THOMAS, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5413 KERRY GLEN LANE
 City CHARLOTTE State NC Zip Code 28226-3416
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 275.00

Date of Receipt 10 / 29 / 2016
Transaction ID : SA11A.460432
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

C. ROBBINS, THOMAS, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5413 KERRY GLEN LANE
 City CHARLOTTE State NC Zip Code 28226-3416
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 275.00

Date of Receipt 10 / 29 / 2016
Transaction ID : SA11A.460433
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	300.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3084 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
Team Ryan

A. ROBE, T, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 636 N FLAGSHIP DR
 City SALEM State SC Zip Code 29676-4108
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 265.47

Date of Receipt 11 / 06 / 2016
Transaction ID : SA11A.477178
 Amount of Each Receipt this Period 33.34
 Memo Item CONTRIBUTION

B. ROBE, T, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 636 N FLAGSHIP DR
 City SALEM State SC Zip Code 29676-4108
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 265.47

Date of Receipt 11 / 04 / 2016
Transaction ID : SA11A.479515
 Amount of Each Receipt this Period 25.17
 Memo Item CONTRIBUTION

C. ROBERTSON, ALICE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 305 GROVE ST.
 City LANCASTER State PA Zip Code 17602-5095
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 275.00

Date of Receipt 10 / 27 / 2016
Transaction ID : SA11A.456791
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	83.51
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3085 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. ROBERTSON, ALICE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 305 GROVE ST.
 City LANCASTER State PA Zip Code 17602-5095
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 275.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 27 / 2016
Transaction ID : SA11A.456792
 Amount of Each Receipt this Period
 25.00
 Memo Item
 CONTRIBUTION

B. ROBERTSON, ALICE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 305 GROVE ST.
 City LANCASTER State PA Zip Code 17602-5095
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 275.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 05 / 2016
Transaction ID : SA11A.479026
 Amount of Each Receipt this Period
 25.00
 Memo Item
 CONTRIBUTION

C. ROBERTSON, BRIAN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 31 CROSSWAY EAST
 City BOHEMIA State NY Zip Code 11716-1204
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NORTHROCK Occupation (for Individual) PRES
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 450.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 27 / 2016
Transaction ID : SA11A.453035
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶ 150.00
TOTAL This Period (last page this line number only).....▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3086 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. ROBERTSON, BRIAN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 31 CROSSWAY EAST
 City BOHEMIA State NY Zip Code 11716-1204
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NORTHROCK Occupation (for Individual) PRES
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 450.00

Date of Receipt
 11 / 01 / 2016
Transaction ID : SA11A.462337
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION

B. ROBERTSON, CALLIE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5002 JACKWOOD ST
 City HOUSTON State TX Zip Code 77096-1507
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt
 10 / 24 / 2016
Transaction ID : SA11A.443913
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION

C. ROBERTSON, CALLIE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5002 JACKWOOD ST
 City HOUSTON State TX Zip Code 77096-1507
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt
 11 / 01 / 2016
Transaction ID : SA11A.462557
 Amount of Each Receipt this Period
 50.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	250.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3087 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. ROBERTSON, CAROLYN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 329 VAUGHN ROBERTSON RD.
 N/A
 City STEENS State MS Zip Code 39766-9774
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 331.00

Date of Receipt
 11 / 04 / 2016
Transaction ID : SA11A.473532
 Amount of Each Receipt this Period
 50.00
 Memo Item
 CONTRIBUTION

B. ROBERTSON, CHARLES, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1978 E. ELY CT
 City MARTINSVILLE State IN Zip Code 46151-5946
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 250.00

Date of Receipt
 10 / 26 / 2016
Transaction ID : SA11A.450877
 Amount of Each Receipt this Period
 50.00
 Memo Item
 CONTRIBUTION

C. ROBERTSON, CHARLES, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1978 E. ELY CT
 City MARTINSVILLE State IN Zip Code 46151-5946
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For:
 Primary General
 Other (specify)
 Aggregate Year-to-Date ▼
 250.00

Date of Receipt
 10 / 26 / 2016
Transaction ID : SA11A.450902
 Amount of Each Receipt this Period
 50.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	150.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3088 OF 4311
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
A. ROBERTSON, CHARLES, , ,

Mailing Address 1978 E. ELY CT

City MARTINSVILLE State IN Zip Code 46151-5946

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt
10 / 26 / 2016
Transaction ID : SA11A.450920

Amount of Each Receipt this Period
50.00

Memo Item CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
B. ROBERTS, DAVID, , ,

Mailing Address 604 S. WASHINGTON SQ. 303

City PHILADELPHIA State PA Zip Code 19106-4118

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
650.00

Date of Receipt
10 / 31 / 2016
Transaction ID : SA11A.459022

Amount of Each Receipt this Period
50.00

Memo Item CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
C. ROBERTS, DAVID, , ,

Mailing Address 604 S. WASHINGTON SQ. 303

City PHILADELPHIA State PA Zip Code 19106-4118

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
650.00

Date of Receipt
11 / 07 / 2016
Transaction ID : SA11A.476351

Amount of Each Receipt this Period
50.00

Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶ 150.00

TOTAL This Period (last page this line number only).....▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3089 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. ROBERT, DIANE, H., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 6406 SCENIC DRIVE
 City YAKIMA State WA Zip Code 98908-2119
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 900.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 31 / 2016
Transaction ID : SA11A.457627
 Amount of Each Receipt this Period
 50.00
 Memo Item
 CONTRIBUTION

B. ROBERT, DIANE, H., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 6406 SCENIC DRIVE
 City YAKIMA State WA Zip Code 98908-2119
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 900.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 02 / 2016
Transaction ID : SA11A.465978
 Amount of Each Receipt this Period
 50.00
 Memo Item
 CONTRIBUTION

C. ROBERT, DIANE, H., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 6406 SCENIC DRIVE
 City YAKIMA State WA Zip Code 98908-2119
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 900.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 04 / 2016
Transaction ID : SA11A.473212
 Amount of Each Receipt this Period
 50.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	150.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3090 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
Team Ryan

A. ROBERT, DIANE, H., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 6406 SCENIC DRIVE
 City YAKIMA State WA Zip Code 98908-2119
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 900.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 04 / 2016
Transaction ID : SA11A.473266
 Amount of Each Receipt this Period
 50.00
 Memo Item
 CONTRIBUTION

B. ROBERT, DIANE, H., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 6406 SCENIC DRIVE
 City YAKIMA State WA Zip Code 98908-2119
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 900.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 04 / 2016
Transaction ID : SA11A.473280
 Amount of Each Receipt this Period
 50.00
 Memo Item
 CONTRIBUTION

C. ROBERT, DIANE, H., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 6406 SCENIC DRIVE
 City YAKIMA State WA Zip Code 98908-2119
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 900.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 06 / 2016
Transaction ID : SA11A.478121
 Amount of Each Receipt this Period
 50.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	150.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3091 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. ROBERTS, GARY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 6206 APPIAN WAY
 City RIVERSIDE State CA Zip Code 92506-4555
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 600.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 10 / 31 / 2016
Transaction ID : SA11A.459119
 Amount of Each Receipt this Period
 50.00
 Memo Item
 CONTRIBUTION

B. ROBERTS, GARY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 6206 APPIAN WAY
 City RIVERSIDE State CA Zip Code 92506-4555
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 600.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 11 / 04 / 2016
Transaction ID : SA11A.472133
 Amount of Each Receipt this Period
 50.00
 Memo Item
 CONTRIBUTION

C. ROBERTS, GARY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 6206 APPIAN WAY
 City RIVERSIDE State CA Zip Code 92506-4555
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 600.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 11 / 04 / 2016
Transaction ID : SA11A.473904
 Amount of Each Receipt this Period
 50.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	150.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3092 OF 4311
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. ROBERTSON, JANET, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 26713 BUCKHORN ROAD

City CANYON CITY	State OR	Zip Code 97820-1001
---------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
300.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	04	/	2016

Transaction ID : SA11A.474024

Amount of Each Receipt this Period
100.00

Memo Item CONTRIBUTION

B. ROBERSON, JOHN, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 428 MEYER FARM DRIVE

City PINEHURST	State NC	Zip Code 28374-6972
-------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) PINEHURST RADIOLOGY	Occupation (for Individual) PHYSICIAN
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
450.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	30	/	2016

Transaction ID : SA11A.459498

Amount of Each Receipt this Period
250.00

Memo Item CONTRIBUTION

C. ROBERTS, RONALD, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 13757 W. ASBUR CIRCLE

City LAKEWOOD	State CO	Zip Code 80228-4501
------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
1000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	26	/	2016

Transaction ID : SA11A.450434

Amount of Each Receipt this Period
250.00

Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	600.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3093 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. ROBERTS, RONALD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 13757 W. ASBUR CIRCLE
 City LAKEWOOD State CO Zip Code 80228-4501
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 26 / 2016
Transaction ID : SA11A.450435
 Amount of Each Receipt this Period
 250.00
 Memo Item
 CONTRIBUTION

B. ROBERTS, RONALD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 13757 W. ASBUR CIRCLE
 City LAKEWOOD State CO Zip Code 80228-4501
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 26 / 2016
Transaction ID : SA11A.450441
 Amount of Each Receipt this Period
 250.00
 Memo Item
 CONTRIBUTION

C. ROBERTS, RONALD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 13757 W. ASBUR CIRCLE
 City LAKEWOOD State CO Zip Code 80228-4501
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 26 / 2016
Transaction ID : SA11A.450442
 Amount of Each Receipt this Period
 250.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	750.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3094 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. ROBERTSON, STEVE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 12080 KATE DR
 City LOS ALTOS HILLS State CA Zip Code 94022-5145
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 750.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 04 / 2016
Transaction ID : SA11A.473528
 Amount of Each Receipt this Period
 250.00
 Memo Item
 CONTRIBUTION

B. ROBERTSON, STEVE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 12080 KATE DR
 City LOS ALTOS HILLS State CA Zip Code 94022-5145
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 750.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 05 / 2016
Transaction ID : SA11A.478505
 Amount of Each Receipt this Period
 250.00
 Memo Item
 CONTRIBUTION

C. ROBERTS, WILLIAM, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 8270 HUGH ALISON PLACE
 City SARASOTA State FL Zip Code 34240-8564
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1100.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 06 / 2016
Transaction ID : SA11A.478273
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	600.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3095 OF 4311
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. ROBERTS, WILLIAM, G., MR.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 5701 BURLESON OAKS DRIVE

City BURLESON	State TX	Zip Code 76028-1827
------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
935.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11		01		2016

Transaction ID : SA11A.461598

Amount of Each Receipt this Period
200.00

Memo Item CONTRIBUTION

B. ROBERT, WILLIAM, H., MR., III
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 83 CENTENNIAL COURT

City DEERFIELD BEACH	State FL	Zip Code 33442-9135
-------------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1295.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11		03		2016

Transaction ID : SA11A.468708

Amount of Each Receipt this Period
50.00

Memo Item CONTRIBUTION

C. ROBERTSON, WYNDHAM, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 205 CEDAR BARRY LANE

City CHAPEL HILL	State NC	Zip Code 27517-7207
---------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
1000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11		08		2016

Transaction ID : SA11A.467968

Amount of Each Receipt this Period
1000.00

Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	1250.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3096 OF 4311
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. ROBINSON, DOUGLAS, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3621 VICTORIA LANE
 City CINCINNATI State OH Zip Code 45208-1617
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 10 / 25 / 2016
Transaction ID : SA11A.448894
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

B. ROBINSON, DOUGLAS, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3621 VICTORIA LANE
 City CINCINNATI State OH Zip Code 45208-1617
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 10 / 30 / 2016
Transaction ID : SA11A.459573
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

C. ROBINSON, EDMUND, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2628 DUDLEY TERRACE
 City THE VILLAGES State FL Zip Code 32162-4700
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 275.00

Date of Receipt 10 / 29 / 2016
Transaction ID : SA11A.460411
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 225.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3097 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. ROBINSON, EDWARD, N., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO BOX 1120
 City PARK CITY State UT Zip Code 84060-1120
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 450.00

Date of Receipt 10 / 31 / 2016
Transaction ID : SA11A.457272
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

B. ROBINSON, GWYNDA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 13900 S. VALLEY RD.
 City OOLOGAH State OK Zip Code 74053-3594
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) ADCT, INC. Occupation (for Individual) HTS/ MAT
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 10 / 27 / 2016
Transaction ID : SA11A.453722
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

C. ROBINSON, GWYNDA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 13900 S. VALLEY RD.
 City OOLOGAH State OK Zip Code 74053-3594
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) ADCT, INC. Occupation (for Individual) HTS/ MAT
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 10 / 27 / 2016
Transaction ID : SA11A.453732
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	450.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3098 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. ROBINSON, GWYNDA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 13900 S. VALLEY RD.
 City OOLOGAH State OK Zip Code 74053-3594
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) ADCT, INC. Occupation (for Individual) HTS/ MAT
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 10 / 28 / 2016
Transaction ID : SA11A.455801
 Amount of Each Receipt this Period 50.00
 Memo Item
CONTRIBUTION

B. ROBINSON, ORIN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 186 JERRY BROWNE RD. UNIT 1114
 City MYSTIC State CT Zip Code 06355-4006
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 10 / 31 / 2016
Transaction ID : SA11A.459074
 Amount of Each Receipt this Period 500.00
 Memo Item
CONTRIBUTION

C. ROBINSON, REBECCA, , MRS.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 361 S. LEXINGTON DR.
 City JANESVILLE State WI Zip Code 53545-4323
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) ROBINSON & PRIJIC Occupation (for Individual) BUSINESS MANAGER
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 350.00

Date of Receipt 10 / 25 / 2016
Transaction ID : SA11A.448281
 Amount of Each Receipt this Period 100.00
 Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	650.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3099 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. ROBINSON, RICHARD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5438 EAST CHOLLA STREET
 City SCOTTSDALE State AZ Zip Code 85254-4723
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) STILLWATER LANDSCAPE MGMT Occupation (for Individual) PRESIDENT
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 800.00

Date of Receipt 10 / 24 / 2016
Transaction ID : SA11A.445609
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

B. ROBINSON, RICHARD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5438 EAST CHOLLA STREET
 City SCOTTSDALE State AZ Zip Code 85254-4723
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) STILLWATER LANDSCAPE MGMT Occupation (for Individual) PRESIDENT
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 800.00

Date of Receipt 10 / 24 / 2016
Transaction ID : SA11A.445614
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

C. ROBINSON, RICHARD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5438 EAST CHOLLA STREET
 City SCOTTSDALE State AZ Zip Code 85254-4723
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) STILLWATER LANDSCAPE MGMT Occupation (for Individual) PRESIDENT
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 800.00

Date of Receipt 10 / 25 / 2016
Transaction ID : SA11A.448988
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	200.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3100 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. ROBINSON, RICHARD, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 5438 EAST CHOLLA STREET

City SCOTTSDALE	State AZ	Zip Code 85254-4723
--------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) STILLWATER LANDSCAPE MGMT	Occupation (for Individual) PRESIDENT
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
800.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	26	/	2016

Transaction ID : SA11A.449853

Amount of Each Receipt this Period
100.00

Memo Item
CONTRIBUTION

B. ROBINSON, RICHARD, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 5438 EAST CHOLLA STREET

City SCOTTSDALE	State AZ	Zip Code 85254-4723
--------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) STILLWATER LANDSCAPE MGMT	Occupation (for Individual) PRESIDENT
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
800.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	07	/	2016

Transaction ID : SA11A.475468

Amount of Each Receipt this Period
100.00

Memo Item
CONTRIBUTION

C. ROBINSON, RICHARD, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 5438 EAST CHOLLA STREET

City SCOTTSDALE	State AZ	Zip Code 85254-4723
--------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) STILLWATER LANDSCAPE MGMT	Occupation (for Individual) PRESIDENT
--	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
800.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	06	/	2016

Transaction ID : SA11A.478308

Amount of Each Receipt this Period
100.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	300.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3101 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. ROBINSON, RICHARD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5438 EAST CHOLLA STREET
 City SCOTTSDALE State AZ Zip Code 85254-4723
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) STILLWATER LANDSCAPE MGMT Occupation (for Individual) PRESIDENT
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 800.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 06 / 2016
Transaction ID : SA11A.478311
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION

B. ROBINSON, RICHARD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5438 EAST CHOLLA STREET
 City SCOTTSDALE State AZ Zip Code 85254-4723
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) STILLWATER LANDSCAPE MGMT Occupation (for Individual) PRESIDENT
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 800.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 06 / 2016
Transaction ID : SA11A.478312
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION

C. ROBINS, RONALD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 34 OAK HILL RD
 City CHAPPAQUA State NY Zip Code 10514-2514
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) BEACON FINANCIAL ADVISORS INC Occupation (for Individual) FINANCIAL ADVISOR
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 225.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 25 / 2016
Transaction ID : SA11A.448546
 Amount of Each Receipt this Period
 25.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	225.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3102 OF 4311
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. ROBISON, PAUL, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1129 GRANNY WHITE COURT

City NASHVILLE	State TN	Zip Code 37204-4115
-------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
600.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		23		2016

Transaction ID : SA11A.446566

Amount of Each Receipt this Period
100.00

Memo Item CONTRIBUTION

B. ROBISON, PAUL, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1129 GRANNY WHITE COURT

City NASHVILLE	State TN	Zip Code 37204-4115
-------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
600.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11		04		2016

Transaction ID : SA11A.472791

Amount of Each Receipt this Period
100.00

Memo Item CONTRIBUTION

C. ROBISON, ROLLAND, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 4744 BROWNS POINT BLVD

City TACOMA	State WA	Zip Code 98422-2036
----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
205.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		20		2016

Transaction ID : SA11A.441943

Amount of Each Receipt this Period
25.00

Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	225.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3103 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. ROBISON, ROLLAND, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4744 BROWNS POINT BLVD
 City TACOMA State WA Zip Code 98422-2036
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 205.00

Date of Receipt 10 / 25 / 2016
Transaction ID : SA11A.451904
 Amount of Each Receipt this Period 30.00
 Memo Item CONTRIBUTION

B. ROBISON, ROLLAND, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4744 BROWNS POINT BLVD
 City TACOMA State WA Zip Code 98422-2036
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 205.00

Date of Receipt 11 / 02 / 2016
Transaction ID : SA11A.469932
 Amount of Each Receipt this Period 30.00
 Memo Item CONTRIBUTION

C. ROBUCK, FRANK, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO BOX 17102
 City RALEIGH State NC Zip Code 27619-7102
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) ROBUCK HOMES INC Occupation (for Individual) BUILDER
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 11 / 01 / 2016
Transaction ID : SA11A.461543
 Amount of Each Receipt this Period 500.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 560.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3104 OF 4311
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. ROCHE, ANITA, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 4232 LOIRE DRIVE
City KENNER State LA Zip Code 70065-1750
FEC ID number of contributing federal political committee. **C**
Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 225.00

Date of Receipt 10 / 27 / 2016
Transaction ID : SA11A.452418
Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

B. ROCKFORD, PAULA, O., ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 16029 ROYAL OAK ROAD
City ENCINO State CA Zip Code 91436-3913
FEC ID number of contributing federal political committee. **C**
Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 525.00

Date of Receipt 11 / 07 / 2016
Transaction ID : SA11A.476611
Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

C. ROCKFORD, PAULA, O., ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 16029 ROYAL OAK ROAD
City ENCINO State CA Zip Code 91436-3913
FEC ID number of contributing federal political committee. **C**
Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 525.00

Date of Receipt 11 / 07 / 2016
Transaction ID : SA11A.476612
Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 600.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3105 OF 4311
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. ROCKHOLD, SUSAN, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 5610 VINMAR AVE

City RANCHO CUCAMONGA	State CA	Zip Code 91701-1828
--------------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
600.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		21		2016

Transaction ID : SA11A.444507

Amount of Each Receipt this Period
100.00

Memo Item CONTRIBUTION

B. ROCKHOLD, SUSAN, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 5610 VINMAR AVE

City RANCHO CUCAMONGA	State CA	Zip Code 91701-1828
--------------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
600.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11		04		2016

Transaction ID : SA11A.472031

Amount of Each Receipt this Period
100.00

Memo Item CONTRIBUTION

C. RODACK, MARK, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 16051 COLLINS AVENUE
3502

City SUNNY ISLES BEACH	State FL	Zip Code 33160-4505
---------------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
1300.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		24		2016

Transaction ID : SA11A.449456

Amount of Each Receipt this Period
300.00

Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	500.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3106 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. RODERICK, LINDA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2948 SANDRINGHAM PLACE
 City SARASOTA State FL Zip Code 34235-0956
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt **11 / 03 / 2016**
Transaction ID : SA11A.465383
 Amount of Each Receipt this Period 500.00
 Memo Item CONTRIBUTION

B. RODGERS, JOANNE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 15287 TOP OF THE HILL CT
 City LOS GATOS State CA Zip Code 95032-6535
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 575.00

Date of Receipt **10 / 25 / 2016**
Transaction ID : SA11A.448828
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

C. RODGERS, JOANNE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 15287 TOP OF THE HILL CT
 City LOS GATOS State CA Zip Code 95032-6535
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 575.00

Date of Receipt **10 / 31 / 2016**
Transaction ID : SA11A.464158
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	625.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3107 OF 4311
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. RODGERS, JOANNE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 15287 TOP OF THE HILL CT
 City LOS GATOS State CA Zip Code 95032-6535
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 575.00

Date of Receipt 10 / 31 / 2016
Transaction ID : SA11A.464161
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

B. RODGERS, JOANNE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 15287 TOP OF THE HILL CT
 City LOS GATOS State CA Zip Code 95032-6535
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 575.00

Date of Receipt 11 / 04 / 2016
Transaction ID : SA11A.471556
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

C. ROEDER, RICHARD, K., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 11150 SANTA MONICA BLVD #750
 City LOS ANGELES State CA Zip Code 90025-0528
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) VANCE STREET CAPITAL Occupation (for Individual) PARTNER
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 5400.00

Date of Receipt 11 / 03 / 2016
Transaction ID : SA11A.465239
 Amount of Each Receipt this Period 5400.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 5525.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3108 OF 4311
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. ROELLE, WILLIAM, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 18 MARSH HARBOR DR

City SAVANNAH	State GA	Zip Code 31410-
------------------	-------------	--------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	31	/	2016

Transaction ID : SA11A.457741

Amount of Each Receipt this Period
1000.00

Memo Item CONTRIBUTION

B. ROELLE, WILLIAM, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 18 MARSH HARBOR DR

City SAVANNAH	State GA	Zip Code 31410-
------------------	-------------	--------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	06	/	2016

Transaction ID : SA11A.477335

Amount of Each Receipt this Period
250.00

Memo Item CONTRIBUTION

C. ROFF, J., HUGH, MR., JR.
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 600 TRAVIS STREET
SUITE 7070

City HOUSTON	State TX	Zip Code 77002-2919
-----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) ROFF RESOURCES LLC	Occupation (for Individual) CHAIRMAN OF THE BOARD
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
1100.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	25	/	2016

Transaction ID : SA11A.447264

Amount of Each Receipt this Period
400.00

Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	1650.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3109 OF 4311
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. ROGERS, ANDY, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 8 CYPRESS

City KENTFIELD	State CA	Zip Code 94904-1018
-------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) SELF EMPLOYED	Occupation (for Individual) REAL ESTATE
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		24		2016

Transaction ID : SA11A.449537

Amount of Each Receipt this Period
500.00

Memo Item
CONTRIBUTION

B. ROGERS, EDWARD, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1008 BALES AVENUE

City WINSLOW	State AZ	Zip Code 86047-4412
-----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
295.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		26		2016

Transaction ID : SA11A.451353

Amount of Each Receipt this Period
30.00

Memo Item
CONTRIBUTION

C. ROGERS, HENRY, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address BAYMEADOWS RD., STW 12-177

City JACKSONVILLE	State FL	Zip Code 32256-
----------------------	-------------	--------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
825.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		20		2016

Transaction ID : SA11A.442554

Amount of Each Receipt this Period
50.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	580.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3110 OF 4311
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
Team Ryan

A. ROGERS, HENRY, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address **BAYMEADOWS RD., STW 12-177**

City JACKSONVILLE	State FL	Zip Code 32256-
-----------------------------	--------------------	---------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
--	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **825.00**

Date of Receipt
10 / 20 / 2016

Transaction ID : SA11A.442555

Amount of Each Receipt this Period
50.00

Memo Item
CONTRIBUTION

B. ROGERS, HENRY, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address **BAYMEADOWS RD., STW 12-177**

City JACKSONVILLE	State FL	Zip Code 32256-
-----------------------------	--------------------	---------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
--	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **825.00**

Date of Receipt
10 / 31 / 2016

Transaction ID : SA11A.463583

Amount of Each Receipt this Period
50.00

Memo Item
CONTRIBUTION

C. ROGERS, HENRY, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address **BAYMEADOWS RD., STW 12-177**

City JACKSONVILLE	State FL	Zip Code 32256-
-----------------------------	--------------------	---------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
--	---

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼ **825.00**

Date of Receipt
11 / 04 / 2016

Transaction ID : SA11A.473562

Amount of Each Receipt this Period
50.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	150.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3111 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
-----------------------------	-----------------------------	-----------------------------

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
Team Ryan

A. ROGERS, JON, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1731 AVIATION BLVD
 City LINCOLN State CA Zip Code 95648-9317
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RFC Occupation (for Individual) MANAGER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 2150.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 26 / 2016
Transaction ID : SA11A.450229
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION

B. ROGERS, JON, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1731 AVIATION BLVD
 City LINCOLN State CA Zip Code 95648-9317
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RFC Occupation (for Individual) MANAGER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 2150.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 26 / 2016
Transaction ID : SA11A.450230
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION

C. ROGERS, JON, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1731 AVIATION BLVD
 City LINCOLN State CA Zip Code 95648-9317
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RFC Occupation (for Individual) MANAGER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 2150.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 28 / 2016
Transaction ID : SA11A.461449
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	300.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3112 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. ROGERS, JON, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1731 AVIATION BLVD
 City LINCOLN State CA Zip Code 95648-9317
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RFC Occupation (for Individual) MANAGER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 2150.00

Date of Receipt
 11 / 01 / 2016
Transaction ID : SA11A.462389
 Amount of Each Receipt this Period
 250.00
 Memo Item
 CONTRIBUTION

B. ROGERS, JON, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1731 AVIATION BLVD
 City LINCOLN State CA Zip Code 95648-9317
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RFC Occupation (for Individual) MANAGER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 2150.00

Date of Receipt
 11 / 04 / 2016
Transaction ID : SA11A.472863
 Amount of Each Receipt this Period
 50.00
 Memo Item
 CONTRIBUTION

C. ROGERS, JON, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1731 AVIATION BLVD
 City LINCOLN State CA Zip Code 95648-9317
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RFC Occupation (for Individual) MANAGER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 2150.00

Date of Receipt
 11 / 08 / 2016
Transaction ID : SA11A.479693
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	400.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3113 OF 4311
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. ROGERS, WILLIAM, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 312 DAWSON FOREST RD E

City DAWSONVILLE	State GA	Zip Code 30534-6531
---------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) OLD HICKORY CLAY COMPANY	Occupation (for Individual) VP - SALES
---	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
225.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	02	/	2016

Transaction ID : SA11A.466695

Amount of Each Receipt this Period
25.00

Memo Item
CONTRIBUTION

B. ROGSTAD, THOMAS, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 7709 NEVIA WAY

City LOUISVILLE	State KY	Zip Code 40220-5716
--------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
357.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	02	/	2016

Transaction ID : SA11A.465883

Amount of Each Receipt this Period
50.00

Memo Item
CONTRIBUTION

C. ROHAN, NAOMI, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 241 WEST SLOUP DRIVE

City WAHOO	State NE	Zip Code 68066-2509
---------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
320.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	30	/	2016

Transaction ID : SA11A.459567

Amount of Each Receipt this Period
25.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	100.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3114 OF 4311
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. ROHAN, NAOMI, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 241 WEST SLOUP DRIVE

City WAHOO	State NE	Zip Code 68066-2509
---------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
320.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		30		2016

Transaction ID : SA11A.459568

Amount of Each Receipt this Period
25.00

Memo Item
CONTRIBUTION

B. ROHAN, NAOMI, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 241 WEST SLOUP DRIVE

City WAHOO	State NE	Zip Code 68066-2509
---------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
320.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		30		2016

Transaction ID : SA11A.459571

Amount of Each Receipt this Period
40.00

Memo Item
CONTRIBUTION

C. ROHLOFF, ROBERT, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 88 CHESHIRE ROAD

City BETHANY	State CT	Zip Code 06524-3114
-----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		28		2016

Transaction ID : SA11A.454736

Amount of Each Receipt this Period
250.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	315.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3115 OF 4311
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. ROJAS, ISABEL, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 2721 ELDER RD
ELDER RD

City KATY State TX Zip Code 77493-1218

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
450.00

Date of Receipt
11 / 03 / 2016
Transaction ID : SA11A.468634

Amount of Each Receipt this Period
50.00

Memo Item CONTRIBUTION

B. ROJAS, ISABEL, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 2721 ELDER RD
ELDER RD

City KATY State TX Zip Code 77493-1218

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
450.00

Date of Receipt
11 / 03 / 2016
Transaction ID : SA11A.468635

Amount of Each Receipt this Period
50.00

Memo Item CONTRIBUTION

C. ROJAS, ISABEL, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 2721 ELDER RD
ELDER RD

City KATY State TX Zip Code 77493-1218

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
450.00

Date of Receipt
11 / 04 / 2016
Transaction ID : SA11A.473040

Amount of Each Receipt this Period
25.00

Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 125.00

TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3116 OF 4311
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. ROLLER, JOE, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 2324 SHELTERWOOD DR
City DAYTON State OH Zip Code 45409-1914
FEC ID number of contributing federal political committee. **C**
Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 485.00

Date of Receipt 10 / 31 / 2016
Transaction ID : SA11A.463324
Amount of Each Receipt this Period 30.00
 Memo Item CONTRIBUTION

B. ROLLER, JOE, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 2324 SHELTERWOOD DR
City DAYTON State OH Zip Code 45409-1914
FEC ID number of contributing federal political committee. **C**
Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 485.00

Date of Receipt 11 / 05 / 2016
Transaction ID : SA11A.479207
Amount of Each Receipt this Period 30.00
 Memo Item CONTRIBUTION

C. ROLLER, JOE, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 2324 SHELTERWOOD DR
City DAYTON State OH Zip Code 45409-1914
FEC ID number of contributing federal political committee. **C**
Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
Receipt For: Primary General Other (specify)
Aggregate Year-to-Date ▼ 485.00

Date of Receipt 11 / 05 / 2016
Transaction ID : SA11A.479217
Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶ 85.00
TOTAL This Period (last page this line number only).....▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3117 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. ROMANOW, HOWARD, L., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 205 E 88TH ST APT 5M
 City NEW YORK State NY Zip Code 10128-3324
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) INFORMATION REQUESTED PER BEST EFFORTS Occupation (for Individual) INFORMATION REQUESTED PER BE
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 5000.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 18 / 2016
Transaction ID : SA11A.480991
 Amount of Each Receipt this Period
 5000.00
 Memo Item
 CONTRIBUTION

B. ROMAN, PAM, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1301 EUROPEAN DR.
 City HENDERSON State NV Zip Code 89052-4017
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 400.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 26 / 2016
Transaction ID : SA11A.449781
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION

C. ROMAN, PAM, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1301 EUROPEAN DR.
 City HENDERSON State NV Zip Code 89052-4017
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 400.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 04 / 2016
Transaction ID : SA11A.470857
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	5200.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3118 OF 4311
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. ROMAN, PAM, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1301 EUROPEAN DR.

City HENDERSON	State NV	Zip Code 89052-4017
-------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
400.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	04	/	2016

Transaction ID : SA11A.471524

Amount of Each Receipt this Period
100.00

Memo Item CONTRIBUTION

B. ROMBALSKI, RONALD, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 17136 NW LUCY REEDER ROAD

City PORTLAND	State OR	Zip Code 97231-1343
------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	24	/	2016

Transaction ID : SA11A.449367

Amount of Each Receipt this Period
250.00

Memo Item CONTRIBUTION

C. ROMING, CHUCK, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1867 GREENE 733 RD

City PARAGOULD	State AR	Zip Code 72450-
-------------------	-------------	--------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) CYIENT	Occupation (for Individual) SAL
---	------------------------------------

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	07	/	2016

Transaction ID : SA11A.475876

Amount of Each Receipt this Period
100.00

Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	450.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3119 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. ROMNEY, ALITA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 6709 RED JACKET RD
 City SPRINGFIELD State VA Zip Code 22152-2636
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 11 / 02 / 2016
Transaction ID : SA11A.466659
 Amount of Each Receipt this Period
 250.00
 Memo Item
 CONTRIBUTION

B. RONALDS, NICHOLAS, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 623 WASHINGTON AVE
 City WILMETTE State IL Zip Code 60091-1969
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) ASIFMA Occupation (for Individual) ADVISOR
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 11 / 01 / 2016
Transaction ID : SA11A.462980
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION

C. RONDA, BARBARA, C., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1117 SW 139TH CT
 City MIAMI State FL Zip Code 33184-2777
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) INFORMATION REQUESTED PER BEST EFFORTS Occupation (for Individual) INFORMATION REQUESTED PER BEST EFFORTS
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 10 / 24 / 2016
Transaction ID : SA11A.443507
 Amount of Each Receipt this Period
 500.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	850.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3120 OF 4311
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. ROOB, EDWARD, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 841 WOODBINE LANE

City NORTHBROOK State IL Zip Code 60062-3439

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 1000.00

Date of Receipt 10 / 27 / 2016
Transaction ID : SA11A.453323

Amount of Each Receipt this Period 1000.00

Memo Item CONTRIBUTION

B. ROOD, JOHN, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 2306 STATELY OAK

City KINGWOOD State TX Zip Code 77345-1898

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) CAP/CFP

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt 11 / 06 / 2016
Transaction ID : SA11A.477469

Amount of Each Receipt this Period 250.00

Memo Item CONTRIBUTION

C. ROODHOUSE, JAMES, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 12729 NE 28TH STREET

City BELLEVUE State WA Zip Code 98005-1701

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 700.00

Date of Receipt 10 / 25 / 2016
Transaction ID : SA11A.451836

Amount of Each Receipt this Period 100.00

Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶ 1350.00

TOTAL This Period (last page this line number only).....▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3121 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. ROODHOUSE, JAMES, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 12729 NE 28TH STREET
 City BELLEVUE State WA Zip Code 98005-1701
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 700.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 25 / 2016
Transaction ID : SA11A.451849
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION

B. ROODHOUSE, JAMES, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 12729 NE 28TH STREET
 City BELLEVUE State WA Zip Code 98005-1701
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 700.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 31 / 2016
Transaction ID : SA11A.464808
 Amount of Each Receipt this Period
 50.00
 Memo Item
 CONTRIBUTION

C. ROODHOUSE, JAMES, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 12729 NE 28TH STREET
 City BELLEVUE State WA Zip Code 98005-1701
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 700.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 31 / 2016
Transaction ID : SA11A.464816
 Amount of Each Receipt this Period
 50.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	200.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3122 OF 4311
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. ROOK, RICHARD, S., MR.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 500 GILLS CREEK PARKWAY
APT. 2015

City COLUMBIA State SC Zip Code 29209-1243

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) AFLAC Occupation (for Individual) ACTUARY

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
500.00

Date of Receipt
11 / 04 / 2016
Transaction ID : SA11A.467437

Amount of Each Receipt this Period
500.00

Memo Item
CONTRIBUTION

B. ROONEY, KATHLEEN, C., ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 800 ADMIRALTY

City NAPLES State FL Zip Code 34102-

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) GITANA PRODUCTIONS Occupation (for Individual) WRITER

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
26655.04

Date of Receipt
10 / 24 / 2016
Transaction ID : SA11A.443503

Amount of Each Receipt this Period
25000.00

Memo Item
CONTRIBUTION

C. ROONEY, KATHLEEN, C., ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 800 ADMIRALTY

City NAPLES State FL Zip Code 34102-

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) GITANA PRODUCTIONS Occupation (for Individual) WRITER

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
26655.04

Date of Receipt
10 / 31 / 2016
Transaction ID : SA11A.480987

Amount of Each Receipt this Period
1655.04

Memo Item
CONTRIBUTION
IN-KIND: JFC EVENT CATERING & VALET SERVICE

SUBTOTAL of Receipts This Page (optional)..... ▶ 27155.04

TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3123 OF 4311
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. ROONEY, WALDEN, J., ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 5 MOUNTAIN VIEW BOULEVARD

City SOUTH BURLINGTON	State VT	Zip Code 05403-5825
--------------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NEW YORK LIFE	Occupation (for Individual) INSURANCE AGENT
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
232.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	07	/	2016

Transaction ID : SA11A.476074

Amount of Each Receipt this Period
25.00

Memo Item CONTRIBUTION

B. ROONEY, WALDEN, J., ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 5 MOUNTAIN VIEW BOULEVARD

City SOUTH BURLINGTON	State VT	Zip Code 05403-5825
--------------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NEW YORK LIFE	Occupation (for Individual) INSURANCE AGENT
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
232.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	07	/	2016

Transaction ID : SA11A.476076

Amount of Each Receipt this Period
25.00

Memo Item CONTRIBUTION

C. ROOT, JAMES, W., MR.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 215 ARMSTRONG DRIVE

City GEORGETOWN	State TX	Zip Code 78633-5133
--------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
850.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	24	/	2016

Transaction ID : SA11A.449539

Amount of Each Receipt this Period
100.00

Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	150.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3124 OF 4311
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. ROSE, ANNE, M., ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 2120 ROBINS :LANE SE
UNIT 31

City SALEM State OR Zip Code 97306-2621

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
480.00

Date of Receipt
11 / 05 / 2016
Transaction ID : SA11A.478607

Amount of Each Receipt this Period
25.00

Memo Item CONTRIBUTION

B. ROSE, EDWARD, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 13 CLARK ROAD
SUITE #4

City HINGHAM State MA Zip Code 02043-1949

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) ROCKY MOUNTAIN SPRING WATER CO., INC. Occupation (for Individual) EXECUTIVE

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
230.00

Date of Receipt
10 / 25 / 2016
Transaction ID : SA11A.448454

Amount of Each Receipt this Period
50.00

Memo Item CONTRIBUTION

C. ROSE, EDWARD, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 13 CLARK ROAD
SUITE #4

City HINGHAM State MA Zip Code 02043-1949

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) ROCKY MOUNTAIN SPRING WATER CO., INC. Occupation (for Individual) EXECUTIVE

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
230.00

Date of Receipt
11 / 03 / 2016
Transaction ID : SA11A.468989

Amount of Each Receipt this Period
25.00

Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶ 100.00

TOTAL This Period (last page this line number only).....▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3125 OF 4311
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. ROSE, EDWARD, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 13 CLARK ROAD
SUITE #4

City HINGHAM State MA Zip Code 02043-1949

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) ROCKY MOUNTAIN SPRING WATER CO., INC. Occupation (for Individual) EXECUTIVE

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 230.00

Date of Receipt 11 / 04 / 2016
Transaction ID : SA11A.472108

Amount of Each Receipt this Period 50.00

Memo Item CONTRIBUTION

B. ROSE, GARY, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 23716 JAYHAWKER LANE

City DIAMOND BAR State CA Zip Code 91765-1124

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) ROSE & ASSOCIATES Occupation (for Individual) ENGINEER

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 350.00

Date of Receipt 10 / 21 / 2016
Transaction ID : SA11A.447213

Amount of Each Receipt this Period 50.00

Memo Item CONTRIBUTION

C. ROSE, GARY, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 23716 JAYHAWKER LANE

City DIAMOND BAR State CA Zip Code 91765-1124

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) ROSE & ASSOCIATES Occupation (for Individual) ENGINEER

Receipt For: Primary General Other (specify)

Aggregate Year-to-Date ▼ 350.00

Date of Receipt 10 / 21 / 2016
Transaction ID : SA11A.447218

Amount of Each Receipt this Period 50.00

Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶ 150.00

TOTAL This Period (last page this line number only).....▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3126 OF 4311
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. ROSE, GARY, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 23716 JAYHAWKER LANE

City DIAMOND BAR	State CA	Zip Code 91765-1124
---------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) ROSE & ASSOCIATES	Occupation (for Individual) ENGINEER
--	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
350.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		31		2016

Transaction ID : SA11A.457805

Amount of Each Receipt this Period
25.00

Memo Item
CONTRIBUTION

B. ROSE, GARY, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 23716 JAYHAWKER LANE

City DIAMOND BAR	State CA	Zip Code 91765-1124
---------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) ROSE & ASSOCIATES	Occupation (for Individual) ENGINEER
--	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
350.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		31		2016

Transaction ID : SA11A.457806

Amount of Each Receipt this Period
25.00

Memo Item
CONTRIBUTION

C. ROSE, GARY, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 23716 JAYHAWKER LANE

City DIAMOND BAR	State CA	Zip Code 91765-1124
---------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) ROSE & ASSOCIATES	Occupation (for Individual) ENGINEER
--	---

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
350.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11		04		2016

Transaction ID : SA11A.473350

Amount of Each Receipt this Period
50.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	100.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3127 OF 4311
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. ROSE, JOHN, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 11 WEBSTER HEIGHTS DRIVE

City GREEN BAY	State WI	Zip Code 54301-2327
-------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) SELF EMPLOYED	Occupation (for Individual) ATTORNEY
--	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	04	/	2016

Transaction ID : SA11A.472955

Amount of Each Receipt this Period
100.00

Memo Item CONTRIBUTION

B. ROSE, JONATHAN, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 5955 RANLEIGH MANOR DRIVE

City MCLEAN	State VA	Zip Code 22101-2428
----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
300.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	24	/	2016

Transaction ID : SA11A.445879

Amount of Each Receipt this Period
300.00

Memo Item CONTRIBUTION

C. ROSELLINI, CONNIE, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 11084 SIERRA PALM COURT

City FORT MYERS	State FL	Zip Code 33966-5753
--------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	28	/	2016

Transaction ID : SA11A.456111

Amount of Each Receipt this Period
100.00

Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	500.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3128 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
-----------------------------	-----------------------------	-----------------------------

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NAME OF COMMITTEE (In Full)
Team Ryan

A. ROSELLINI, CONNIE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 11084 SIERRA PALM COURT
 City FORT MYERS State FL Zip Code 33966-5753
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 04 / 2016
Transaction ID : SA11A.470724
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION

B. ROSENBERGER, COLLEEN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 8125 BOGEY AVE
 City HEMET State CA Zip Code 92545-9336
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 26 / 2016
Transaction ID : SA11A.449834
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION

C. ROSENBERGER, COLLEEN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 8125 BOGEY AVE
 City HEMET State CA Zip Code 92545-9336
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 26 / 2016
Transaction ID : SA11A.449843
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	300.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3129 OF 4311
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. ROSENBERGER, COLLEEN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 8125 BOGEY AVE
 City HEMET State CA Zip Code 92545-9336
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 10 / 26 / 2016
Transaction ID : SA11A.449844
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

B. ROSENTHAL, GARY, L., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3929 DEL MONTE DR
 City HOUSTON State TX Zip Code 77019-1001
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) THE STERLING GROUP Occupation (for Individual) EXECUTIVE
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 10400.00

Date of Receipt 10 / 28 / 2016
Transaction ID : SA11A.449693
 Amount of Each Receipt this Period 10400.00
 Memo Item CONTRIBUTION

C. ROSENHAUER, JAMES, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 7800 HACKAMORE DRIVE
 City POTOMAC State MD Zip Code 20854-3823
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) HOGAN LOVELLS US LLP Occupation (for Individual) ATTORNEY
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 10 / 24 / 2016
Transaction ID : SA11A.445786
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶ 10750.00
TOTAL This Period (last page this line number only).....▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3130 OF 4311
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
Team Ryan

A. ROSENFELD, LEA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 7975 W 4TH ST
 City LOS ANGELES State CA Zip Code 90048-4412
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) LEA ROSENFELD Occupation (for Individual) MS.
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 450.00

Date of Receipt 10 / 27 / 2016
Transaction ID : SA11A.453843
 Amount of Each Receipt this Period 75.00
 Memo Item CONTRIBUTION

B. ROSENFELD, LEA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 7975 W 4TH ST
 City LOS ANGELES State CA Zip Code 90048-4412
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) LEA ROSENFELD Occupation (for Individual) MS.
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 450.00

Date of Receipt 11 / 04 / 2016
Transaction ID : SA11A.472929
 Amount of Each Receipt this Period 75.00
 Memo Item CONTRIBUTION

C. ROSENDIN, RAYMOND, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 443 WHISKEY HILL RD.
 City WOODSIDE State CA Zip Code 94062-2535
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 350.00

Date of Receipt 10 / 31 / 2016
Transaction ID : SA11A.458547
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶ 250.00
TOTAL This Period (last page this line number only).....▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3131 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. ROSEN, RICHARD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO BOX 1246
 City MCLEAN State VA Zip Code 22101-1246
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) ATTORNEY
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 450.00

Date of Receipt 10 / 25 / 2016
Transaction ID : SA11A.448767
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

B. ROSEN, RICHARD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO BOX 1246
 City MCLEAN State VA Zip Code 22101-1246
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) ATTORNEY
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 450.00

Date of Receipt 10 / 27 / 2016
Transaction ID : SA11A.457103
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

C. ROSEN, RICHARD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO BOX 1246
 City MCLEAN State VA Zip Code 22101-1246
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) ATTORNEY
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 450.00

Date of Receipt 11 / 01 / 2016
Transaction ID : SA11A.467411
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶ 100.00
TOTAL This Period (last page this line number only).....▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3132 OF 4311
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. ROSENAU, RUTH, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 39 VALLEY BLUFF LN

City SIMPSONVILLE	State SC	Zip Code 29680-7658
----------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
275.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	20	/	2016

Transaction ID : SA11A.442610

Amount of Each Receipt this Period
10.00

Memo Item CONTRIBUTION

B. ROSENAU, RUTH, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 39 VALLEY BLUFF LN

City SIMPSONVILLE	State SC	Zip Code 29680-7658
----------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
275.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	26	/	2016

Transaction ID : SA11A.450497

Amount of Each Receipt this Period
25.00

Memo Item CONTRIBUTION

C. ROSENAU, RUTH, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 39 VALLEY BLUFF LN

City SIMPSONVILLE	State SC	Zip Code 29680-7658
----------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
275.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	01	/	2016

Transaction ID : SA11A.463130

Amount of Each Receipt this Period
10.00

Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	45.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3133 OF 4311
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. ROSENAU, RUTH, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 39 VALLEY BLUFF LN

City SIMPSONVILLE	State SC	Zip Code 29680-7658
----------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
275.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	01	/	2016

Transaction ID : SA11A.463162

Amount of Each Receipt this Period
10.00

Memo Item CONTRIBUTION

B. ROSENAU, RUTH, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 39 VALLEY BLUFF LN

City SIMPSONVILLE	State SC	Zip Code 29680-7658
----------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
275.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	02	/	2016

Transaction ID : SA11A.466149

Amount of Each Receipt this Period
10.00

Memo Item CONTRIBUTION

C. ROSENAU, RUTH, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 39 VALLEY BLUFF LN

City SIMPSONVILLE	State SC	Zip Code 29680-7658
----------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
275.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	05	/	2016

Transaction ID : SA11A.478339

Amount of Each Receipt this Period
10.00

Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	30.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3134 OF 4311
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. ROSEN, RUTH, S., ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 631 MAITLAND AVENUE

City TEANECK	State NJ	Zip Code 07666-2263
-----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) INFORMATION REQUESTED PER BEST EFFORTS	Occupation (for Individual) INFORMATION REQUESTED PER BE
---	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
675.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		31		2016

Transaction ID : SA11A.457345

Amount of Each Receipt this Period
675.00

Memo Item
CONTRIBUTION

B. ROSICA, JOHN, A., ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 10 BALMORAL LANE

City SCOTCH PLAINS	State NJ	Zip Code 07076-2203
-----------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) EMERGENCY PHYSICIANS OF ST CLARES LLC	Occupation (for Individual) PHYSICIAN
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		25		2016

Transaction ID : SA11A.447284

Amount of Each Receipt this Period
500.00

Memo Item
CONTRIBUTION

C. ROSS, DENNIS, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 703 1ST AVE SE

City DODGE CENTER	State MN	Zip Code 55927-9149
----------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) RDM	Occupation (for Individual) OWNER
--	--------------------------------------

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
350.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		21		2016

Transaction ID : SA11A.444390

Amount of Each Receipt this Period
100.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	1275.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3135 OF 4311
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. ROSS, DOUGLAS, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 3710 SCHOONER RDG

City ALPHARETTA	State GA	Zip Code 30005-4269
--------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1000.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
10		22		2016

Transaction ID : SA11A.447011

Amount of Each Receipt this Period
1000.00

Memo Item CONTRIBUTION

B. ROSS, GEORGE, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 5925 E. HIDDEN SPRINGS RD

City CAVE CREEK	State AZ	Zip Code 85331-7736
--------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
475.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
11		05		2016

Transaction ID : SA11A.478579

Amount of Each Receipt this Period
100.00

Memo Item CONTRIBUTION

C. ROSS, GEORGE, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 5925 E. HIDDEN SPRINGS RD

City CAVE CREEK	State AZ	Zip Code 85331-7736
--------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
475.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
11		05		2016

Transaction ID : SA11A.478587

Amount of Each Receipt this Period
100.00

Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	1200.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3136 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
-----------------------------	-----------------------------	-----------------------------

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NAME OF COMMITTEE (In Full)
Team Ryan

A. ROSS, JAN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3810 LAW STREET
 303
 City HOUSTON State TX Zip Code 77005-1171
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 450.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 22 / 2016
Transaction ID : SA11A.446895
 Amount of Each Receipt this Period
 50.00
 Memo Item
 CONTRIBUTION

B. ROSS, JAN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3810 LAW STREET
 303
 City HOUSTON State TX Zip Code 77005-1171
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 450.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 01 / 2016
Transaction ID : SA11A.462775
 Amount of Each Receipt this Period
 50.00
 Memo Item
 CONTRIBUTION

C. ROSS, JAN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3810 LAW STREET
 303
 City HOUSTON State TX Zip Code 77005-1171
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 450.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 07 / 2016
Transaction ID : SA11A.480410
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	200.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3137 OF 4311
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. ROSS, ROBERT, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 304 JOHN HANCOCK BLVD

City LINCOLN UNIVERSITY	State PA	Zip Code 19352-9311
----------------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
300.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		31		2016

Transaction ID : SA11A.463215

Amount of Each Receipt this Period
50.00

Memo Item CONTRIBUTION

B. ROSS, ROBERT, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 304 JOHN HANCOCK BLVD

City LINCOLN UNIVERSITY	State PA	Zip Code 19352-9311
----------------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
300.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		31		2016

Transaction ID : SA11A.463235

Amount of Each Receipt this Period
25.00

Memo Item CONTRIBUTION

C. ROSS, ROBERT, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 304 JOHN HANCOCK BLVD

City LINCOLN UNIVERSITY	State PA	Zip Code 19352-9311
----------------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
300.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		31		2016

Transaction ID : SA11A.463236

Amount of Each Receipt this Period
25.00

Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	100.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3138 OF 4311
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. ROSSI, DIANE, G., MS.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 9572 W CAPRI DRIVE

City LITTLETON	State CO	Zip Code 80123-3413
-------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
300.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		25		2016

Transaction ID : SA11A.447451

Amount of Each Receipt this Period
50.00

Memo Item CONTRIBUTION

B. ROSSI, DIANE, G., MS.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 9572 W CAPRI DRIVE

City LITTLETON	State CO	Zip Code 80123-3413
-------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
300.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11		14		2016

Transaction ID : SA11A.468276

Amount of Each Receipt this Period
50.00

Memo Item CONTRIBUTION

C. ROTH, DON, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 8 COVENTRY LANE

City LINCOLNSHIRE	State IL	Zip Code 60069-3904
----------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) AMPLIVVOX	Occupation (for Individual) CEO
--	------------------------------------

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
400.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		28		2016

Transaction ID : SA11A.456112

Amount of Each Receipt this Period
100.00

Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	200.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3139 OF 4311
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. ROTH, DON, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 8 COVENTRY LANE

City LINCOLNSHIRE	State IL	Zip Code 60069-3904
----------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) AMPLIVVOX	Occupation (for Individual) CEO
--	------------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
400.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11		04		2016

Transaction ID : SA11A.470681

Amount of Each Receipt this Period
100.00

Memo Item
CONTRIBUTION

B. ROTH, KENNETH, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 13636 JACKRABBIT RD.

City POWAY	State CA	Zip Code 92064-1702
---------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
255.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11		01		2016

Transaction ID : SA11A.463112

Amount of Each Receipt this Period
30.00

Memo Item
CONTRIBUTION

C. ROTH, RICHARD, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1055 LITCHFIELD PL

City GALLATIN	State TN	Zip Code 37066-5611
------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
225.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		27		2016

Transaction ID : SA11A.454241

Amount of Each Receipt this Period
100.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	230.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3140 OF 4311
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. ROTH, RICHARD, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1055 LITCHFIELD PL

City GALLATIN	State TN	Zip Code 37066-5611
------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
225.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	01	/	2016

Transaction ID : SA11A.463084

Amount of Each Receipt this Period
50.00

Memo Item CONTRIBUTION

B. ROTH, STEPHEN, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 4705 LOCUST HILL CT

City BETHESDA	State MD	Zip Code 20814-3959
------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) SUTHERLAND ASBILL & BRENNAN LLP	Occupation (for Individual) ATTORNEY
--	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	24	/	2016

Transaction ID : SA11A.449200

Amount of Each Receipt this Period
250.00

Memo Item CONTRIBUTION

C. ROTHER, DAVID, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 6145 AMAYA DRIVE

City LA MESA	State CA	Zip Code 91942-4164
-----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	26	/	2016

Transaction ID : SA11A.449707

Amount of Each Receipt this Period
250.00

Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	550.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3141 OF 4311
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. ROTHSTEIN, JEFFREY, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address **48 WESTGATE**

City LAGUNA NIGUEL	State CA	Zip Code 92677-9200
------------------------------	--------------------	-------------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
--	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
225.00

Date of Receipt
11 / 01 / 2016

Transaction ID : SA11A.462194

Amount of Each Receipt this Period
50.00

Memo Item
CONTRIBUTION

B. ROTHSTEIN, JEFFREY, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address **48 WESTGATE**

City LAGUNA NIGUEL	State CA	Zip Code 92677-9200
------------------------------	--------------------	-------------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
--	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
225.00

Date of Receipt
11 / 01 / 2016

Transaction ID : SA11A.462195

Amount of Each Receipt this Period
50.00

Memo Item
CONTRIBUTION

C. ROTTA, WILLIAM, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address **E892 LAURITZEN LANE**

City WAUPACA	State WI	Zip Code 54981-9474
------------------------	--------------------	-------------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) ROTTA POWDERCOATING, LLC	Occupation (for Individual) ELECTRICIAN
--	---

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
245.00

Date of Receipt
10 / 26 / 2016

Transaction ID : SA11A.449890

Amount of Each Receipt this Period
30.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	130.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3142 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. ROTTA, WILLIAM, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address E892 LAURITZEN LANE
 City WAUPACA State WI Zip Code 54981-9474
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) ROTTA POWDERCOATING, LLC Occupation (for Individual) ELECTRICIAN
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 245.00

Date of Receipt 10 / 26 / 2016
Transaction ID : SA11A.449891
 Amount of Each Receipt this Period 30.00
 Memo Item CONTRIBUTION

B. ROTTA, WILLIAM, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address E892 LAURITZEN LANE
 City WAUPACA State WI Zip Code 54981-9474
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) ROTTA POWDERCOATING, LLC Occupation (for Individual) ELECTRICIAN
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 245.00

Date of Receipt 11 / 02 / 2016
Transaction ID : SA11A.465965
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

C. ROTTA, WILLIAM, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address E892 LAURITZEN LANE
 City WAUPACA State WI Zip Code 54981-9474
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) ROTTA POWDERCOATING, LLC Occupation (for Individual) ELECTRICIAN
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 245.00

Date of Receipt 11 / 02 / 2016
Transaction ID : SA11A.465969
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	130.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3143 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. ROTZ, BARBARA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5753 HWY 85 N 2913
 City CRESTVIEW State FL Zip Code 32536-9365
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 275.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 23 / 2016
Transaction ID : SA11A.446323
 Amount of Each Receipt this Period
 25.00
 Memo Item
 CONTRIBUTION

B. ROTZ, BARBARA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5753 HWY 85 N 2913
 City CRESTVIEW State FL Zip Code 32536-9365
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 275.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 23 / 2016
Transaction ID : SA11A.446324
 Amount of Each Receipt this Period
 25.00
 Memo Item
 CONTRIBUTION

C. ROTZ, BARBARA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5753 HWY 85 N 2913
 City CRESTVIEW State FL Zip Code 32536-9365
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 275.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 23 / 2016
Transaction ID : SA11A.446325
 Amount of Each Receipt this Period
 25.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 75.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3144 OF 4311
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. ROTZ, BARBARA, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 5753 HWY 85 N 2913

City CRESTVIEW	State FL	Zip Code 32536-9365
FEC ID number of contributing federal political committee. C		
Name of Employer (for Individual) NONE		Occupation (for Individual) RETIRED
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 275.00

Date of Receipt
10 / 25 / 2016
Transaction ID : SA11A.448415

Amount of Each Receipt this Period
25.00

Memo Item
CONTRIBUTION

B. ROTZ, BARBARA, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 5753 HWY 85 N 2913

City CRESTVIEW	State FL	Zip Code 32536-9365
FEC ID number of contributing federal political committee. C		
Name of Employer (for Individual) NONE		Occupation (for Individual) RETIRED
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 275.00

Date of Receipt
10 / 28 / 2016
Transaction ID : SA11A.455280

Amount of Each Receipt this Period
25.00

Memo Item
CONTRIBUTION

C. ROTZ, BARBARA, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 5753 HWY 85 N 2913

City CRESTVIEW	State FL	Zip Code 32536-9365
FEC ID number of contributing federal political committee. C		
Name of Employer (for Individual) NONE		Occupation (for Individual) RETIRED
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		Aggregate Year-to-Date ▼ 275.00

Date of Receipt
11 / 05 / 2016
Transaction ID : SA11A.478335

Amount of Each Receipt this Period
25.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	75.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3145 OF 4311
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. ROTZ, BARBARA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5753 HWY 85 N 2913
 City CRESTVIEW State FL Zip Code 32536-9365
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 275.00

Date of Receipt **11 / 04 / 2016**
Transaction ID : SA11A.479610
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

B. ROUGH, RONALD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1658 W. MILLING ST.
 City LANCASTER State CA Zip Code 93534-2838
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) LM Occupation (for Individual) SA
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 750.00

Date of Receipt **10 / 24 / 2016**
Transaction ID : SA11A.446203
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

C. ROUGH, RONALD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1658 W. MILLING ST.
 City LANCASTER State CA Zip Code 93534-2838
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) LM Occupation (for Individual) SA
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 750.00

Date of Receipt **10 / 27 / 2016**
Transaction ID : SA11A.452701
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 175.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3146 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. ROUGH, RONALD, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 1658 W. MILLING ST.
City LANCASTER State CA Zip Code 93534-2838
FEC ID number of contributing federal political committee. **C**
Name of Employer (for Individual) LM Occupation (for Individual) SA
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 750.00

Date of Receipt 11 / 02 / 2016
Transaction ID : SA11A.465996
Amount of Each Receipt this Period 50.00
 Memo Item
CONTRIBUTION

B. ROUGH, RONALD, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 1658 W. MILLING ST.
City LANCASTER State CA Zip Code 93534-2838
FEC ID number of contributing federal political committee. **C**
Name of Employer (for Individual) LM Occupation (for Individual) SA
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 750.00

Date of Receipt 11 / 04 / 2016
Transaction ID : SA11A.470744
Amount of Each Receipt this Period 50.00
 Memo Item
CONTRIBUTION

C. ROUGH, RONALD, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 1658 W. MILLING ST.
City LANCASTER State CA Zip Code 93534-2838
FEC ID number of contributing federal political committee. **C**
Name of Employer (for Individual) LM Occupation (for Individual) SA
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 750.00

Date of Receipt 11 / 04 / 2016
Transaction ID : SA11A.472625
Amount of Each Receipt this Period 100.00
 Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 200.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3147 OF 4311
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. ROUGH, RONALD, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1658 W. MILLING ST.

City LANCASTER	State CA	Zip Code 93534-2838
-------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) LM	Occupation (for Individual) SA
---	-----------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
750.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	06	/	2016

Transaction ID : SA11A.477342

Amount of Each Receipt this Period
25.00

Memo Item
CONTRIBUTION

B. ROUNDS, CARLTON, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 2459 FRANCISCAN DRIVE #29

City CLEARWATER	State FL	Zip Code 33763-3252
--------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
650.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	25	/	2016

Transaction ID : SA11A.448747

Amount of Each Receipt this Period
25.00

Memo Item
CONTRIBUTION

C. ROUNDS, CARLTON, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 2459 FRANCISCAN DRIVE #29

City CLEARWATER	State FL	Zip Code 33763-3252
--------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
650.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	26	/	2016

Transaction ID : SA11A.450116

Amount of Each Receipt this Period
25.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	75.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3148 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. ROUNDS, CARLTON, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2459 FRANCISCAN DRIVE #29
 City CLEARWATER State FL Zip Code 33763-3252
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 650.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 25 / 2016
Transaction ID : SA11A.451576
 Amount of Each Receipt this Period
 25.00
 Memo Item CONTRIBUTION

B. ROUNDS, CARLTON, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2459 FRANCISCAN DRIVE #29
 City CLEARWATER State FL Zip Code 33763-3252
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 650.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 27 / 2016
Transaction ID : SA11A.452594
 Amount of Each Receipt this Period
 25.00
 Memo Item CONTRIBUTION

C. ROUNDS, CARLTON, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2459 FRANCISCAN DRIVE #29
 City CLEARWATER State FL Zip Code 33763-3252
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 650.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 04 / 2016
Transaction ID : SA11A.471998
 Amount of Each Receipt this Period
 25.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	75.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3149 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
Team Ryan

A. ROUNDS, CARLTON, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2459 FRANCISCAN DRIVE #29
 City CLEARWATER State FL Zip Code 33763-3252
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 650.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 07 / 2016
Transaction ID : SA11A.475092
 Amount of Each Receipt this Period
 25.00
 Memo Item
 CONTRIBUTION

B. ROUNDS, CARLTON, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2459 FRANCISCAN DRIVE #29
 City CLEARWATER State FL Zip Code 33763-3252
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 650.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 06 / 2016
Transaction ID : SA11A.477900
 Amount of Each Receipt this Period
 25.00
 Memo Item
 CONTRIBUTION

C. ROUNDS, JACK, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 736 S HERITAGE CREEK WAY
 City SAINT AUGUSTINE State FL Zip Code 32084-6528
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 327.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 24 / 2016
Transaction ID : SA11A.446186
 Amount of Each Receipt this Period
 25.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	75.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3150 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
Team Ryan

A. ROUNDS, JACK, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 736 S HERITAGE CREEK WAY
 City SAINT AUGUSTINE State FL Zip Code 32084-6528
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 327.00

Date of Receipt 10 / 31 / 2016
Transaction ID : SA11A.459171
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

B. ROUNDS, JACK, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 736 S HERITAGE CREEK WAY
 City SAINT AUGUSTINE State FL Zip Code 32084-6528
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 327.00

Date of Receipt 11 / 04 / 2016
Transaction ID : SA11A.471329
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

C. ROUNDS, JACK, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 736 S HERITAGE CREEK WAY
 City SAINT AUGUSTINE State FL Zip Code 32084-6528
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 327.00

Date of Receipt 11 / 04 / 2016
Transaction ID : SA11A.472914
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 75.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3151 OF 4311
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
Team Ryan

A. ROWE, CHERYL, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 2 SYLVAN LANE

City MOHNTON	State PA	Zip Code 19540-8510
-----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) CHERYL A. ROWE	Occupation (for Individual) ATTORNEY
---	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
525.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		26		2016

Transaction ID : SA11A.450303

Amount of Each Receipt this Period
100.00

Memo Item CONTRIBUTION

B. ROWE, CHERYL, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 2 SYLVAN LANE

City MOHNTON	State PA	Zip Code 19540-8510
-----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) CHERYL A. ROWE	Occupation (for Individual) ATTORNEY
---	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
525.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		30		2016

Transaction ID : SA11A.459819

Amount of Each Receipt this Period
100.00

Memo Item CONTRIBUTION

C. ROWE, CHERYL, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 2 SYLVAN LANE

City MOHNTON	State PA	Zip Code 19540-8510
-----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) CHERYL A. ROWE	Occupation (for Individual) ATTORNEY
---	---

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
525.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		31		2016

Transaction ID : SA11A.464287

Amount of Each Receipt this Period
100.00

Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	300.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3152 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
-----------------------------	-----------------------------	-----------------------------

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
Team Ryan

A. ROWE, CHERYL, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2 SYLVAN LANE
 City MOHNTON State PA Zip Code 19540-8510
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) CHERYL A. ROWE Occupation (for Individual) ATTORNEY
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 525.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 02 / 2016
Transaction ID : SA11A.469891
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION

B. ROWE, CHERYL, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2 SYLVAN LANE
 City MOHNTON State PA Zip Code 19540-8510
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) CHERYL A. ROWE Occupation (for Individual) ATTORNEY
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 525.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 06 / 2016
Transaction ID : SA11A.477209
 Amount of Each Receipt this Period
 25.00
 Memo Item
 CONTRIBUTION

C. ROWE, RAYMOND, A., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 49 EAST E STREET
 City ENCINITAS State CA Zip Code 92024-3612
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 700.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 28 / 2016
Transaction ID : SA11A.455965
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	225.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3153 OF 4311
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
Team Ryan

A. ROWE, RAYMOND, A., MR.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 49 EAST E STREET

City ENCINITAS	State CA	Zip Code 92024-3612
-------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
700.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	27	/	2016

Transaction ID : SA11A.456923

Amount of Each Receipt this Period
50.00

Memo Item CONTRIBUTION

B. ROWE, RAYMOND, A., MR.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 49 EAST E STREET

City ENCINITAS	State CA	Zip Code 92024-3612
-------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
700.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	04	/	2016

Transaction ID : SA11A.470824

Amount of Each Receipt this Period
50.00

Memo Item CONTRIBUTION

C. ROWE, RAYMOND, A., MR.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 49 EAST E STREET

City ENCINITAS	State CA	Zip Code 92024-3612
-------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
700.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	04	/	2016

Transaction ID : SA11A.472892

Amount of Each Receipt this Period
100.00

Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	200.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3154 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. ROWELL, GARY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 102 EMPRESS CT
 City BONAIRE State GA Zip Code 31005-4004
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 11 / 01 / 2016
Transaction ID : SA11A.463048
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

B. ROY, RICK, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1347 COUNTY ROAD 39
 City BLOOMINGDALE State OH Zip Code 43910-7954
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) FLUOR CORP Occupation (for Individual) CONSTRUCTION MANAGER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 10 / 28 / 2016
Transaction ID : SA11A.461420
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

C. ROYAL, JAMES, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3223 FLORENCE AVE
 City TULSA State OK Zip Code 74105-2409
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) STAGHORN PETROLEUM Occupation (for Individual) CEO
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 1800.00

Date of Receipt 10 / 21 / 2016
Transaction ID : SA11A.444202
 Amount of Each Receipt this Period 75.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	575.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3155 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. ROYAL, JAMES, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3223 FLORENCE AVE
 City TULSA State OK Zip Code 74105-2409
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) STAGHORN PETROLEUM Occupation (for Individual) CEO
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1800.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 26 / 2016
Transaction ID : SA11A.450930
 Amount of Each Receipt this Period
 100.00
 Memo Item
CONTRIBUTION

B. ROYAL, JAMES, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3223 FLORENCE AVE
 City TULSA State OK Zip Code 74105-2409
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) STAGHORN PETROLEUM Occupation (for Individual) CEO
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1800.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 26 / 2016
Transaction ID : SA11A.450933
 Amount of Each Receipt this Period
 100.00
 Memo Item
CONTRIBUTION

C. ROYAL, JAMES, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3223 FLORENCE AVE
 City TULSA State OK Zip Code 74105-2409
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) STAGHORN PETROLEUM Occupation (for Individual) CEO
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1800.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 27 / 2016
Transaction ID : SA11A.454104
 Amount of Each Receipt this Period
 100.00
 Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	300.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3156 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
Team Ryan

A. ROYAL, JAMES, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3223 FLORENCE AVE
 City TULSA State OK Zip Code 74105-2409
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) STAGHORN PETROLEUM Occupation (for Individual) CEO
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1800.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 30 / 2016
Transaction ID : SA11A.460185
 Amount of Each Receipt this Period
 300.00
 Memo Item
CONTRIBUTION

B. ROYAL, JAMES, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3223 FLORENCE AVE
 City TULSA State OK Zip Code 74105-2409
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) STAGHORN PETROLEUM Occupation (for Individual) CEO
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1800.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 01 / 2016
Transaction ID : SA11A.462459
 Amount of Each Receipt this Period
 100.00
 Memo Item
CONTRIBUTION

C. ROYAL, JAMES, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3223 FLORENCE AVE
 City TULSA State OK Zip Code 74105-2409
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) STAGHORN PETROLEUM Occupation (for Individual) CEO
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1800.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 04 / 2016
Transaction ID : SA11A.474190
 Amount of Each Receipt this Period
 300.00
 Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	700.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3157 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. ROYER, ALTON, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 412 SCOTT DRIVE
 City SILVER SPRING State MD Zip Code 20904-1064
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) GIBSON BUILDERS Occupation (for Individual) PROJECT MANAGER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 30 / 2016
Transaction ID : SA11A.459736
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION

B. ROYER, ALTON, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 412 SCOTT DRIVE
 City SILVER SPRING State MD Zip Code 20904-1064
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) GIBSON BUILDERS Occupation (for Individual) PROJECT MANAGER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 30 / 2016
Transaction ID : SA11A.459737
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION

C. ROYER, ALTON, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 412 SCOTT DRIVE
 City SILVER SPRING State MD Zip Code 20904-1064
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) GIBSON BUILDERS Occupation (for Individual) PROJECT MANAGER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 04 / 2016
Transaction ID : SA11A.474087
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	300.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3158 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. ROYER, ALTON, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 412 SCOTT DRIVE
 City SILVER SPRING State MD Zip Code 20904-1064
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) GIBSON BUILDERS Occupation (for Individual) PROJECT MANAGER
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 400.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 07 / 2016
Transaction ID : SA11A.480448
 Amount of Each Receipt this Period
 50.00
 Memo Item
 CONTRIBUTION

B. ROYER, ALTON, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 412 SCOTT DRIVE
 City SILVER SPRING State MD Zip Code 20904-1064
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) GIBSON BUILDERS Occupation (for Individual) PROJECT MANAGER
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 400.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 07 / 2016
Transaction ID : SA11A.480451
 Amount of Each Receipt this Period
 50.00
 Memo Item
 CONTRIBUTION

C. RUANE, RICHARD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 660 S. CREST ROAD
 City CHATTANOOGA State TN Zip Code 37404-5977
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) REMI Occupation (for Individual) ENGINEER
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 20 / 2016
Transaction ID : SA11A.442324
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	200.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3159 OF 4311
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. RUANE, RICHARD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 660 S. CREST ROAD
 City CHATTANOOGA State TN Zip Code 37404-5977
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) REMI Occupation (for Individual) ENGINEER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 10 / 31 / 2016
Transaction ID : SA11A.458406
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

B. RUANE, RICHARD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 660 S. CREST ROAD
 City CHATTANOOGA State TN Zip Code 37404-5977
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) REMI Occupation (for Individual) ENGINEER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 11 / 02 / 2016
Transaction ID : SA11A.466454
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

C. RUBIN, WILLIAM, D., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 10581 GRAYHAWK ST
 City PLANTATION State FL Zip Code 33324-8249
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) THE RUBIN GROUP Occupation (for Individual) EXECUTIVE
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt 10 / 24 / 2016
Transaction ID : SA11A.443452
 Amount of Each Receipt this Period 1000.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 1150.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3160 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. RUCH, THOMAS, , MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3221 FOWLERS LAKE ROAD
 City WILLIAMSBURG State VA Zip Code 23185-7506
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 11 / 08 / 2016
Transaction ID : SA11A.468162
 Amount of Each Receipt this Period 150.00
 Memo Item CONTRIBUTION

B. RUCHARD, GREYNELL, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO BIX 2196
 City RANCH SANTA FE State CA Zip Code 92067-
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 11 / 04 / 2016
Transaction ID : SA11A.473121
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

C. RUCHLEWICZ, PAUL, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO BOX 9884
 City RANCHO SANTA FE State CA Zip Code 92067-4884
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) PACIFIC WESTERN REALTY Occupation (for Individual) REAL ESTATE
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 750.00

Date of Receipt 10 / 20 / 2016
Transaction ID : SA11A.444804
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	650.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3161 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
Team Ryan

A. RUCHLEWICZ, PAUL, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO BOX 9884

City RANCHO SANTA FE	State CA	Zip Code 92067-4884
-------------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) PACIFIC WESTERN REALTY	Occupation (for Individual) REAL ESTATE
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
750.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 31 / 2016
Transaction ID : SA11A.458048

Amount of Each Receipt this Period
250.00

Memo Item
CONTRIBUTION

B. RUCHLEWICZ, PAUL, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO BOX 9884

City RANCHO SANTA FE	State CA	Zip Code 92067-4884
-------------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) PACIFIC WESTERN REALTY	Occupation (for Individual) REAL ESTATE
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
750.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 31 / 2016
Transaction ID : SA11A.458062

Amount of Each Receipt this Period
250.00

Memo Item
CONTRIBUTION

C. RUCKLE, JON, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1402 S. BROOKSIDE TERRACE

City TACOMA	State WA	Zip Code 98465-1210
----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) SELF EMPLOYED	Occupation (for Individual) PHYSICIAN
--	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
425.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 24 / 2016
Transaction ID : SA11A.446095

Amount of Each Receipt this Period
25.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	525.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3162 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. RUCKLE, JON, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1402 S. BROOKSIDE TERRACE
 City TACOMA State WA Zip Code 98465-1210
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) PHYSICIAN
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 425.00

Date of Receipt
 10 / 24 / 2016
Transaction ID : SA11A.446098
 Amount of Each Receipt this Period
 25.00
 Memo Item
 CONTRIBUTION

B. RUCKLE, JON, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1402 S. BROOKSIDE TERRACE
 City TACOMA State WA Zip Code 98465-1210
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) PHYSICIAN
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 425.00

Date of Receipt
 10 / 30 / 2016
Transaction ID : SA11A.460186
 Amount of Each Receipt this Period
 25.00
 Memo Item
 CONTRIBUTION

C. RUCKLE, JON, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1402 S. BROOKSIDE TERRACE
 City TACOMA State WA Zip Code 98465-1210
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) PHYSICIAN
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 425.00

Date of Receipt
 11 / 04 / 2016
Transaction ID : SA11A.474203
 Amount of Each Receipt this Period
 25.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 75.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3163 OF 4311
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
Team Ryan

A. RUCKLE, JON, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1402 S. BROOKSIDE TERRACE

City TACOMA	State WA	Zip Code 98465-1210
----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) SELF EMPLOYED	Occupation (for Individual) PHYSICIAN
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
425.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	07	/	2016

Transaction ID : SA11A.475302

Amount of Each Receipt this Period
25.00

Memo Item
CONTRIBUTION

B. RUDDEN, RICHARD, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 34 GILDARE DRIVE

City EAST NORTHPORT	State NY	Zip Code 11731-3225
------------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
600.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	26	/	2016

Transaction ID : SA11A.447713

Amount of Each Receipt this Period
500.00

Memo Item
CONTRIBUTION

C. RUDOLPH, ERIC, B., ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 4254 WICKERSHAM DRIVE NW

City ATLANTA	State GA	Zip Code 30327-3654
-----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
600.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	20	/	2016

Transaction ID : SA11A.444818

Amount of Each Receipt this Period
500.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	1025.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3164 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
Team Ryan

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name A. RUDOLF, JERRY, , ,		Date of Receipt M M M / D D D / Y Y Y Y Y Y 10 / 27 / 2016
Mailing Address 11320 CARTHAGE PIKE		Transaction ID : SA11A.456995
City KNIGHTSTOWN	State IN	Zip Code 46148-9775
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 70.00
Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED	<input type="checkbox"/> Memo Item CONTRIBUTION
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 420.00	

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name B. RUE, THOMAS, , ,		Date of Receipt M M M / D D D / Y Y Y Y Y Y 10 / 28 / 2016
Mailing Address 848 E BOSTON ST 305		Transaction ID : SA11A.456426
City COVINGTON	State LA	Zip Code 70433-2982
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 50.00
Name of Employer (for Individual) COLEMAN E ADLER	Occupation (for Individual) WATCHMAKER	<input type="checkbox"/> Memo Item CONTRIBUTION
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name C. RUE, THOMAS, , ,		Date of Receipt M M M / D D D / Y Y Y Y Y Y 11 / 07 / 2016
Mailing Address 848 E BOSTON ST 305		Transaction ID : SA11A.480068
City COVINGTON	State LA	Zip Code 70433-2982
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 25.00
Name of Employer (for Individual) COLEMAN E ADLER	Occupation (for Individual) WATCHMAKER	<input type="checkbox"/> Memo Item CONTRIBUTION
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Aggregate Year-to-Date ▼ 250.00	

SUBTOTAL of Receipts This Page (optional).....▶	145.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3165 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. RUE, THOMAS, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 848 E BOSTON ST
 305
 City COVINGTON State LA Zip Code 70433-2982
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) COLEMAN E ADLER Occupation (for Individual) WATCHMAKER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 07 / 2016
Transaction ID : SA11A.480069
 Amount of Each Receipt this Period
 25.00
 Memo Item
 CONTRIBUTION

B. RUF, JESSE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 20525 NORDHOFF ST.
 City CHATSWORTH State CA Zip Code 91311-6100
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) LUMBER CITY CORP. Occupation (for Individual) PRESIDENT
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1020.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 24 / 2016
Transaction ID : SA11A.449483
 Amount of Each Receipt this Period
 25.00
 Memo Item
 CONTRIBUTION

C. RUF, JESSE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 20525 NORDHOFF ST.
 City CHATSWORTH State CA Zip Code 91311-6100
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) LUMBER CITY CORP. Occupation (for Individual) PRESIDENT
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1020.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 26 / 2016
Transaction ID : SA11A.454589
 Amount of Each Receipt this Period
 50.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	100.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3166 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
Team Ryan

A. RUF, JESSE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 20525 NORDHOFF ST.
 City CHATSWORTH State CA Zip Code 91311-6100
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) LUMBER CITY CORP. Occupation (for Individual) PRESIDENT
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1020.00

Date of Receipt 10 / 31 / 2016
Transaction ID : SA11A.458089
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

B. RUF, JESSE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 20525 NORDHOFF ST.
 City CHATSWORTH State CA Zip Code 91311-6100
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) LUMBER CITY CORP. Occupation (for Individual) PRESIDENT
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1020.00

Date of Receipt 10 / 31 / 2016
Transaction ID : SA11A.458119
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

C. RUF, JESSE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 20525 NORDHOFF ST.
 City CHATSWORTH State CA Zip Code 91311-6100
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) LUMBER CITY CORP. Occupation (for Individual) PRESIDENT
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1020.00

Date of Receipt 11 / 01 / 2016
Transaction ID : SA11A.462561
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	75.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3167 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. RUF, JESSE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 20525 NORDHOFF ST.
 City CHATSWORTH State CA Zip Code 91311-6100
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) LUMBER CITY CORP. Occupation (for Individual) PRESIDENT
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1020.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 03 / 2016
Transaction ID : SA11A.468694
 Amount of Each Receipt this Period
 35.00
 Memo Item
 CONTRIBUTION

B. RUF, JESSE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 20525 NORDHOFF ST.
 City CHATSWORTH State CA Zip Code 91311-6100
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) LUMBER CITY CORP. Occupation (for Individual) PRESIDENT
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1020.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 03 / 2016
Transaction ID : SA11A.468767
 Amount of Each Receipt this Period
 50.00
 Memo Item
 CONTRIBUTION

C. RUF, JESSE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 20525 NORDHOFF ST.
 City CHATSWORTH State CA Zip Code 91311-6100
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) LUMBER CITY CORP. Occupation (for Individual) PRESIDENT
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1020.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 04 / 2016
Transaction ID : SA11A.479618
 Amount of Each Receipt this Period
 35.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	120.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3168 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. RUF, JESSE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 20525 NORDHOFF ST.
 City CHATSWORTH State CA Zip Code 91311-6100
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) LUMBER CITY CORP. Occupation (for Individual) PRESIDENT
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1020.00

Date of Receipt 11 / 08 / 2016
Transaction ID : SA11A.479695
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

B. RUF, JESSE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 20525 NORDHOFF ST.
 City CHATSWORTH State CA Zip Code 91311-6100
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) LUMBER CITY CORP. Occupation (for Individual) PRESIDENT
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1020.00

Date of Receipt 11 / 07 / 2016
Transaction ID : SA11A.480349
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

C. RUF, JESSE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 20525 NORDHOFF ST.
 City CHATSWORTH State CA Zip Code 91311-6100
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) LUMBER CITY CORP. Occupation (for Individual) PRESIDENT
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1020.00

Date of Receipt 11 / 07 / 2016
Transaction ID : SA11A.480428
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	150.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3169 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
Team Ryan

A. RUFFIN, JOHN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5024 IVYBRIDGE DRIVE
 City LEXINGTON State KY Zip Code 40515-1176
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) AMR MANAGEMENT SERVICES Occupation (for Individual) SMALL BUSINESS OWNER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 525.00

Date of Receipt 10 / 24 / 2016
Transaction ID : SA11A.449224
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

B. RUFFIN, JOHN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5024 IVYBRIDGE DRIVE
 City LEXINGTON State KY Zip Code 40515-1176
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) AMR MANAGEMENT SERVICES Occupation (for Individual) SMALL BUSINESS OWNER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 525.00

Date of Receipt 10 / 31 / 2016
Transaction ID : SA11A.458634
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

C. RUFFIN, JOHN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5024 IVYBRIDGE DRIVE
 City LEXINGTON State KY Zip Code 40515-1176
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) AMR MANAGEMENT SERVICES Occupation (for Individual) SMALL BUSINESS OWNER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 525.00

Date of Receipt 11 / 04 / 2016
Transaction ID : SA11A.472172
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	100.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3170 OF 4311
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. RUGG, LARRY, R., ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 13 DEER FIELD RIDGE ROAD

City WILDWOOD	State MO	Zip Code 63005-6201
------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) INFORMATION REQUESTED PER BEST EFFORTS	Occupation (for Individual) INFORMATION REQUESTED PER BE
---	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		20		2016

Transaction ID : SA11A.433492

Amount of Each Receipt this Period
250.00

Memo Item
CONTRIBUTION

B. RUHL, BARRY, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 7347 N PERSHING AVE

City STOCKTON	State CA	Zip Code 95207-1720
------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
350.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		30		2016

Transaction ID : SA11A.459450

Amount of Each Receipt this Period
50.00

Memo Item
CONTRIBUTION

C. RULAND, KIRBY, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 95 BOOTER ROAD

City FAIRVIEW	State NC	Zip Code 28730-8726
------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
230.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11		07		2016

Transaction ID : SA11A.475611

Amount of Each Receipt this Period
30.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	330.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3171 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
Team Ryan

A. RULAND, KIRBY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 95 BOOTER ROAD
 City FAIRVIEW State NC Zip Code 28730-8726
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 230.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 07 / 2016
Transaction ID : SA11A.475617
 Amount of Each Receipt this Period
 25.00
 Memo Item
 CONTRIBUTION

B. RULAND, KIRBY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 95 BOOTER ROAD
 City FAIRVIEW State NC Zip Code 28730-8726
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 230.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 07 / 2016
Transaction ID : SA11A.475618
 Amount of Each Receipt this Period
 25.00
 Memo Item
 CONTRIBUTION

C. RUNALDUE, DON, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 32 PLANTATION DR
 City SOUTHERN PINES State NC Zip Code 28387-2967
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 1050.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 25 / 2016
Transaction ID : SA11A.449015
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	150.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3172 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. RUNKLE, JUNE, H., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2933 KASSARINE PASS
 City AUSTIN State TX Zip Code 78704-4628
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 210.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 01 / 2016
Transaction ID : SA11A.461877
 Amount of Each Receipt this Period
 20.00
 Memo Item
 CONTRIBUTION

B. RUNNOE, GORDON, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4322 PLANTATION CT
 City DE PERE State WI Zip Code 54115-8356
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) THE MAIL HAUS Occupation (for Individual) OWNER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 31 / 2016
Transaction ID : SA11A.459177
 Amount of Each Receipt this Period
 250.00
 Memo Item
 CONTRIBUTION

C. RUNNOE, GORDON, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4322 PLANTATION CT
 City DE PERE State WI Zip Code 54115-8356
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) THE MAIL HAUS Occupation (for Individual) OWNER
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 04 / 2016
Transaction ID : SA11A.471637
 Amount of Each Receipt this Period
 250.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	520.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3173 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. RUNYON, SHEILA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 308 PEARTREE
 City CLARKSVILLE State TN Zip Code 37043-4672
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) REALTOR
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 525.00

Date of Receipt 10 / 24 / 2016
Transaction ID : SA11A.449126
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

B. RUNYON, SHEILA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 308 PEARTREE
 City CLARKSVILLE State TN Zip Code 37043-4672
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) REALTOR
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 525.00

Date of Receipt 11 / 04 / 2016
Transaction ID : SA11A.473991
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

C. RUOTOLO, DONN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2514 SPARROWBUSH LANE
 City MANASQUAN State NJ Zip Code 08736-2210
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 270.00

Date of Receipt 10 / 25 / 2016
Transaction ID : SA11A.447402
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 300.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3174 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. RUPPRECHT, PATRICIA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 601 ROYALE CT
 City TROY State NY Zip Code 12180-8537
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 800.00

Date of Receipt 10 / 28 / 2016
Transaction ID : SA11A.455125
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

B. RUPPRECHT, PATRICIA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 601 ROYALE CT
 City TROY State NY Zip Code 12180-8537
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 800.00

Date of Receipt 10 / 28 / 2016
Transaction ID : SA11A.455126
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

C. RUSCH, STEVEN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 15410 HIGHLAND HEIGHTS DRIVE
 City MINNETONKA State MN Zip Code 55345-5635
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 375.00

Date of Receipt 10 / 23 / 2016
Transaction ID : SA11A.446368
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶ 125.00
TOTAL This Period (last page this line number only).....▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3175 OF 4311
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. RUSCH, STEVEN, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 15410 HIGHLAND HEIGHTS DRIVE

City MINNETONKA	State MN	Zip Code 55345-5635
--------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
375.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	23	/	2016

Transaction ID : SA11A.446369

Amount of Each Receipt this Period
25.00

Memo Item
CONTRIBUTION

B. RUSCH, STEVEN, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 15410 HIGHLAND HEIGHTS DRIVE

City MINNETONKA	State MN	Zip Code 55345-5635
--------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
375.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	06	/	2016

Transaction ID : SA11A.477535

Amount of Each Receipt this Period
25.00

Memo Item
CONTRIBUTION

C. RUSS, JAMES, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 200 THE POINT LANE

City STEVENSVILLE	State MD	Zip Code 21666-3977
----------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) MTBMA	Occupation (for Individual) PRESIDENT
--	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
800.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	26	/	2016

Transaction ID : SA11A.450484

Amount of Each Receipt this Period
50.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	100.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3176 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. RUSS, JAMES, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 200 THE POINT LANE
 City STEVENSVILLE State MD Zip Code 21666-3977
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) MTBMA Occupation (for Individual) PRESIDENT
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 800.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 26 / 2016
Transaction ID : SA11A.450487
 Amount of Each Receipt this Period
 50.00
 Memo Item
 CONTRIBUTION

B. RUSS, JAMES, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 200 THE POINT LANE
 City STEVENSVILLE State MD Zip Code 21666-3977
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) MTBMA Occupation (for Individual) PRESIDENT
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 800.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 03 / 2016
Transaction ID : SA11A.469008
 Amount of Each Receipt this Period
 50.00
 Memo Item
 CONTRIBUTION

C. RUSSELL, CLIVE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1990 COUNTRY CLUB DRIVE
 City PORT ORANGE State FL Zip Code 32128-6730
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 04 / 2016
Transaction ID : SA11A.474239
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	200.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3177 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. RUSSELL, HELENE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 922 ASHFORD DR.
 City SAN ANGELO State TX Zip Code 76901-5339
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 586.00

Date of Receipt 10 / 24 / 2016
Transaction ID : SA11A.445661
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

B. RUSSELL, HELENE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 922 ASHFORD DR.
 City SAN ANGELO State TX Zip Code 76901-5339
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 586.00

Date of Receipt 10 / 24 / 2016
Transaction ID : SA11A.445667
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

C. RUSSELL, HELENE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 922 ASHFORD DR.
 City SAN ANGELO State TX Zip Code 76901-5339
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 586.00

Date of Receipt 10 / 24 / 2016
Transaction ID : SA11A.445668
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 75.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3178 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. RUSSELL, HELENE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 922 ASHFORD DR.
 City SAN ANGELO State TX Zip Code 76901-5339
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 586.00

Date of Receipt 10 / 26 / 2016
Transaction ID : SA11A.454371
 Amount of Each Receipt this Period 30.00
 Memo Item CONTRIBUTION

B. RUSSELL, HELENE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 922 ASHFORD DR.
 City SAN ANGELO State TX Zip Code 76901-5339
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 586.00

Date of Receipt 10 / 28 / 2016
Transaction ID : SA11A.455273
 Amount of Each Receipt this Period 10.00
 Memo Item CONTRIBUTION

C. RUSSELL, HELENE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 922 ASHFORD DR.
 City SAN ANGELO State TX Zip Code 76901-5339
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 586.00

Date of Receipt 10 / 28 / 2016
Transaction ID : SA11A.455274
 Amount of Each Receipt this Period 18.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	58.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3179 OF 4311
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. RUSSELL, HELENE, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 922 ASHFORD DR.
City SAN ANGELO State TX Zip Code 76901-5339
FEC ID number of contributing federal political committee. **C**
Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 586.00

Date of Receipt 10 / 28 / 2016
Transaction ID : SA11A.455275
Amount of Each Receipt this Period 18.00
 Memo Item CONTRIBUTION

B. RUSSELL, HELENE, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 922 ASHFORD DR.
City SAN ANGELO State TX Zip Code 76901-5339
FEC ID number of contributing federal political committee. **C**
Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 586.00

Date of Receipt 10 / 27 / 2016
Transaction ID : SA11A.456522
Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

C. RUSSELL, HELENE, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 922 ASHFORD DR.
City SAN ANGELO State TX Zip Code 76901-5339
FEC ID number of contributing federal political committee. **C**
Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 586.00

Date of Receipt 11 / 04 / 2016
Transaction ID : SA11A.471283
Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 68.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3180 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. RUSSELL, HELENE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 922 ASHFORD DR.
 City SAN ANGELO State TX Zip Code 76901-5339
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 586.00

Date of Receipt
 11 / 04 / 2016
Transaction ID : SA11A.471305
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

B. RUSSELL, HELENE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 922 ASHFORD DR.
 City SAN ANGELO State TX Zip Code 76901-5339
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 586.00

Date of Receipt
 11 / 04 / 2016
Transaction ID : SA11A.472143
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

C. RUSSELL, HELENE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 922 ASHFORD DR.
 City SAN ANGELO State TX Zip Code 76901-5339
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 586.00

Date of Receipt
 11 / 04 / 2016
Transaction ID : SA11A.473135
 Amount of Each Receipt this Period 30.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	80.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3181 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. RUSSELL, HELENE, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 922 ASHFORD DR.

City SAN ANGELO	State TX	Zip Code 76901-5339
--------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
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Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
586.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	04	/	2016

Transaction ID : SA11A.473254

Amount of Each Receipt this Period
25.00

Memo Item
CONTRIBUTION

B. RUSSELL, HELENE, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 922 ASHFORD DR.

City SAN ANGELO	State TX	Zip Code 76901-5339
--------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
586.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	07	/	2016

Transaction ID : SA11A.476684

Amount of Each Receipt this Period
25.00

Memo Item
CONTRIBUTION

C. RUSSELL, KATHARINE, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 368 CYPRESS POINT DR.

City PALM DESERT	State CA	Zip Code 92211-1713
---------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
400.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	06	/	2016

Transaction ID : SA11A.477902

Amount of Each Receipt this Period
200.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	250.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3182 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
Team Ryan

A. RUSSELL, MARK, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 120 WHITBY COURT
 City ROCKY MOUNT State NC Zip Code 27804-7316
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) MACK GAY ASSOCIATES Occupation (for Individual) ENGINEER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 03 / 2016
Transaction ID : SA11A.469163
 Amount of Each Receipt this Period
 250.00
 Memo Item
 CONTRIBUTION

B. RUSSELL, WARREN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO BOX 315
 City TIBURON State CA Zip Code 94920-0315
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) PHYSICIAN
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 800.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 26 / 2016
Transaction ID : SA11A.447719
 Amount of Each Receipt this Period
 200.00
 Memo Item
 CONTRIBUTION

C. RUSSELL, WARREN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO BOX 315
 City TIBURON State CA Zip Code 94920-0315
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) PHYSICIAN
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 800.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 27 / 2016
Transaction ID : SA11A.452340
 Amount of Each Receipt this Period
 500.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	950.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3183 OF 4311
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. RUSSELL, WILLIAM, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 3440 SOUTH LOOP W

City HOUSTON State TX Zip Code 77025-5205

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) RUSSELL & SMITH FORD/HONDA Occupation (for Individual) RETIRED AUTO DEALER

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 600.00

Date of Receipt
11 / 04 / 2016
Transaction ID : SA11A.471202

Amount of Each Receipt this Period
100.00

Memo Item CONTRIBUTION

B. RUST, LYMAN, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 20 CANDLEWYCK DR

City HENDERSON State NV Zip Code 89052-6654

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 430.00

Date of Receipt
10 / 26 / 2016
Transaction ID : SA11A.449777

Amount of Each Receipt this Period
30.00

Memo Item CONTRIBUTION

C. RUST, LYMAN, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 20 CANDLEWYCK DR

City HENDERSON State NV Zip Code 89052-6654

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 430.00

Date of Receipt
10 / 31 / 2016
Transaction ID : SA11A.458940

Amount of Each Receipt this Period
25.00

Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶ 155.00

TOTAL This Period (last page this line number only).....▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3184 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
Team Ryan

A. RUST, LYMAN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 20 CANDLEWYCK DR
 City HENDERSON State NV Zip Code 89052-6654
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 430.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 30 / 2016
Transaction ID : SA11A.459857
 Amount of Each Receipt this Period
 25.00
 Memo Item
 CONTRIBUTION

B. RUST, LYMAN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 20 CANDLEWYCK DR
 City HENDERSON State NV Zip Code 89052-6654
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 430.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 30 / 2016
Transaction ID : SA11A.460095
 Amount of Each Receipt this Period
 25.00
 Memo Item
 CONTRIBUTION

C. RUST, LYMAN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 20 CANDLEWYCK DR
 City HENDERSON State NV Zip Code 89052-6654
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 430.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 04 / 2016
Transaction ID : SA11A.473331
 Amount of Each Receipt this Period
 25.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	75.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3185 OF 4311
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. RUTHERFORD, WARREN, L., MR.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 8600 SKYLINE DRIVE #3213
3213

City DALLAS State TX Zip Code 75243-4198

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
450.00

Date of Receipt
10 / 20 / 2016
Transaction ID : SA11A.442264

Amount of Each Receipt this Period
100.00

Memo Item CONTRIBUTION

B. RUTKOWSKI , RICHARD, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 6810B OSWEGO PL NE

City SEATTLE State WA Zip Code 98115-6456

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
300.00

Date of Receipt
10 / 23 / 2016
Transaction ID : SA11A.446590

Amount of Each Receipt this Period
100.00

Memo Item CONTRIBUTION

C. RUTKOWSKI , RICHARD, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 6810B OSWEGO PL NE

City SEATTLE State WA Zip Code 98115-6456

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
300.00

Date of Receipt
11 / 04 / 2016
Transaction ID : SA11A.471459

Amount of Each Receipt this Period
100.00

Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	300.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3186 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
Team Ryan

A. RUTLEDGE, DOUG, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 16760 QUEEN ANN DR
 City BROOKFIELD State WI Zip Code 53005-2182
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SOUTHWEST AIRLINES Occupation (for Individual) AIRLINE LEADER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 10 / 31 / 2016
Transaction ID : SA11A.458902
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

B. RUTLEDGE, PUD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO BOX 1132
 City SAN MARCOS State TX Zip Code 78667-1132
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1900.00

Date of Receipt 10 / 25 / 2016
Transaction ID : SA11A.451698
 Amount of Each Receipt this Period 200.00
 Memo Item CONTRIBUTION

C. RUTLEDGE, PUD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO BOX 1132
 City SAN MARCOS State TX Zip Code 78667-1132
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1900.00

Date of Receipt 10 / 27 / 2016
Transaction ID : SA11A.454237
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	325.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3187 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. RUTLEDGE, PUD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO BOX 1132

City SAN MARCOS	State TX	Zip Code 78667-1132
--------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1900.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 31 / 2016
Transaction ID : SA11A.464000

Amount of Each Receipt this Period
250.00

Memo Item
CONTRIBUTION

B. RUTLEDGE, PUD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO BOX 1132

City SAN MARCOS	State TX	Zip Code 78667-1132
--------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1900.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 02 / 2016
Transaction ID : SA11A.465850

Amount of Each Receipt this Period
250.00

Memo Item
CONTRIBUTION

C. RUTLEDGE, PUD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO BOX 1132

City SAN MARCOS	State TX	Zip Code 78667-1132
--------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
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Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
1900.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 06 / 2016
Transaction ID : SA11A.477128

Amount of Each Receipt this Period
100.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	600.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3188 OF 4311
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. RUTLEDGE, PUD, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address PO BOX 1132

City SAN MARCOS	State TX	Zip Code 78667-1132
FEC ID number of contributing federal political committee. C		
Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1900.00	

Date of Receipt
MM / DD / YYYY
11 / 06 / 2016
Transaction ID : SA11A.477132

Amount of Each Receipt this Period
100.00

Memo Item
CONTRIBUTION

B. RYAN, ARTHUR, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 2210 E OCEAN OAKS LANE

City VERO BEACH	State FL	Zip Code 32963-3104
FEC ID number of contributing federal political committee. C		
Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1000.00	

Date of Receipt
MM / DD / YYYY
11 / 03 / 2016
Transaction ID : SA11A.465393

Amount of Each Receipt this Period
1000.00

Memo Item
CONTRIBUTION

C. RYAN, JAKE, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 212 MARINE ST #100

City SANTA MONICA	State CA	Zip Code 90405-6510
FEC ID number of contributing federal political committee. C		
Name of Employer (for Individual) VENICE CONSULTING GROUP	Occupation (for Individual) CEO/SOFTWARE DEVELOPER	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Aggregate Year-to-Date ▼ 500.00	

Date of Receipt
MM / DD / YYYY
10 / 24 / 2016
Transaction ID : SA11A.446242

Amount of Each Receipt this Period
250.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	1350.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3189 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name A. RYAN, JAKE, , ,		Date of Receipt M M / D D / Y Y Y Y Y Y 10 / 24 / 2016
Mailing Address 212 MARINE ST #100		Transaction ID : SA11A.446243
City SANTA MONICA	State CA	Zip Code 90405-6510
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 250.00
Name of Employer (for Individual) VENICE CONSULTING GROUP	Occupation (for Individual) CEO/SOFTWARE DEVELOPER	<input type="checkbox"/> Memo Item CONTRIBUTION
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00	

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name B. RYAN, PATRICK, , ,		Date of Receipt M M / D D / Y Y Y Y Y Y 10 / 21 / 2016
Mailing Address 5460 SHARON LANE		Transaction ID : SA11A.444169
City SAN JOSE	State CA	Zip Code 95124-6129
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 100.00
Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED	<input type="checkbox"/> Memo Item CONTRIBUTION
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00	

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name C. RYAN, PATRICK, , ,		Date of Receipt M M / D D / Y Y Y Y Y Y 10 / 21 / 2016
Mailing Address 5460 SHARON LANE		Transaction ID : SA11A.444178
City SAN JOSE	State CA	Zip Code 95124-6129
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 50.00
Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED	<input type="checkbox"/> Memo Item CONTRIBUTION
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Aggregate Year-to-Date ▼ 500.00	

SUBTOTAL of Receipts This Page (optional).....▶	400.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3190 OF 4311
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. RYAN, PATRICK, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 5460 SHARON LANE

City SAN JOSE	State CA	Zip Code 95124-6129
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		21		2016

Transaction ID : SA11A.444179

Amount of Each Receipt this Period
50.00

Memo Item
CONTRIBUTION

B. RYAN, PATRICK, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 5460 SHARON LANE

City SAN JOSE	State CA	Zip Code 95124-6129
------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		31		2016

Transaction ID : SA11A.459104

Amount of Each Receipt this Period
100.00

Memo Item
CONTRIBUTION

C. RYAN, PATRICK, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 53 TERRAPIN LANE

City TRENTON	State NJ	Zip Code 08619-1363
-----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) FIRST BANK	Occupation (for Individual) BANKER
---	---------------------------------------

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11		03		2016

Transaction ID : SA11A.465273

Amount of Each Receipt this Period
250.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	400.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3191 OF 4311
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. RYAN, RICHARD, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1602 WINNERS CUP CR

City ST. CHARLES	State IL	Zip Code 60174-5846
---------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) LEAN ADVANTAGE	Occupation (for Individual) EXECUTIVE
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
575.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		25		2016

Transaction ID : SA11A.451767

Amount of Each Receipt this Period
100.00

Memo Item CONTRIBUTION

B. RYAN, RICHARD, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1602 WINNERS CUP CR

City ST. CHARLES	State IL	Zip Code 60174-5846
---------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) LEAN ADVANTAGE	Occupation (for Individual) EXECUTIVE
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
575.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		25		2016

Transaction ID : SA11A.451779

Amount of Each Receipt this Period
50.00

Memo Item CONTRIBUTION

C. RYAN, RICHARD, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1602 WINNERS CUP CR

City ST. CHARLES	State IL	Zip Code 60174-5846
---------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) LEAN ADVANTAGE	Occupation (for Individual) EXECUTIVE
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
575.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		31		2016

Transaction ID : SA11A.457977

Amount of Each Receipt this Period
50.00

Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	200.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3192 OF 4311
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. RYAN, WALTER, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address **PO BOX 32410**
City **TUCSON** State **AZ** Zip Code **85751-2410**
FEC ID number of contributing federal political committee. **C**
Name of Employer (for Individual) **NONE** Occupation (for Individual) **RETIRED**
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ **700.00**

Date of Receipt **10 / 20 / 2016**
Transaction ID : SA11A.433456
Amount of Each Receipt this Period **100.00**
 Memo Item CONTRIBUTION

B. RYAN JR, WALTER, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address **BOX 32410 HOUSE**
City **TUCSON** State **AZ** Zip Code **85751-2410**
FEC ID number of contributing federal political committee. **C**
Name of Employer (for Individual) **NONE** Occupation (for Individual) **RETIRED**
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ **400.00**

Date of Receipt **11 / 02 / 2016**
Transaction ID : SA11A.466029
Amount of Each Receipt this Period **100.00**
 Memo Item CONTRIBUTION

C. RYAN JR, WALTER, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address **BOX 32410 HOUSE**
City **TUCSON** State **AZ** Zip Code **85751-2410**
FEC ID number of contributing federal political committee. **C**
Name of Employer (for Individual) **NONE** Occupation (for Individual) **RETIRED**
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ **400.00**

Date of Receipt **11 / 02 / 2016**
Transaction ID : SA11A.466032
Amount of Each Receipt this Period **100.00**
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... **300.00**
TOTAL This Period (last page this line number only).....

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3193 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. RYKERT, JANET, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5423 E BROCKWOOD ST
 City LONG BEACH State CA Zip Code 90808-1909
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) LONG BEACH UNIFIED SCHOOL DISTRICT Occupation (for Individual) TEACHER
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 700.00

Date of Receipt 10 / 22 / 2016
Transaction ID : SA11A.447075
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

B. RYKERT, JANET, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5423 E BROCKWOOD ST
 City LONG BEACH State CA Zip Code 90808-1909
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) LONG BEACH UNIFIED SCHOOL DISTRICT Occupation (for Individual) TEACHER
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 700.00

Date of Receipt 10 / 22 / 2016
Transaction ID : SA11A.447076
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

C. RYOU, KAP, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 9038 SHERI LANE
 City ORLAND PARK State IL Zip Code 60462-2116
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) SELF EMPLOYED
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 275.00

Date of Receipt 11 / 04 / 2016
Transaction ID : SA11A.471106
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 250.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3194 OF 4311
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. RYOU, KAP, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 9038 SHERI LANE

City ORLAND PARK	State IL	Zip Code 60462-2116
---------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) SELF EMPLOYED	Occupation (for Individual) SELF EMPLOYED
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
275.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
11 / 04 / 2016

Transaction ID : SA11A.479347

Amount of Each Receipt this Period
50.00

Memo Item
CONTRIBUTION

B. RYOU, KAP, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 9038 SHERI LANE

City ORLAND PARK	State IL	Zip Code 60462-2116
---------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) SELF EMPLOYED	Occupation (for Individual) SELF EMPLOYED
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
275.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
11 / 04 / 2016

Transaction ID : SA11A.479352

Amount of Each Receipt this Period
50.00

Memo Item
CONTRIBUTION

C. RYSER, DOUGLAS, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 3349 FRIENDLY GROVE RD NE

City OLYMPIA	State WA	Zip Code 98506-2941
-----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
375.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
10 / 24 / 2016

Transaction ID : SA11A.446032

Amount of Each Receipt this Period
25.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	125.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3195 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. RYSER, DOUGLAS, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3349 FRIENDLY GROVE RD NE
 City OLYMPIA State WA Zip Code 98506-2941
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 375.00

Date of Receipt 10 / 26 / 2016
Transaction ID : SA11A.451388
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

B. RYSER, DOUGLAS, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3349 FRIENDLY GROVE RD NE
 City OLYMPIA State WA Zip Code 98506-2941
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 375.00

Date of Receipt 10 / 26 / 2016
Transaction ID : SA11A.454312
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

C. RYSER, DOUGLAS, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3349 FRIENDLY GROVE RD NE
 City OLYMPIA State WA Zip Code 98506-2941
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 375.00

Date of Receipt 11 / 02 / 2016
Transaction ID : SA11A.465916
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	75.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3196 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
Team Ryan

A. RYSER, DOUGLAS, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3349 FRIENDLY GROVE RD NE
 City OLYMPIA State WA Zip Code 98506-2941
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 375.00

Date of Receipt
 11 / 07 / 2016
Transaction ID : SA11A.474966
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

B. RYSER, DOUGLAS, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3349 FRIENDLY GROVE RD NE
 City OLYMPIA State WA Zip Code 98506-2941
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 375.00

Date of Receipt
 11 / 06 / 2016
Transaction ID : SA11A.477019
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

C. RYSER, DOUGLAS, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3349 FRIENDLY GROVE RD NE
 City OLYMPIA State WA Zip Code 98506-2941
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 375.00

Date of Receipt
 11 / 06 / 2016
Transaction ID : SA11A.477025
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	75.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3197 OF 4311
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. RYTER, STEPHEN, L., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 31000 AURORA DEL MAR
 City CARMEL State CA Zip Code 93923-9780
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 10 / 24 / 2016
Transaction ID : SA11A.443850
 Amount of Each Receipt this Period 500.00
 Memo Item CONTRIBUTION

B. SABA, CAMILE, G., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 18 DELLWOOD CIRCLE
 City BRONXVILLE State NY Zip Code 10708-2008
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) OLAYAN AMERICA Occupation (for Individual) MANAGING DIRECTOR
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1250.00

Date of Receipt 10 / 20 / 2016
Transaction ID : SA11A.433391
 Amount of Each Receipt this Period 1000.00
 Memo Item CONTRIBUTION

C. SABOTT, ANNE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 9615 AVOCET LN
 City LAFAYETTE State CO Zip Code 80026-9737
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 475.00

Date of Receipt 11 / 03 / 2016
Transaction ID : SA11A.468824
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶ 1525.00
TOTAL This Period (last page this line number only).....▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3198 OF 4311
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. SACHS, ROBERT, A., MR.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 12 LOCKHAVEN COURT,

City BEDMINSTER	State NJ	Zip Code 07921-1726
--------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
300.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	24	/	2016

Transaction ID : SA11A.445992

Amount of Each Receipt this Period
100.00

Memo Item CONTRIBUTION

B. SACKAR, NORMAN, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 945 W GEORGE STREET SUITE 207

City CHICAGO	State IL	Zip Code 60657-5877
-----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	26	/	2016

Transaction ID : SA11A.447737

Amount of Each Receipt this Period
200.00

Memo Item CONTRIBUTION

C. SACKETT, MARLENE, D., MRS.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 15331 POWDERHORN ROAD

City FORT WAYNE	State IN	Zip Code 46814-9421
--------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
230.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	21	/	2016

Transaction ID : SA11A.444249

Amount of Each Receipt this Period
25.00

Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	325.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3199 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. SACKETT, MARLENE, D., MRS.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 15331 POWDERHORN ROAD

City FORT WAYNE	State IN	Zip Code 46814-9421
--------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
230.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
11		06		2016

Transaction ID : SA11A.477269

Amount of Each Receipt this Period
25.00

Memo Item CONTRIBUTION

B. SADLER, THOMAS, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 5730 NORTH FAIRFIELD AVENUE

City CHICAGO	State IL	Zip Code 60659-4706
-----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
479.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
10		25		2016

Transaction ID : SA11A.448370

Amount of Each Receipt this Period
25.00

Memo Item CONTRIBUTION

C. SADLER, THOMAS, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 5730 NORTH FAIRFIELD AVENUE

City CHICAGO	State IL	Zip Code 60659-4706
-----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
479.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
10		30		2016

Transaction ID : SA11A.460139

Amount of Each Receipt this Period
59.00

Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	109.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3200 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
Team Ryan

A. SADLER, THOMAS, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5730 NORTH FAIRFIELD AVENUE
 City CHICAGO State IL Zip Code 60659-4706
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 479.00

Date of Receipt 11 / 04 / 2016
Transaction ID : SA11A.473383
 Amount of Each Receipt this Period 59.00
 Memo Item CONTRIBUTION

B. SAENZ, GLORIA, E., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 58-25 69TH PLACE
 City MASPETH State NY Zip Code 11378-2625
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 427.00

Date of Receipt 10 / 22 / 2016
Transaction ID : SA11A.447021
 Amount of Each Receipt this Period 20.00
 Memo Item CONTRIBUTION

C. SAENZ, GLORIA, E., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 58-25 69TH PLACE
 City MASPETH State NY Zip Code 11378-2625
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 427.00

Date of Receipt 10 / 22 / 2016
Transaction ID : SA11A.447022
 Amount of Each Receipt this Period 20.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	99.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3201 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. SAENZ, GLORIA, E., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 58-25 69TH PLACE
 City MASPETH State NY Zip Code 11378-2625
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 427.00

Date of Receipt 11 / 04 / 2016
Transaction ID : SA11A.471424
 Amount of Each Receipt this Period 20.00
 Memo Item CONTRIBUTION

B. SAER, J., KENNETH, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1637 OCTAVIA STREET
 City NEW ORLEANS State LA Zip Code 70115-5042
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 2000.00

Date of Receipt 11 / 03 / 2016
Transaction ID : SA11A.465416
 Amount of Each Receipt this Period 1000.00
 Memo Item CONTRIBUTION

C. SAGAN, JOHN, R., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 71 S. WACKER DR.
 City CHICAGO State IL Zip Code 60606-4637
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) MAYER BROWN LLP Occupation (for Individual) ATTORNEY
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt 10 / 24 / 2016
Transaction ID : SA11A.446221
 Amount of Each Receipt this Period 1000.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 2020.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3202 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. SAGNESS, MICHAEL, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3111 SPRUCE LANE
 City MINNETONKA State MN Zip Code 55305-3617
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) DELTA AIR LINES Occupation (for Individual) PILOT
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 350.00

Date of Receipt 11 / 03 / 2016
Transaction ID : SA11A.469289
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

B. SAGUI, MATTHEW, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 17 WASHINGTON AVE
 City SPRING LAKE State NJ Zip Code 07762-1425
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 5100.00

Date of Receipt 10 / 20 / 2016
Transaction ID : SA11A.444824
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

C. SAHAKIAN, DANIEL, D., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO BOX 649
 City STATE COLLEGE State PA Zip Code 16804-0649
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) INFORMATION REQUESTED PER BEST EFFORTS Occupation (for Individual) INFORMATION REQUESTED PER BEST EFFORTS
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt 10 / 31 / 2016
Transaction ID : SA11A.457332
 Amount of Each Receipt this Period 500.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 700.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3203 OF 4311
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. SAHLMAN, CHARLES, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address P O BOX 962

City BRANDON State FL Zip Code 33509-0962

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 02 / 2016

Transaction ID : SA11A.466252

Amount of Each Receipt this Period
 100.00

Memo Item CONTRIBUTION

B. SAHLMAN, CHARLES, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address P O BOX 962

City BRANDON State FL Zip Code 33509-0962

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 02 / 2016

Transaction ID : SA11A.466253

Amount of Each Receipt this Period
 100.00

Memo Item CONTRIBUTION

C. SAINO, HELEN, W., MRS.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 5214 CHOCTAW AVE

City PENSACOLA State FL Zip Code 32507-8713

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼ 350.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 24 / 2016

Transaction ID : SA11A.443927

Amount of Each Receipt this Period
 10.00

Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 210.00

TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3204 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. SAINO, HELEN, W., MRS.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5214 CHOCTAW AVE
 City PENSACOLA State FL Zip Code 32507-8713
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 350.00

Date of Receipt 10 / 24 / 2016
Transaction ID : SA11A.449466
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

B. SAINO, HELEN, W., MRS.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5214 CHOCTAW AVE
 City PENSACOLA State FL Zip Code 32507-8713
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 350.00

Date of Receipt 10 / 24 / 2016
Transaction ID : SA11A.449467
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

C. SAINO, HELEN, W., MRS.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5214 CHOCTAW AVE
 City PENSACOLA State FL Zip Code 32507-8713
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 350.00

Date of Receipt 10 / 26 / 2016
Transaction ID : SA11A.450182
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 75.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3205 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. SAINO, HELEN, W., MRS.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5214 CHOCTAW AVE
 City PENSACOLA State FL Zip Code 32507-8713
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 350.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 03 / 2016
Transaction ID : SA11A.469189
 Amount of Each Receipt this Period
 50.00
 Memo Item
 CONTRIBUTION

B. SAINO, HELEN, W., MRS.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5214 CHOCTAW AVE
 City PENSACOLA State FL Zip Code 32507-8713
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 350.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 03 / 2016
Transaction ID : SA11A.469194
 Amount of Each Receipt this Period
 25.00
 Memo Item
 CONTRIBUTION

C. SAINO, HELEN, W., MRS.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5214 CHOCTAW AVE
 City PENSACOLA State FL Zip Code 32507-8713
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 350.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 03 / 2016
Transaction ID : SA11A.469197
 Amount of Each Receipt this Period
 25.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	100.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3206 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. SAINO, HELEN, W., MRS.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5214 CHOCTAW AVE
 City PENSACOLA State FL Zip Code 32507-8713
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 350.00

Date of Receipt 11 / 04 / 2016
Transaction ID : SA11A.472749
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

B. SALA, ROBERT, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2 MOONLIGHT DRIVE
 City BARNEGAT State NJ Zip Code 08005-1171
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 350.00

Date of Receipt 10 / 21 / 2016
Transaction ID : SA11A.444261
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

C. SALA, ROBERT, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2 MOONLIGHT DRIVE
 City BARNEGAT State NJ Zip Code 08005-1171
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 350.00

Date of Receipt 10 / 27 / 2016
Transaction ID : SA11A.454124
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶ 100.00
TOTAL This Period (last page this line number only).....▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3207 OF 4311
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. SALA, ROBERT, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address **2 MOONLIGHT DRIVE**

City BARNEGAT	State NJ	Zip Code 08005-1171
-------------------------	--------------------	-------------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
--	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **350.00**

Date of Receipt
11 / 01 / 2016

Transaction ID : SA11A.462275

Amount of Each Receipt this Period
25.00

Memo Item
CONTRIBUTION

B. SALATA, SUZANNE, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address **1505 LINCOLN AVENUE**

City CAPITOLA	State CA	Zip Code 95010-3839
-------------------------	--------------------	-------------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) GARDEN CITY CONSTRUCTION	Occupation (for Individual) CO OWNER
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **250.00**

Date of Receipt
10 / 30 / 2016

Transaction ID : SA11A.459520

Amount of Each Receipt this Period
250.00

Memo Item
CONTRIBUTION

C. SALDUTTI, WILLIAM, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address **4 TYNDALE COURT**

City MOORESTOWN	State NJ	Zip Code 08057-2150
---------------------------	--------------------	-------------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) SALDUTTI LAW GROUP	Occupation (for Individual) ATTORNEY
--	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼ **250.00**

Date of Receipt
11 / 02 / 2016

Transaction ID : SA11A.465148

Amount of Each Receipt this Period
250.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	525.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3208 OF 4311
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. SALEM, KHALED, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address **ONE RIVERWAY STE 1870**

City **HOUSTON** State **TX** Zip Code **77056-2000**

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) **WILLIAMSBURG ENTERPRISES** Occupation (for Individual) **MANAGING PARTNER**

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **10000.00**

Date of Receipt **11 / 01 / 2016**
Transaction ID : **SA11A.461879**

Amount of Each Receipt this Period **10000.00**

Memo Item CONTRIBUTION

B. SALERNO, RICHARD, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address **537 LAKE MUREX CIRCLE**

City **SANIBEL** State **FL** Zip Code **33957-5522**

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) **NONE** Occupation (for Individual) **RETIRED**

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **300.00**

Date of Receipt **11 / 02 / 2016**
Transaction ID : **SA11A.465108**

Amount of Each Receipt this Period **200.00**

Memo Item CONTRIBUTION

C. SALIENTES, RAQUEL, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address **3217 VERONA DRIVE**

City **SILVER SPRING** State **MD** Zip Code **20906-5359**

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) **NONE** Occupation (for Individual) **RETIRED**

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼ **225.00**

Date of Receipt **10 / 23 / 2016**
Transaction ID : **SA11A.446487**

Amount of Each Receipt this Period **25.00**

Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... **10225.00**

TOTAL This Period (last page this line number only).....

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3209 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. SALIENTES, RAQUEL, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3217 VERONA DRIVE
 City SILVER SPRING State MD Zip Code 20906-5359
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 225.00

Date of Receipt 10 / 23 / 2016
Transaction ID : SA11A.449612
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

B. SALIENTES, RAQUEL, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3217 VERONA DRIVE
 City SILVER SPRING State MD Zip Code 20906-5359
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 225.00

Date of Receipt 10 / 31 / 2016
Transaction ID : SA11A.458174
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

C. SALIENTES, RAQUEL, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3217 VERONA DRIVE
 City SILVER SPRING State MD Zip Code 20906-5359
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 225.00

Date of Receipt 11 / 04 / 2016
Transaction ID : SA11A.471093
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	75.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3210 OF 4311
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name A. SALING, GEORGE, , ,		Date of Receipt M M M / D D D / Y Y Y Y Y Y 10 / 23 / 2016 Transaction ID : SA11A.446604
Mailing Address P. O. BOX 581890		Amount of Each Receipt this Period 100.00
City KISSIMMEE	State FL	Zip Code 34758-0024
FEC ID number of contributing federal political committee. C		<input type="checkbox"/> Memo Item CONTRIBUTION
Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1500.00	

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name B. SALING, GEORGE, , ,		Date of Receipt M M M / D D D / Y Y Y Y Y Y 11 / 05 / 2016 Transaction ID : SA11A.479278
Mailing Address P. O. BOX 581890		Amount of Each Receipt this Period 200.00
City KISSIMMEE	State FL	Zip Code 34758-0024
FEC ID number of contributing federal political committee. C		<input type="checkbox"/> Memo Item CONTRIBUTION
Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1500.00	

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name C. SALT, HADDON, , ,		Date of Receipt M M M / D D D / Y Y Y Y Y Y 10 / 27 / 2016 Transaction ID : SA11A.454175
Mailing Address POP BOX 586 257		Amount of Each Receipt this Period 25.00
City BORREGO SPINGS	State CA	Zip Code 92004-
FEC ID number of contributing federal political committee. C		<input type="checkbox"/> Memo Item CONTRIBUTION
Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Aggregate Year-to-Date ▼ 825.00	

SUBTOTAL of Receipts This Page (optional).....	325.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3211 OF 4311
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
Team Ryan

A. SALT, HADDON, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address POP BOX 586
257

City BORREGO SPINGS State CA Zip Code 92004-

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
825.00

Date of Receipt
MM / DD / YYYY
10 / 28 / 2016

Transaction ID : SA11A.455432

Amount of Each Receipt this Period
100.00

Memo Item CONTRIBUTION

B. SALT, HADDON, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address POP BOX 586
257

City BORREGO SPINGS State CA Zip Code 92004-

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
825.00

Date of Receipt
MM / DD / YYYY
11 / 03 / 2016

Transaction ID : SA11A.469173

Amount of Each Receipt this Period
25.00

Memo Item CONTRIBUTION

C. SALT, HADDON, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address POP BOX 586
257

City BORREGO SPINGS State CA Zip Code 92004-

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
825.00

Date of Receipt
MM / DD / YYYY
11 / 03 / 2016

Transaction ID : SA11A.469176

Amount of Each Receipt this Period
100.00

Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 225.00

TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3212 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. SALT, HADDON, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address POP BOX 586
 257
 City BORREGO SPINGS State CA Zip Code 92004-
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 825.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 04 / 2016
Transaction ID : SA11A.470849
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION

B. SALT, HADDON, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address POP BOX 586
 257
 City BORREGO SPINGS State CA Zip Code 92004-
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 825.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 04 / 2016
Transaction ID : SA11A.470855
 Amount of Each Receipt this Period
 25.00
 Memo Item
 CONTRIBUTION

C. SALT, HADDON, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address POP BOX 586
 257
 City BORREGO SPINGS State CA Zip Code 92004-
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 825.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 04 / 2016
Transaction ID : SA11A.474255
 Amount of Each Receipt this Period
 30.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	155.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3213 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. SALT, HADDON, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address POP BOX 586
 257
 City BORREGO SPINGS State CA Zip Code 92004-
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 825.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 07 / 2016
Transaction ID : SA11A.475235
 Amount of Each Receipt this Period
 30.00
 Memo Item
 CONTRIBUTION

B. SALT, HADDON, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address POP BOX 586
 257
 City BORREGO SPINGS State CA Zip Code 92004-
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 825.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 05 / 2016
Transaction ID : SA11A.478569
 Amount of Each Receipt this Period
 30.00
 Memo Item
 CONTRIBUTION

C. SALTER, GARY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 219 BUENA VISTA AVE
 City PANAMA CITY State FL Zip Code 32413-3613
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 210.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 26 / 2016
Transaction ID : SA11A.450157
 Amount of Each Receipt this Period
 30.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	90.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3214 OF 4311
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. SALTER, GARY, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 219 BUENA VISTA AVE

City PANAMA CITY	State FL	Zip Code 32413-3613
---------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
210.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	26	/	2016

Transaction ID : SA11A.450158

Amount of Each Receipt this Period
30.00

Memo Item
CONTRIBUTION

B. SALTER, GARY, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 219 BUENA VISTA AVE

City PANAMA CITY	State FL	Zip Code 32413-3613
---------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
210.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	04	/	2016

Transaction ID : SA11A.472776

Amount of Each Receipt this Period
25.00

Memo Item
CONTRIBUTION

C. SALVAGGIO, A, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1432 CEDARWOOD ROAD

City ALLENTOWN	State PA	Zip Code 18104-2112
-------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) CAI	Occupation (for Individual) TECHNOLOGIST
--	---

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
450.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	04	/	2016

Transaction ID : SA11A.473390

Amount of Each Receipt this Period
100.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	155.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3215 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
-----------------------------	-----------------------------	-----------------------------

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NAME OF COMMITTEE (In Full)
Team Ryan

A. SALZBERG, ALLAN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 10671 SANDPIPER ST
 City BOISE State ID Zip Code 83709-1249
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 240.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 20 / 2016
Transaction ID : SA11A.444799
 Amount of Each Receipt this Period
 50.00
 Memo Item CONTRIBUTION

B. SALZBERG, ALLAN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 10671 SANDPIPER ST
 City BOISE State ID Zip Code 83709-1249
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 240.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 25 / 2016
Transaction ID : SA11A.448873
 Amount of Each Receipt this Period
 25.00
 Memo Item CONTRIBUTION

C. SALZBERG, ALLAN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 10671 SANDPIPER ST
 City BOISE State ID Zip Code 83709-1249
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 240.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 25 / 2016
Transaction ID : SA11A.451782
 Amount of Each Receipt this Period
 30.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	105.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3216 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. SALZBERG, ALLAN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 10671 SANDPIPER ST
 City BOISE State ID Zip Code 83709-1249
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 240.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 26 / 2016
Transaction ID : SA11A.454660
 Amount of Each Receipt this Period
 30.00
 Memo Item CONTRIBUTION

B. SALZBERG, ALLAN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 10671 SANDPIPER ST
 City BOISE State ID Zip Code 83709-1249
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 240.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 01 / 2016
Transaction ID : SA11A.462340
 Amount of Each Receipt this Period
 25.00
 Memo Item CONTRIBUTION

C. SALZBERG, ALLAN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 10671 SANDPIPER ST
 City BOISE State ID Zip Code 83709-1249
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 240.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 04 / 2016
Transaction ID : SA11A.473217
 Amount of Each Receipt this Period
 25.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	80.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3217 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. SAMBELL, ANDREW, , DR., M.D.
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 601 N GRAND
 City WAXAHACHIE State TX Zip Code 75165-1705
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) USMD Occupation (for Individual) PHYSICIAN
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1025.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 24 / 2016
Transaction ID : SA11A.446207
 Amount of Each Receipt this Period
 250.00
 Memo Item
 CONTRIBUTION

B. SAMMONS, BILL, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 121 ELLIOTT STREET
 City BEAUFORT State SC Zip Code 29902-5217
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 225.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 04 / 2016
Transaction ID : SA11A.471929
 Amount of Each Receipt this Period
 50.00
 Memo Item
 CONTRIBUTION

C. SAMPSON, ANNE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 7452 SPRING VILLAGE DR. 320
 City SPRINGFIELD State VA Zip Code 22150-4946
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 350.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 02 / 2016
Transaction ID : SA11A.469678
 Amount of Each Receipt this Period
 50.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	350.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3218 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. SAMPSON, ANNE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 7452 SPRING VILLAGE DR.
 320
 City SPRINGFIELD State VA Zip Code 22150-4946
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 350.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 07 / 2016
Transaction ID : SA11A.475832
 Amount of Each Receipt this Period
 25.00
 Memo Item
 CONTRIBUTION

B. SAMPSON, ANNE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 7452 SPRING VILLAGE DR.
 320
 City SPRINGFIELD State VA Zip Code 22150-4946
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 350.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 07 / 2016
Transaction ID : SA11A.475836
 Amount of Each Receipt this Period
 25.00
 Memo Item
 CONTRIBUTION

C. SAMPSON, SAM, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3730 S 14TH STREET
 City LINCOLN State NE Zip Code 68502-5316
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 1199.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 21 / 2016
Transaction ID : SA11A.443561
 Amount of Each Receipt this Period
 1000.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	1050.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3219 OF 4311
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. SAMSVICK, JOHN, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 14 HARVEST LANE

City WINDSOR LOCKS	State CT	Zip Code 06096-2028
-----------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
300.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	30	/	2016

Transaction ID : SA11A.460200

Amount of Each Receipt this Period
100.00

Memo Item CONTRIBUTION

B. SAMSVICK, JOHN, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 14 HARVEST LANE

City WINDSOR LOCKS	State CT	Zip Code 06096-2028
-----------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
300.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	04	/	2016

Transaction ID : SA11A.473844

Amount of Each Receipt this Period
100.00

Memo Item CONTRIBUTION

C. SAMUELSON, STEPHEN, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 5408 CAPELLA CT

City ATLANTIC BEACH	State FL	Zip Code 32233-4582
------------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
850.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	24	/	2016

Transaction ID : SA11A.445671

Amount of Each Receipt this Period
250.00

Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	450.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3220 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. SAN AGUSTIN, FE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 27074 WARNER AVENUE
 City WARREN State MI Zip Code 48092-2840
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt
 11 / 04 / 2016
Transaction ID : SA11A.472800
 Amount of Each Receipt this Period
 100.00
 Memo Item CONTRIBUTION

B. SANANIKONE, NANCY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1167 20 TH AVE
 City HONOLULU State HI Zip Code 96816-4649
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 275.00

Date of Receipt
 10 / 24 / 2016
Transaction ID : SA11A.446138
 Amount of Each Receipt this Period
 100.00
 Memo Item CONTRIBUTION

C. SANCHEZ, JANIS, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 104 MCKELVEY AVENUE
 City STOCKTON State CA Zip Code 95210-1934
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt
 11 / 01 / 2016
Transaction ID : SA11A.461610
 Amount of Each Receipt this Period
 250.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	450.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3221 OF 4311
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. SANCHEZ, MANUEL, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address **PO. BOX 910. 9 PINE COURT**

City **NEWFIELDS** State **NH** Zip Code **03856-0910**

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) **SELF EMPLOYED** Occupation (for Individual) **PHYSICIAN**

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **300.00**

Date of Receipt **10 / 22 / 2016**

Transaction ID : SA11A.446929

Amount of Each Receipt this Period **50.00**

Memo Item CONTRIBUTION

B. SANCHEZ, MANUEL, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address **PO. BOX 910. 9 PINE COURT**

City **NEWFIELDS** State **NH** Zip Code **03856-0910**

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) **SELF EMPLOYED** Occupation (for Individual) **PHYSICIAN**

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **300.00**

Date of Receipt **11 / 04 / 2016**

Transaction ID : SA11A.472622

Amount of Each Receipt this Period **50.00**

Memo Item CONTRIBUTION

C. SAND, KATHRYN, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address **3370 NANEUM RD**

City **ELLENSBURG** State **WA** Zip Code **98926-6964**

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) **OBGYN OF ELLENSBURG** Occupation (for Individual) **BUSINESS ASSISTANT**

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼ **650.00**

Date of Receipt **11 / 04 / 2016**

Transaction ID : SA11A.471454

Amount of Each Receipt this Period **50.00**

Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ **150.00**

TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3222 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. SANDBERG, GILBERT, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 531 EAST 3270 NORTH
 City LEHI State UT Zip Code 84043-3184
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 600.00

Date of Receipt 10 / 29 / 2016
Transaction ID : SA11A.464976
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

B. SANDELLA, AL, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 13817 N SUNFLOWER DR.
 City FOUNTAIN HILLS State AZ Zip Code 85268-6506
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 11 / 04 / 2016
Transaction ID : SA11A.472464
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

C. SANDERS, JOSEPH, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1924 GLENWOOD PARK ROAD
 City PRINCETON State WV Zip Code 24739-7969
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) INFORMATION REQUESTED PER BEST EFFORTS Occupation (for Individual) INFORMATION REQUESTED PER BEST EFFORTS
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 10 / 27 / 2016
Transaction ID : SA11A.452344
 Amount of Each Receipt this Period 500.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 800.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3223 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. SANDERS, L. J., , MR., JR.
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 680 US HIGHWAY 380
 City PLAINS State TX Zip Code 79355-3637
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 20 / 2016
Transaction ID : SA11A.433466
 Amount of Each Receipt this Period
 150.00
 Memo Item
 CONTRIBUTION

B. SANDERS, L. J., , MR., JR.
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 680 US HIGHWAY 380
 City PLAINS State TX Zip Code 79355-3637
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 08 / 2016
Transaction ID : SA11A.467983
 Amount of Each Receipt this Period
 150.00
 Memo Item
 CONTRIBUTION

C. SANDERS , LAURA , , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO BOX 13342
 City ALBUQUERQUE State NM Zip Code 87192-3342
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 275.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 02 / 2016
Transaction ID : SA11A.469809
 Amount of Each Receipt this Period
 25.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	325.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3224 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. SANDERS, LAURA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO BOX 13342
 City ALBUQUERQUE State NM Zip Code 87192-3342
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 275.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 06 / 2016
Transaction ID : SA11A.476807
 Amount of Each Receipt this Period
 25.00
 Memo Item
 CONTRIBUTION

B. SANDERS, MARILYN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 755 SCENIC RUN
 City CANYON LAKE State TX Zip Code 78133-6274
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 350.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 25 / 2016
Transaction ID : SA11A.447865
 Amount of Each Receipt this Period
 250.00
 Memo Item
 CONTRIBUTION

C. SANDERS, SANDY, A., MS.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 12 WINDOVER RD
 City GREENWOOD VILLAGE State CO Zip Code 80121-1216
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 225.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 07 / 2016
Transaction ID : SA11A.475353
 Amount of Each Receipt this Period
 25.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	300.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3225 OF 4311
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. SANDERS, SANDY, A., MS.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 12 WINDOVER RD

City GREENWOOD VILLAGE	State CO	Zip Code 80121-1216
---------------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
225.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	07	/	2016

Transaction ID : SA11A.475374

Amount of Each Receipt this Period
25.00

Memo Item CONTRIBUTION

B. SANDERS, TARA, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 4 TWELVE OAKS TRAIL

City ORMOND BEACH	State FL	Zip Code 32174-4954
----------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) COMPASS FINANCIAL	Occupation (for Individual) FINANCIAL PLANNER
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
950.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	20	/	2016

Transaction ID : SA11A.442126

Amount of Each Receipt this Period
250.00

Memo Item CONTRIBUTION

C. SANDERS, TARA, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 4 TWELVE OAKS TRAIL

City ORMOND BEACH	State FL	Zip Code 32174-4954
----------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) COMPASS FINANCIAL	Occupation (for Individual) FINANCIAL PLANNER
--	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
950.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	26	/	2016

Transaction ID : SA11A.450861

Amount of Each Receipt this Period
250.00

Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	525.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3226 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
-----------------------------	-----------------------------	-----------------------------

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NAME OF COMMITTEE (In Full)
Team Ryan

A. SANDERS, TARA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4 TWELVE OAKS TRAIL
 City ORMOND BEACH State FL Zip Code 32174-4954
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) COMPASS FINANCIAL Occupation (for Individual) FINANCIAL PLANNER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 950.00

Date of Receipt 11 / 02 / 2016
Transaction ID : SA11A.467084
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

B. SANDERS, TARA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4 TWELVE OAKS TRAIL
 City ORMOND BEACH State FL Zip Code 32174-4954
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) COMPASS FINANCIAL Occupation (for Individual) FINANCIAL PLANNER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 950.00

Date of Receipt 11 / 02 / 2016
Transaction ID : SA11A.467085
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

C. SANDLER, MICHAEL, F., DR., M.D.
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1079 VANCE TRAIL
 City THE VILLAGES State FL Zip Code 32162-8719
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 10 / 30 / 2016
Transaction ID : SA11A.460210
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	300.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3227 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. SANDOVAL, SALVADOR, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 731 EMERSON AVENUE
 City CALEXICO State CA Zip Code 92231-3101
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 11 / 07 / 2016
Transaction ID : SA11A.467735
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

B. SANDVIK, TERRENCE, P., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3400 SELKIRK DR
 City BURNSVILLE State MN Zip Code 55337-3246
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 350.00

Date of Receipt 10 / 24 / 2016
Transaction ID : SA11A.446006
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

C. SANDVIK, TERRENCE, P., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3400 SELKIRK DR
 City BURNSVILLE State MN Zip Code 55337-3246
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 350.00

Date of Receipt 11 / 05 / 2016
Transaction ID : SA11A.478943
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	175.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3228 OF 4311
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. SANFELIPPO, PETER, M., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1817 REVENEUX LANE
 City TYLER State TX Zip Code 75703-5877
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) PHYSICIAN
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt **10 / 21 / 2016**
Transaction ID : SA11A.443532
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

B. SANFORD, DENNY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 8700 E VISTA BONITA DRIVE #232
 City SCOTTSDALE State AZ Zip Code 85255-3202
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) THRESHOLD VENTURES Occupation (for Individual) BUSINESS EXECUTIVE
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt **11 / 03 / 2016**
Transaction ID : SA11A.468803
 Amount of Each Receipt this Period 300.00
 Memo Item CONTRIBUTION

C. SANSOM, JOHN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 9455 PENSACOLA BOULEVARD SUITE B
 City PENSACOLA State FL Zip Code 32534-1237
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) JOHN M. SANSOM, P.A. Occupation (for Individual) ACCOUNTANT
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 747.00

Date of Receipt **10 / 26 / 2016**
Transaction ID : SA11A.450383
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	650.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3229 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. SANTANA, DORIS, C., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2149 WAVERLY STREET
 City PALO ALTO State CA Zip Code 94301-3955
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) HOMEMAKER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 350.00

Date of Receipt 10 / 25 / 2016
Transaction ID : SA11A.447593
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

B. SANTNER, JOHN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5399 PLAYA VISTA DR E307
 City PLAYA VISTA State CA Zip Code 90094-2049
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 220.00

Date of Receipt 10 / 29 / 2016
Transaction ID : SA11A.461097
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

C. SANTNER, JOHN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5399 PLAYA VISTA DR E307
 City PLAYA VISTA State CA Zip Code 90094-2049
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 220.00

Date of Receipt 11 / 04 / 2016
Transaction ID : SA11A.470800
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	150.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3230 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. SAPIRO, STEPHEN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 439 MONTGOMERY ST.
 City SALINAS State CA Zip Code 93907-2041
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 715.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 25 / 2016
Transaction ID : SA11A.448322
 Amount of Each Receipt this Period
 25.00
 Memo Item
 CONTRIBUTION

B. SAPIRO, STEPHEN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 439 MONTGOMERY ST.
 City SALINAS State CA Zip Code 93907-2041
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 715.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 01 / 2016
Transaction ID : SA11A.462683
 Amount of Each Receipt this Period
 25.00
 Memo Item
 CONTRIBUTION

C. SAPIRO, STEPHEN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 439 MONTGOMERY ST.
 City SALINAS State CA Zip Code 93907-2041
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 715.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 01 / 2016
Transaction ID : SA11A.462685
 Amount of Each Receipt this Period
 25.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	75.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 3231 OF 4311
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. SARNO, EUGENE, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 3104 JORDAN GROVE

City WEST DES MOINES	State IA	Zip Code 50265-6456
-------------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) EUGENE SARNO	Occupation (for Individual) PHYSICIAN
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	29	/	2016

Transaction ID : SA11A.460701

Amount of Each Receipt this Period
100.00

Memo Item
CONTRIBUTION

B. SARNO, EUGENE, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 3104 JORDAN GROVE

City WEST DES MOINES	State IA	Zip Code 50265-6456
-------------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) EUGENE SARNO	Occupation (for Individual) PHYSICIAN
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	02	/	2016

Transaction ID : SA11A.469360

Amount of Each Receipt this Period
50.00

Memo Item
CONTRIBUTION

C. SARNO, EUGENE, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 3104 JORDAN GROVE

City WEST DES MOINES	State IA	Zip Code 50265-6456
-------------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) EUGENE SARNO	Occupation (for Individual) PHYSICIAN
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	02	/	2016

Transaction ID : SA11A.469366

Amount of Each Receipt this Period
50.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	200.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3232 OF 4311
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. SARNO, EUGENE, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 3104 JORDAN GROVE

City WEST DES MOINES	State IA	Zip Code 50265-6456
-------------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) EUGENE SARNO	Occupation (for Individual) PHYSICIAN
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	02	/	2016

Transaction ID : SA11A.469368

Amount of Each Receipt this Period
50.00

Memo Item
CONTRIBUTION

B. SARNS, RICHARD, N., ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 3645 DALEVIEW DRIVE

City ANN ARBOR	State MI	Zip Code 48105-9687
-------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) INFORMATION REQUESTED PER BEST EFFORTS	Occupation (for Individual) INFORMATION REQUESTED PER BE
---	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	24	/	2016

Transaction ID : SA11A.444051

Amount of Each Receipt this Period
1000.00

Memo Item
CONTRIBUTION

C. SARROW, MARK, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 2325 WARM SPRINGS LANE

City TEMPLETON	State CA	Zip Code 93465-8651
-------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	27	/	2016

Transaction ID : SA11A.456856

Amount of Each Receipt this Period
100.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	1150.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3233 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
Team Ryan

A. SASS, RAYMOND, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 116 EAST SHORE ROAD
 City NEW PRESTON State CT Zip Code 06777-1403
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) HMC Occupation (for Individual) HOME REMODELING
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 10 / 27 / 2016
Transaction ID : SA11A.453599
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

B. SAUCEDO, MAUREEN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO BOX 62
 3350 ROAD 12 SW
 City ROYAL CITY State WA Zip Code 99357-0062
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) MARKET GARDENER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 599.00

Date of Receipt 10 / 23 / 2016
Transaction ID : SA11A.446445
 Amount of Each Receipt this Period 228.00
 Memo Item CONTRIBUTION

C. SAUCEDO, MAUREEN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO BOX 62
 3350 ROAD 12 SW
 City ROYAL CITY State WA Zip Code 99357-0062
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) MARKET GARDENER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 599.00

Date of Receipt 10 / 31 / 2016
Transaction ID : SA11A.458539
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	378.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3234 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. SAUCEDO, MAUREEN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO BOX 62
 3350 ROAD 12 SW
 City ROYAL CITY State WA Zip Code 99357-0062
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) MARKET GARDENER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 599.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 03 / 2016
Transaction ID : SA11A.468838
 Amount of Each Receipt this Period
 50.00
 Memo Item
 CONTRIBUTION

B. SAUCEDO, MAUREEN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO BOX 62
 3350 ROAD 12 SW
 City ROYAL CITY State WA Zip Code 99357-0062
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) MARKET GARDENER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 599.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 06 / 2016
Transaction ID : SA11A.478250
 Amount of Each Receipt this Period
 50.00
 Memo Item
 CONTRIBUTION

C. SAUCEDO, MAUREEN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO BOX 62
 3350 ROAD 12 SW
 City ROYAL CITY State WA Zip Code 99357-0062
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) MARKET GARDENER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 599.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 06 / 2016
Transaction ID : SA11A.478251
 Amount of Each Receipt this Period
 50.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	150.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3235 OF 4311
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
Team Ryan

A. SAUER, MARY, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 3121 BOWL PLACE

City SOLVANG	State CA	Zip Code 93463-3030
-----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
275.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	28	/	2016

Transaction ID : SA11A.456419

Amount of Each Receipt this Period
50.00

Memo Item
CONTRIBUTION

B. SAUER, MARY, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 3121 BOWL PLACE

City SOLVANG	State CA	Zip Code 93463-3030
-----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
275.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	06	/	2016

Transaction ID : SA11A.477177

Amount of Each Receipt this Period
50.00

Memo Item
CONTRIBUTION

C. SAUER, MARY, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 3121 BOWL PLACE

City SOLVANG	State CA	Zip Code 93463-3030
-----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
275.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	05	/	2016

Transaction ID : SA11A.478672

Amount of Each Receipt this Period
50.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	150.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3236 OF 4311
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. SAUERS, RICHARD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 201 W. PONCE DE LEON AVE.
 31
 City DECATUR State GA Zip Code 30030-3217
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) THE SAUERS GROUP, INC Occupation (for Individual) PRES/CEO
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 635.00

Date of Receipt 10 / 27 / 2016
Transaction ID : SA11A.456878
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

B. SAUNDERS, NANCY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1032 CORONADO LANE
 City LYNCHBURG State VA Zip Code 24502-1720
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 880.00

Date of Receipt 10 / 25 / 2016
Transaction ID : SA11A.448122
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

C. SAUNDERS, NANCY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1032 CORONADO LANE
 City LYNCHBURG State VA Zip Code 24502-1720
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 880.00

Date of Receipt 10 / 24 / 2016
Transaction ID : SA11A.449202
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 250.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3237 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
Team Ryan

A. SAUNDERS, NANCY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1032 CORONADO LANE
 City LYNCHBURG State VA Zip Code 24502-1720
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 880.00

Date of Receipt 10 / 31 / 2016
Transaction ID : SA11A.458082
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

B. SAUNDERS, NANCY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1032 CORONADO LANE
 City LYNCHBURG State VA Zip Code 24502-1720
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 880.00

Date of Receipt 10 / 31 / 2016
Transaction ID : SA11A.458084
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

C. SAUNDERS, NANCY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1032 CORONADO LANE
 City LYNCHBURG State VA Zip Code 24502-1720
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 880.00

Date of Receipt 11 / 03 / 2016
Transaction ID : SA11A.468938
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	75.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3238 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
-----------------------------	-----------------------------	-----------------------------

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NAME OF COMMITTEE (In Full)
Team Ryan

A. SAUNDERS, NANCY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1032 CORONADO LANE
 City LYNCHBURG State VA Zip Code 24502-1720
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 880.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 03 / 2016
Transaction ID : SA11A.468939
 Amount of Each Receipt this Period
 25.00
 Memo Item
 CONTRIBUTION

B. SAUNDERS, NANCY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1032 CORONADO LANE
 City LYNCHBURG State VA Zip Code 24502-1720
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 880.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 03 / 2016
Transaction ID : SA11A.468945
 Amount of Each Receipt this Period
 25.00
 Memo Item
 CONTRIBUTION

C. SAUNDERS, NANCY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1032 CORONADO LANE
 City LYNCHBURG State VA Zip Code 24502-1720
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 880.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 03 / 2016
Transaction ID : SA11A.468947
 Amount of Each Receipt this Period
 25.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	75.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3239 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. SAUNDERS, WALLACE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 624 HAWK RUN
 City O FALLON State MO Zip Code 63368-8185
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 325.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 25 / 2016
Transaction ID : SA11A.448480
 Amount of Each Receipt this Period
 25.00
 Memo Item
 CONTRIBUTION

B. SAUNDERS, WALLACE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 624 HAWK RUN
 City O FALLON State MO Zip Code 63368-8185
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 325.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 02 / 2016
Transaction ID : SA11A.467065
 Amount of Each Receipt this Period
 25.00
 Memo Item
 CONTRIBUTION

C. SAUNDERS, WALLACE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 624 HAWK RUN
 City O FALLON State MO Zip Code 63368-8185
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 325.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 03 / 2016
Transaction ID : SA11A.469013
 Amount of Each Receipt this Period
 25.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	75.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3240 OF 4311
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. SAUNDERS, WALLACE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 624 HAWK RUN
 City O FALLON State MO Zip Code 63368-8185
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 325.00

Date of Receipt 11 / 05 / 2016
Transaction ID : SA11A.479196
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

B. SAUTTER, GREGG, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1008 SOUTH AVE. W.
 City MISSOULA State MT Zip Code 59801-7909
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF=SAUTTER FINANCIAL Occupation (for Individual) FINANCIAL ADVISER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 225.00

Date of Receipt 10 / 24 / 2016
Transaction ID : SA11A.449149
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

C. SAVAGE, STEPHEN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 23 HOPE CORSON RD
 City OCEAN VIEW State NJ Zip Code 08230-1307
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 10 / 22 / 2016
Transaction ID : SA11A.446883
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶ 150.00
TOTAL This Period (last page this line number only).....▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3241 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. SAWYER, JAMES, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 37578 DALE DRIVE
 City NEW BOSTON State MI Zip Code 48164-9047
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SOCIETY OF MANUFACTURING ENGINEERS Occupation (for Individual) JOURNALIST
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 700.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 04 / 2016
Transaction ID : SA11A.471732
 Amount of Each Receipt this Period
 100.00
 Memo Item
CONTRIBUTION

B. SAWYERS, PEGGY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 161 BULLPASTURE RIVER ROAD
 City MCDOWELL State VA Zip Code 24458-2144
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 400.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 26 / 2016
Transaction ID : SA11A.447739
 Amount of Each Receipt this Period
 200.00
 Memo Item
CONTRIBUTION

C. SAYRE, JILL, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 6500 SOTER
 City AUSTIN State TX Zip Code 78735-6136
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 400.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 27 / 2016
Transaction ID : SA11A.457056
 Amount of Each Receipt this Period
 100.00
 Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	400.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 3242 OF 4311
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. SAYRE, JILL, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 6500 SOTER

City AUSTIN	State TX	Zip Code 78735-6136
----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
400.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	30	/	2016

Transaction ID : SA11A.464873

Amount of Each Receipt this Period
100.00

Memo Item CONTRIBUTION

B. SAYRE, STEPHEN, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 10095 UPLAND ROAD

City ENSIGN	State KS	Zip Code 67841-9306
----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) SELF EMPLOYED	Occupation (for Individual) FARMER
--	---------------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
600.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	01	/	2016

Transaction ID : SA11A.467428

Amount of Each Receipt this Period
100.00

Memo Item CONTRIBUTION

C. SAYRE, STEPHEN, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 10095 UPLAND ROAD

City ENSIGN	State KS	Zip Code 67841-9306
----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) SELF EMPLOYED	Occupation (for Individual) FARMER
--	---------------------------------------

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
600.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	01	/	2016

Transaction ID : SA11A.467432

Amount of Each Receipt this Period
100.00

Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	300.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3243 OF 4311
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. SCALES, JOHN, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 23 HUNTING COUNTRY ROAD
City TRYON State NC Zip Code 28782-9675
FEC ID number of contributing federal political committee. **C**
Name of Employer (for Individual) SYNTHETEX, LLC Occupation (for Individual) EXECUTIVE
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 1100.00

Date of Receipt 10 / 29 / 2016
Transaction ID : SA11A.461062
Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

B. SCALES, JOHN, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 23 HUNTING COUNTRY ROAD
City TRYON State NC Zip Code 28782-9675
FEC ID number of contributing federal political committee. **C**
Name of Employer (for Individual) SYNTHETEX, LLC Occupation (for Individual) EXECUTIVE
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 1100.00

Date of Receipt 11 / 04 / 2016
Transaction ID : SA11A.471496
Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

C. SCANLON, GAYLE, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 232 LOCH LOMOND
City RANCHO MIRAGE State CA Zip Code 92270-5603
FEC ID number of contributing federal political committee. **C**
Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
Receipt For: Primary General Other (specify)
Aggregate Year-to-Date ▼ 300.00

Date of Receipt 10 / 25 / 2016
Transaction ID : SA11A.451785
Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 550.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3244 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. SCANLON, GAYLE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 232 LOCH LOMOND
 City RANCHO MIRAGE State CA Zip Code 92270-5603
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 10 / 25 / 2016
Transaction ID : SA11A.451786
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

B. SCARFF, WAYLAND, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 501 AUBURN WAY N.
 City AUBURN State WA Zip Code 98002-4336
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) WAY SCARFF FORD Occupation (for Individual) AUTO DEALER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 10 / 20 / 2016
Transaction ID : SA11A.442448
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

C. SCARFF, WAYLAND, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 501 AUBURN WAY N.
 City AUBURN State WA Zip Code 98002-4336
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) WAY SCARFF FORD Occupation (for Individual) AUTO DEALER
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 11 / 04 / 2016
Transaction ID : SA11A.473313
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶ 150.00
TOTAL This Period (last page this line number only).....▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3245 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. SCHACHTE, WILLIAM, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 172 BROAD ST
 City CHARLESTON State SC Zip Code 29401-2453
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 475.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 22 / 2016
Transaction ID : SA11A.447006
 Amount of Each Receipt this Period
 25.00
 Memo Item
 CONTRIBUTION

B. SCHACHTE, WILLIAM, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 172 BROAD ST
 City CHARLESTON State SC Zip Code 29401-2453
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 475.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 31 / 2016
Transaction ID : SA11A.464295
 Amount of Each Receipt this Period
 25.00
 Memo Item
 CONTRIBUTION

C. SCHACHTE, WILLIAM, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 172 BROAD ST
 City CHARLESTON State SC Zip Code 29401-2453
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 475.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 31 / 2016
Transaction ID : SA11A.464298
 Amount of Each Receipt this Period
 25.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 75.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3246 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
A. SCHACHTE, WILLIAM, , ,

Mailing Address **172 BROAD ST**

City CHARLESTON	State SC	Zip Code 29401-2453
---------------------------	--------------------	-------------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
--	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
475.00

Date of Receipt
11 / 04 / 2016

Transaction ID : SA11A.471192

Amount of Each Receipt this Period
25.00

Memo Item
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
B. SCHAEFER, BARBARA, , ,

Mailing Address **436 W THOUSAND OAKS DRIVE**

City PEORIA	State IL	Zip Code 61615-1394
-----------------------	--------------------	-------------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) INFORMATION REQUESTED PER BEST EFFORTS	Occupation (for Individual) INFORMATION REQUESTED PER BE
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
300.00

Date of Receipt
11 / 01 / 2016

Transaction ID : SA11A.461673

Amount of Each Receipt this Period
300.00

Memo Item
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
C. SCHAERR, GENE, , ,

Mailing Address **17502 BOWIE MILL RD**

City DERWOOD	State MD	Zip Code 20855-1603
------------------------	--------------------	-------------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) SCHAERR DUNCAN	Occupation (for Individual) ATTORNEY
--	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
1100.00

Date of Receipt
10 / 20 / 2016

Transaction ID : SA11A.444702

Amount of Each Receipt this Period
1000.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	1325.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3247 OF 4311
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. SCHAEFER, IRENE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 272 FAIRMOUNT AVE
 City CHATHAM State NJ Zip Code 07928-1825
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 925.00

Date of Receipt **10 / 25 / 2016**
Transaction ID : SA11A.448154
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

B. SCHAEFER, MICHAEL, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO BOX 71
 City EASTHAMPTON State MA Zip Code 01027-0071
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) INFORMATION REQUESTED PER BEST EFFORTS Occupation (for Individual) INFORMATION REQUESTED PER BE
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt **11 / 07 / 2016**
Transaction ID : SA11A.467809
 Amount of Each Receipt this Period 500.00
 Memo Item CONTRIBUTION

C. SCHAEFER, NORMAN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 272 FAIRMOUNT AVE
 City CHATHAM State NJ Zip Code 07928-1825
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 600.00

Date of Receipt **10 / 31 / 2016**
Transaction ID : SA11A.457662
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 700.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3248 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. SCHAEFER, NORMAN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 272 FAIRMOUNT AVE
 City CHATHAM State NJ Zip Code 07928-1825
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 600.00

Date of Receipt 11 / 02 / 2016
Transaction ID : SA11A.466457
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

B. SCHAEFFER, WILLIAM, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2700 PACES FERRY ROAD SE 605
 City ATLANTA State GA Zip Code 30339-4020
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) CONSULTANT
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1050.00

Date of Receipt 10 / 25 / 2016
Transaction ID : SA11A.447885
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

C. SCHAEFFER, WILLIAM, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2700 PACES FERRY ROAD SE 605
 City ATLANTA State GA Zip Code 30339-4020
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) CONSULTANT
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1050.00

Date of Receipt 10 / 25 / 2016
Transaction ID : SA11A.447890
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	600.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3249 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. SCHAEFFER, WILLIAM, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2700 PACES FERRY ROAD SE
 605
 City ATLANTA State GA Zip Code 30339-4020
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) CONSULTANT
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1050.00

Date of Receipt 10 / 31 / 2016
Transaction ID : SA11A.457499
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

B. SCHAFER, EDWIN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3875 S 177 AVE
 City OMAHA State NE Zip Code 68130-2230
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 214.00

Date of Receipt 10 / 29 / 2016
Transaction ID : SA11A.460356
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

C. SCHAFFER, FREDERICK, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 411 N 6TH ST 3877
 City EMERY State SD Zip Code 57332-2124
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 10 / 30 / 2016
Transaction ID : SA11A.459960
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶ 125.00
TOTAL This Period (last page this line number only).....▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3250 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. SCHAFFER, FREDERICK, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 411 N 6TH ST 3877

City EMERY	State SD	Zip Code 57332-2124
---------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
300.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 02 / 2016
Transaction ID : SA11A.466623

Amount of Each Receipt this Period
50.00

Memo Item CONTRIBUTION

B. SCHAFFER, FREDERICK, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 411 N 6TH ST 3877

City EMERY	State SD	Zip Code 57332-2124
---------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
300.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 01 / 2016
Transaction ID : SA11A.467263

Amount of Each Receipt this Period
50.00

Memo Item CONTRIBUTION

C. SCHAFFER, FREDERICK, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 411 N 6TH ST 3877

City EMERY	State SD	Zip Code 57332-2124
---------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
300.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 01 / 2016
Transaction ID : SA11A.467266

Amount of Each Receipt this Period
50.00

Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	150.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3251 OF 4311
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. SCHAFFER, FREDERICK, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 411 N 6TH ST 3877
 City EMERY State SD Zip Code 57332-2124
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 11 / 01 / 2016
Transaction ID : SA11A.467267
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

B. SCHANEL, GLENN, , MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 12632 CITRUS GROVE BLVD
 City WEST PALM BEACH State FL Zip Code 33412-2375
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SCHANEL & ASSOCIATES Occupation (for Individual) CPA
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt 10 / 27 / 2016
Transaction ID : SA11A.453841
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

C. SCHANK, ROBERT, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1329 SANFORD LANE
 City GLENVIEW State IL Zip Code 60025-3100
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 10 / 31 / 2016
Transaction ID : SA11A.458753
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	200.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3252 OF 4311
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. SCHEETZ, RICHARD, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 8985 SUNNINGDALE LANE

City DUNLIN	State OH	Zip Code 43017-9300
----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) ORAL AND FACIAL SURGEONS OF OHIO	Occupation (for Individual) ORAL SURGEON
---	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
400.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		20		2016

Transaction ID : SA11A.444776

Amount of Each Receipt this Period
100.00

Memo Item
CONTRIBUTION

B. SCHEETZ, RICHARD, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 8985 SUNNINGDALE LANE

City DUNLIN	State OH	Zip Code 43017-9300
----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) ORAL AND FACIAL SURGEONS OF OHIO	Occupation (for Individual) ORAL SURGEON
---	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
400.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		29		2016

Transaction ID : SA11A.461003

Amount of Each Receipt this Period
100.00

Memo Item
CONTRIBUTION

C. SCHEIDT, EDRA, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 3667 W. ST. RD. 44

City SHELBYVILLE	State IN	Zip Code 46176-8837
---------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
368.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		27		2016

Transaction ID : SA11A.453319

Amount of Each Receipt this Period
25.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	225.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3253 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. SCHEIDT, EDRA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3667 W. ST. RD. 44
 City SHELBYVILLE State IN Zip Code 46176-8837
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 368.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 27 / 2016
Transaction ID : SA11A.453321
 Amount of Each Receipt this Period
 25.00
 Memo Item
 CONTRIBUTION

B. SCHEIDT, EDRA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3667 W. ST. RD. 44
 City SHELBYVILLE State IN Zip Code 46176-8837
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 368.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 03 / 2016
Transaction ID : SA11A.468677
 Amount of Each Receipt this Period
 25.00
 Memo Item
 CONTRIBUTION

C. SCHEIDT, EDRA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3667 W. ST. RD. 44
 City SHELBYVILLE State IN Zip Code 46176-8837
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 368.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 03 / 2016
Transaction ID : SA11A.468678
 Amount of Each Receipt this Period
 25.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	75.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3254 OF 4311
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. SCHELL, JAMES, M., MR.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1050 FIFTH AVENUE
8D

City NEW YORK State NY Zip Code 10028-0110

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) SKADDEN ARPS Occupation (for Individual) ATTORNEY

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 1200.00

Date of Receipt 10 / 20 / 2016
Transaction ID : SA11A.444840

Amount of Each Receipt this Period 500.00

Memo Item CONTRIBUTION

B. SCHELZI, R DAVID, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address PO BOX 540

City WAKEFIELD State MA Zip Code 01880-4440

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) WAKEFIELD INVESTMENTS INC Occupation (for Individual) PRESIDENT

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 1000.00

Date of Receipt 10 / 24 / 2016
Transaction ID : SA11A.443731

Amount of Each Receipt this Period 1000.00

Memo Item CONTRIBUTION

C. SCHENCK, GEORGE, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address P O BOX493

City GENOA State NV Zip Code 89411-0493

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED

Receipt For: Primary General Other (specify)

Aggregate Year-to-Date ▼ 300.00

Date of Receipt 11 / 04 / 2016
Transaction ID : SA11A.474162

Amount of Each Receipt this Period 50.00

Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶ 1550.00

TOTAL This Period (last page this line number only).....▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3255 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. SCHENCK, ROBERT, R., , M.D.
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1100 N LAKE SHORE DRIVE
 33-A
 City CHICAGO State IL Zip Code 60611-1070
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 900.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 26 / 2016
Transaction ID : SA11A.451112
 Amount of Each Receipt this Period
 50.00
 Memo Item
 CONTRIBUTION

B. SCHENCK, ROBERT, R., , M.D.
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1100 N LAKE SHORE DRIVE
 33-A
 City CHICAGO State IL Zip Code 60611-1070
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 900.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 25 / 2016
Transaction ID : SA11A.451797
 Amount of Each Receipt this Period
 50.00
 Memo Item
 CONTRIBUTION

C. SCHENCK, ROBERT, R., , M.D.
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1100 N LAKE SHORE DRIVE
 33-A
 City CHICAGO State IL Zip Code 60611-1070
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 900.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 04 / 2016
Transaction ID : SA11A.472868
 Amount of Each Receipt this Period
 50.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 150.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3256 OF 4311
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. SCHENCK, ROBERT, R., , M.D.
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1100 N LAKE SHORE DRIVE
33-A

City CHICAGO State IL Zip Code 60611-1070

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
900.00

Date of Receipt
MM / DD / YYYY
11 / 04 / 2016

Transaction ID : SA11A.473136

Amount of Each Receipt this Period
50.00

Memo Item CONTRIBUTION

B. SCHENCK, ROBERT, R., , M.D.
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1100 N LAKE SHORE DRIVE
33-A

City CHICAGO State IL Zip Code 60611-1070

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
900.00

Date of Receipt
MM / DD / YYYY
11 / 07 / 2016

Transaction ID : SA11A.476562

Amount of Each Receipt this Period
25.00

Memo Item CONTRIBUTION

C. SCHENCK, ROBERT, R., , M.D.
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1100 N LAKE SHORE DRIVE
33-A

City CHICAGO State IL Zip Code 60611-1070

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
900.00

Date of Receipt
MM / DD / YYYY
11 / 05 / 2016

Transaction ID : SA11A.478576

Amount of Each Receipt this Period
50.00

Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 125.00

TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3257 OF 4311
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. SCHEPPERLY, MICHAEL, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 3330 ROCKDALE DR

City PORTER	State TX	Zip Code 77365-8522
----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
300.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	24	/	2016

Transaction ID : SA11A.449534

Amount of Each Receipt this Period
50.00

Memo Item
CONTRIBUTION

B. SCHEPPERLY, MICHAEL, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 3330 ROCKDALE DR

City PORTER	State TX	Zip Code 77365-8522
----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
300.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	04	/	2016

Transaction ID : SA11A.471412

Amount of Each Receipt this Period
50.00

Memo Item
CONTRIBUTION

C. SCHERR, JEAN, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 3064 RIVERDALE RD

City THE VILLAGES	State FL	Zip Code 32162-7604
----------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
225.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	31	/	2016

Transaction ID : SA11A.464126

Amount of Each Receipt this Period
25.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	125.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3258 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
-----------------------------	-----------------------------	-----------------------------

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NAME OF COMMITTEE (In Full)
Team Ryan

A. SCHERR, JEAN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3064 RIVERDALE RD
 City THE VILLAGES State FL Zip Code 32162-7604
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 225.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 31 / 2016
Transaction ID : SA11A.464351
 Amount of Each Receipt this Period
 25.00
 Memo Item
 CONTRIBUTION

B. SCHERR, JEAN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3064 RIVERDALE RD
 City THE VILLAGES State FL Zip Code 32162-7604
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 225.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 04 / 2016
Transaction ID : SA11A.472629
 Amount of Each Receipt this Period
 25.00
 Memo Item
 CONTRIBUTION

C. SCHERR, JEAN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3064 RIVERDALE RD
 City THE VILLAGES State FL Zip Code 32162-7604
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 225.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 07 / 2016
Transaction ID : SA11A.476085
 Amount of Each Receipt this Period
 25.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	75.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3259 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. SCHER, MICHAEL, R., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4211 W BEACHWAY DRIVE
 City TAMPA State FL Zip Code 33609-4302
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) DENTIST
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 10 / 25 / 2016
Transaction ID : SA11A.447268
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

B. SCHEUPLEIN, D, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 548 DIVINE CIRCLE
 City ORLANDO State FL Zip Code 32828-8143
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 750.00

Date of Receipt 10 / 30 / 2016
Transaction ID : SA11A.464947
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

C. SCHEUPLEIN, D, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 548 DIVINE CIRCLE
 City ORLANDO State FL Zip Code 32828-8143
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 750.00

Date of Receipt 11 / 04 / 2016
Transaction ID : SA11A.473979
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	550.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3260 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. SCHEUER, JAMES, C., COL., USAF RET.
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 18150 PRAIRIEAVE
221

City TORRANCE State CA Zip Code 90504-3723

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
786.00

Date of Receipt
10 / 20 / 2016
Transaction ID : SA11A.442027

Amount of Each Receipt this Period
50.00

Memo Item CONTRIBUTION

B. SCHEUER, JAMES, C., COL., USAF RET.
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 18150 PRAIRIEAVE
221

City TORRANCE State CA Zip Code 90504-3723

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
786.00

Date of Receipt
10 / 27 / 2016
Transaction ID : SA11A.452890

Amount of Each Receipt this Period
50.00

Memo Item CONTRIBUTION

C. SCHEUER, JAMES, C., COL., USAF RET.
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 18150 PRAIRIEAVE
221

City TORRANCE State CA Zip Code 90504-3723

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
786.00

Date of Receipt
10 / 30 / 2016
Transaction ID : SA11A.459392

Amount of Each Receipt this Period
50.00

Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶ 150.00

TOTAL This Period (last page this line number only).....▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3261 OF 4311
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. SCHEUER, JAMES, C., COL., USAF RET.
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 18150 PRAIRIEAVE
221

City TORRANCE State CA Zip Code 90504-3723

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
786.00

Date of Receipt
M M M / D D D / Y Y Y Y Y Y
10 / 29 / 2016

Transaction ID : SA11A.460403

Amount of Each Receipt this Period
50.00

Memo Item CONTRIBUTION

B. SCHEUER, JAMES, C., COL., USAF RET.
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 18150 PRAIRIEAVE
221

City TORRANCE State CA Zip Code 90504-3723

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
786.00

Date of Receipt
M M M / D D D / Y Y Y Y Y Y
11 / 02 / 2016

Transaction ID : SA11A.466580

Amount of Each Receipt this Period
100.00

Memo Item CONTRIBUTION

C. SCHEURER, JOHN, M., ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 470 HOLT AVE

City WINTER PARK State FL Zip Code 32789-5075

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
500.00

Date of Receipt
M M M / D D D / Y Y Y Y Y Y
10 / 31 / 2016

Transaction ID : SA11A.464153

Amount of Each Receipt this Period
100.00

Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	250.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3262 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13 <input type="checkbox"/> 11b <input type="checkbox"/> 14 <input type="checkbox"/> 11c <input type="checkbox"/> 15 <input type="checkbox"/> 12 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. SCHIAVONI, VICTORIA, I.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 391 FERRY ROAD
 City SAG HARBOR State NY Zip Code 11963-1029
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 262.00

Date of Receipt 10 / 20 / 2016
Transaction ID : SA11A.444674
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

B. SCHIELKE, SHERRI, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 8243 E VISTA DE VALLE
 City SCOTTSDALE State AZ Zip Code 85255-4210
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 10 / 26 / 2016
Transaction ID : SA11A.454415
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

C. SCHIELKE, SHERRI, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 8243 E VISTA DE VALLE
 City SCOTTSDALE State AZ Zip Code 85255-4210
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 11 / 02 / 2016
Transaction ID : SA11A.466451
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	125.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3263 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. SCHIEBER, SYLVESTER, J., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 6925 MEADOWLAKE RD
 City NEW MARKET State MD Zip Code 21774-6913
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) ECONOMIC CONSULATANT
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 300.00

Date of Receipt 10 / 21 / 2016
Transaction ID : SA11A.444142
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

B. SCHIEBER, SYLVESTER, J., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 6925 MEADOWLAKE RD
 City NEW MARKET State MD Zip Code 21774-6913
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) ECONOMIC CONSULATANT
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 300.00

Date of Receipt 10 / 21 / 2016
Transaction ID : SA11A.444143
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

C. SCHIELD, WENDI, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3150 ROCKBROOK LANE
 City COLORADO SPRINGS State CO Zip Code 80904-1115
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) Aggregate Year-to-Date ▼ 1100.00

Date of Receipt 10 / 21 / 2016
Transaction ID : SA11A.444543
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	300.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3264 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. SCHIELD, WENDI, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3150 ROCKBROOK LANE
 City COLORADO SPRINGS State CO Zip Code 80904-1115
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1100.00

Date of Receipt **11 / 04 / 2016**
Transaction ID : SA11A.471798
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

B. SCHILDT, GARY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address W 1454 S SHORE DR
 City EAST TROY State WI Zip Code 53120-2102
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt **10 / 22 / 2016**
Transaction ID : SA11A.446996
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

C. SCHILDT, GARY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address W 1454 S SHORE DR
 City EAST TROY State WI Zip Code 53120-2102
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt **11 / 04 / 2016**
Transaction ID : SA11A.471053
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	200.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3265 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. SCHILLING, PAUL, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5209 CYPRESS RANCH BLVD
 City SPICEWOOD State TX Zip Code 78669-6844
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt
 11 / 01 / 2016
Transaction ID : SA11A.462552
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

B. SCHILLING, PAUL, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5209 CYPRESS RANCH BLVD
 City SPICEWOOD State TX Zip Code 78669-6844
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt
 11 / 07 / 2016
Transaction ID : SA11A.475165
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

C. SCHILDKNECHT, RAINER, , MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 211 WOODLAWN AVE
 City WINNETKA State IL Zip Code 60093-1552
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RAINER SCHILDKNECHT Occupation (for Individual) ARCHITECT
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 655.00

Date of Receipt
 10 / 25 / 2016
Transaction ID : SA11A.448162
 Amount of Each Receipt this Period 30.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶ 130.00
TOTAL This Period (last page this line number only).....▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3266 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
Team Ryan

A. SCHILDKNECHT, RAINER, , MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 211 WOODLAWN AVE
 City WINNETKA State IL Zip Code 60093-1552
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RAINER SCHILDKNECHT Occupation (for Individual) ARCHITECT
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 655.00

Date of Receipt 10 / 30 / 2016
Transaction ID : SA11A.460107
 Amount of Each Receipt this Period 75.00
 Memo Item CONTRIBUTION

B. SCHILDKNECHT, RAINER, , MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 211 WOODLAWN AVE
 City WINNETKA State IL Zip Code 60093-1552
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RAINER SCHILDKNECHT Occupation (for Individual) ARCHITECT
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 655.00

Date of Receipt 11 / 04 / 2016
Transaction ID : SA11A.472581
 Amount of Each Receipt this Period 75.00
 Memo Item CONTRIBUTION

C. SCHIRM, LOUIS, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 411 N. 6TH ST. 4136
 City EMERY State SD Zip Code 57332-2124
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 11 / 04 / 2016
Transaction ID : SA11A.473367
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶ 250.00
TOTAL This Period (last page this line number only).....▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3267 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. SCHLAG, KAREN, S., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 6142 WHISKEY CREEK DRIVE
 APT 627
 City FORT MYERS State FL Zip Code 33919-8738
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) INFORMATION REQUESTED PER BEST EFFORTS Occupation (for Individual) INFORMATION REQUESTED PER BE
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 201.00

Date of Receipt 11 / 01 / 2016
Transaction ID : SA11A.461742
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

B. SCHLAEPFER, WALTER, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 407 DETWILLER LANE
 City BELLEVUE State WA Zip Code 98004-6723
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) MERRILL LYNCH Occupation (for Individual) ADVISOR
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 2500.00

Date of Receipt 11 / 22 / 2016
Transaction ID : SA11A.481058
 Amount of Each Receipt this Period 2500.00
 Memo Item CONTRIBUTION

C. SCHLEI, DANIELLE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4352 LYCEUM AVENUE
 City LOS ANGELES State CA Zip Code 90066-6104
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NOTRE DAME ACADEMY Occupation (for Individual) TEACHER
 Receipt For: Primary General Other (specify) Aggregate Year-to-Date ▼ 309.00

Date of Receipt 10 / 28 / 2016
Transaction ID : SA11A.461405
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	2700.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3268 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. SCHLENDORF, DAVID, W., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 6111 5TH AVENUE 302
 City PITTSBURGH State PA Zip Code 15232-2863
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt 10 / 25 / 2016
Transaction ID : SA11A.448734
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

B. SCHLENDORF, DAVID, W., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 6111 5TH AVENUE 302
 City PITTSBURGH State PA Zip Code 15232-2863
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt 10 / 25 / 2016
Transaction ID : SA11A.448744
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

C. SCHLENDORF, DAVID, W., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 6111 5TH AVENUE 302
 City PITTSBURGH State PA Zip Code 15232-2863
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt 10 / 31 / 2016
Transaction ID : SA11A.458033
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶ 125.00
TOTAL This Period (last page this line number only).....▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3269 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name A. SCHLENKER, KATHLEEN, , ,		Date of Receipt M M M / D D D / Y Y Y Y Y Y 10 / 24 / 2016
Mailing Address 8944 S HOYNE AVENUE		Transaction ID : SA11A.443751
City CHICAGO	State IL	Zip Code 60643-5932
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 200.00
Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED	<input type="checkbox"/> Memo Item CONTRIBUTION
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 400.00	

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name B. SCHLIFKE, BERNARD, , ,		Date of Receipt M M M / D D D / Y Y Y Y Y Y 10 / 26 / 2016
Mailing Address 19512 PLANTERS POINT DRIVE		Transaction ID : SA11A.454635
City BOCA RATON	State FL	Zip Code 33434-5146
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 100.00
Name of Employer (for Individual) ARONBERG GOLDGEHN	Occupation (for Individual) ATTORNEY	<input type="checkbox"/> Memo Item CONTRIBUTION
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1096.00	

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name C. SCHLIFKE, BERNARD, , ,		Date of Receipt M M M / D D D / Y Y Y Y Y Y 10 / 26 / 2016
Mailing Address 19512 PLANTERS POINT DRIVE		Transaction ID : SA11A.454636
City BOCA RATON	State FL	Zip Code 33434-5146
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 100.00
Name of Employer (for Individual) ARONBERG GOLDGEHN	Occupation (for Individual) ATTORNEY	<input type="checkbox"/> Memo Item CONTRIBUTION
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Aggregate Year-to-Date ▼ 1096.00	

SUBTOTAL of Receipts This Page (optional).....▶	400.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3270 OF 4311
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. SCHLIFKE, BERNARD, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 19512 PLANTERS POINT DRIVE

City BOCA RATON	State FL	Zip Code 33434-5146
--------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) ARONBERG GOLDGEHN	Occupation (for Individual) ATTORNEY
--	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1096.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		31		2016

Transaction ID : SA11A.457622

Amount of Each Receipt this Period
50.00

Memo Item
CONTRIBUTION

B. SCHLIFKE, BERNARD, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 19512 PLANTERS POINT DRIVE

City BOCA RATON	State FL	Zip Code 33434-5146
--------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) ARONBERG GOLDGEHN	Occupation (for Individual) ATTORNEY
--	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1096.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		31		2016

Transaction ID : SA11A.457624

Amount of Each Receipt this Period
50.00

Memo Item
CONTRIBUTION

C. SCHLIFKE, BERNARD, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 19512 PLANTERS POINT DRIVE

City BOCA RATON	State FL	Zip Code 33434-5146
--------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) ARONBERG GOLDGEHN	Occupation (for Individual) ATTORNEY
--	---

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
1096.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11		02		2016

Transaction ID : SA11A.469381

Amount of Each Receipt this Period
64.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	164.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3271 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. SCHLIFKE, BERNARD, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 19512 PLANTERS POINT DRIVE

City BOCA RATON	State FL	Zip Code 33434-5146
--------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) ARONBERG GOLDGEHN	Occupation (for Individual) ATTORNEY
--	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1096.00

Date of Receipt
MM / DD / YYYY
11 / 06 / 2016

Transaction ID : SA11A.478197

Amount of Each Receipt this Period
25.00

Memo Item CONTRIBUTION

B. SCHLIFKE, BERNARD, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 19512 PLANTERS POINT DRIVE

City BOCA RATON	State FL	Zip Code 33434-5146
--------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) ARONBERG GOLDGEHN	Occupation (for Individual) ATTORNEY
--	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1096.00

Date of Receipt
MM / DD / YYYY
11 / 06 / 2016

Transaction ID : SA11A.478199

Amount of Each Receipt this Period
25.00

Memo Item CONTRIBUTION

C. SCHLIFKE, BERNARD, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 19512 PLANTERS POINT DRIVE

City BOCA RATON	State FL	Zip Code 33434-5146
--------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) ARONBERG GOLDGEHN	Occupation (for Individual) ATTORNEY
--	---

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
1096.00

Date of Receipt
MM / DD / YYYY
11 / 05 / 2016

Transaction ID : SA11A.478738

Amount of Each Receipt this Period
100.00

Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	150.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3272 OF 4311
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. SCHLIFKE, BERNARD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 19512 PLANTERS POINT DRIVE
 City BOCA RATON State FL Zip Code 33434-5146
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) ARONBERG GOLDGEHN Occupation (for Individual) ATTORNEY
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1096.00

Date of Receipt **11 / 07 / 2016**
Transaction ID : SA11A.480129
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

B. SCHLIEF, GERALD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5773 WOODWAY DRIVE #800
 City HOUSTON State TX Zip Code 77057-1501
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 425.00

Date of Receipt **10 / 24 / 2016**
Transaction ID : SA11A.446046
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

C. SCHLIEF, GERALD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5773 WOODWAY DRIVE #800
 City HOUSTON State TX Zip Code 77057-1501
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 425.00

Date of Receipt **10 / 27 / 2016**
Transaction ID : SA11A.452522
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 250.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3273 OF 4311
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. SCHLIEF, GERALD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5773 WOODWAY DRIVE #800
 City HOUSTON State TX Zip Code 77057-1501
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 425.00

Date of Receipt **10 / 27 / 2016**
Transaction ID : SA11A.452524
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

B. SCHLIEF, GERALD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5773 WOODWAY DRIVE #800
 City HOUSTON State TX Zip Code 77057-1501
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 425.00

Date of Receipt **11 / 06 / 2016**
Transaction ID : SA11A.477252
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

C. SCHLIEF, GERALD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5773 WOODWAY DRIVE #800
 City HOUSTON State TX Zip Code 77057-1501
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 425.00

Date of Receipt **11 / 07 / 2016**
Transaction ID : SA11A.480285
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 175.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3274 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. SCHLOEMER, JAMES, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5827 GROOMETOWN RD
 City HIGH POINT State NC Zip Code 27263-9317
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt 10 / 22 / 2016
Transaction ID : SA11A.446802
 Amount of Each Receipt this Period 200.00
 Memo Item CONTRIBUTION

B. SCHLOEMER, JAMES, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5827 GROOMETOWN RD
 City HIGH POINT State NC Zip Code 27263-9317
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt 11 / 08 / 2016
Transaction ID : SA11A.479862
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

C. SCHLUMPF, SUZANNE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3051 RIO DOSA DRIVE APT 218
 City LEXINGTON State KY Zip Code 40509-1549
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) HOMEMAKER
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt 10 / 28 / 2016
Transaction ID : SA11A.454687
 Amount of Each Receipt this Period 400.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	700.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3275 OF 4311
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. SCHMALZ, ROBERT, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 5854 N MARKHAM

City CHICAGO	State IL	Zip Code 60646-5427
-----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) SELF EMPLOYED	Occupation (for Individual) CARPENTER
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
400.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11		04		2016

Transaction ID : SA11A.473665

Amount of Each Receipt this Period
100.00

Memo Item
CONTRIBUTION

B. SCHMIDT, CARL, A., MR., JR.
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 56 WAVE ST.

City BEACHWOOD	State NJ	Zip Code 08722-3839
-------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1385.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		22		2016

Transaction ID : SA11A.447028

Amount of Each Receipt this Period
50.00

Memo Item
CONTRIBUTION

C. SCHMIDT, CARL, A., MR., JR.
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 56 WAVE ST.

City BEACHWOOD	State NJ	Zip Code 08722-3839
-------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
1385.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		22		2016

Transaction ID : SA11A.447029

Amount of Each Receipt this Period
50.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	200.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3276 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. SCHMIDT, CARL, A., MR., JR.
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 56 WAVE ST.
 City BEACHWOOD State NJ Zip Code 08722-3839
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1385.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 25 / 2016
Transaction ID : SA11A.448979
 Amount of Each Receipt this Period
 50.00
 Memo Item
 CONTRIBUTION

B. SCHMIDT, CARL, A., MR., JR.
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 56 WAVE ST.
 City BEACHWOOD State NJ Zip Code 08722-3839
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1385.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 31 / 2016
Transaction ID : SA11A.458957
 Amount of Each Receipt this Period
 50.00
 Memo Item
 CONTRIBUTION

C. SCHMIDT, CARL, A., MR., JR.
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 56 WAVE ST.
 City BEACHWOOD State NJ Zip Code 08722-3839
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1385.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 01 / 2016
Transaction ID : SA11A.462248
 Amount of Each Receipt this Period
 50.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 150.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3277 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. SCHMIDT, CARL, A., MR., JR.
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 56 WAVE ST.
 City BEACHWOOD State NJ Zip Code 08722-3839
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1385.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 04 / 2016
Transaction ID : SA11A.471993
 Amount of Each Receipt this Period
 50.00
 Memo Item
 CONTRIBUTION

B. SCHMIDT, CARL, A., MR., JR.
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 56 WAVE ST.
 City BEACHWOOD State NJ Zip Code 08722-3839
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1385.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 06 / 2016
Transaction ID : SA11A.478124
 Amount of Each Receipt this Period
 25.00
 Memo Item
 CONTRIBUTION

C. SCHMITZ, CHARLES, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 11495 DAYKIN DRIVE
 City SAINT LOUIS State MO Zip Code 63146-5395
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 227.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 31 / 2016
Transaction ID : SA11A.464074
 Amount of Each Receipt this Period
 25.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	100.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3278 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
Team Ryan

A. SCHMIDT, JENNIFER, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2837 MEADOW LANE
 City HARTLAND State WI Zip Code 53029-9392
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 245.00

Date of Receipt 10 / 28 / 2016
Transaction ID : SA11A.455197
 Amount of Each Receipt this Period 30.00
 Memo Item CONTRIBUTION

B. SCHMIDT, JENNIFER, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2837 MEADOW LANE
 City HARTLAND State WI Zip Code 53029-9392
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 245.00

Date of Receipt 10 / 28 / 2016
Transaction ID : SA11A.455199
 Amount of Each Receipt this Period 30.00
 Memo Item CONTRIBUTION

C. SCHMIDT, JENNIFER, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2837 MEADOW LANE
 City HARTLAND State WI Zip Code 53029-9392
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 245.00

Date of Receipt 10 / 28 / 2016
Transaction ID : SA11A.455208
 Amount of Each Receipt this Period 30.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	90.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3279 OF 4311
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. SCHMIDT, JENNIFER, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 2837 MEADOW LANE

City HARTLAND	State WI	Zip Code 53029-9392
------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
245.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	28	/	2016

Transaction ID : SA11A.455210

Amount of Each Receipt this Period
30.00

Memo Item CONTRIBUTION

B. SCHMIDT, JENNIFER, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 2837 MEADOW LANE

City HARTLAND	State WI	Zip Code 53029-9392
------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
245.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	05	/	2016

Transaction ID : SA11A.478374

Amount of Each Receipt this Period
25.00

Memo Item CONTRIBUTION

C. SCHMIDT, JENNIFER, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 2837 MEADOW LANE

City HARTLAND	State WI	Zip Code 53029-9392
------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
245.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	07	/	2016

Transaction ID : SA11A.479938

Amount of Each Receipt this Period
100.00

Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	155.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3280 OF 4311
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. SCHMIDT, JOAN, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 4506 PROVIDENCE POINT PLACE SE

City ISSAQUAH	State WA	Zip Code 98029-6835
------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
370.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	02	/	2016

Transaction ID : SA11A.466190

Amount of Each Receipt this Period
25.00

Memo Item CONTRIBUTION

B. SCHMIDT, JOAN, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 4506 PROVIDENCE POINT PLACE SE

City ISSAQUAH	State WA	Zip Code 98029-6835
------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
370.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	03	/	2016

Transaction ID : SA11A.468574

Amount of Each Receipt this Period
30.00

Memo Item CONTRIBUTION

C. SCHMIDT, JOAN, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 4506 PROVIDENCE POINT PLACE SE

City ISSAQUAH	State WA	Zip Code 98029-6835
------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
370.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	06	/	2016

Transaction ID : SA11A.480847

Amount of Each Receipt this Period
25.00

Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	80.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3281 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. SCHMICK, LEONARD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5669 ANGLE RD
 City OSHKOSH State WI Zip Code 54904-6855
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SUBWAY Occupation (for Individual) SELF EMPLOYED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 10 / 31 / 2016
Transaction ID : SA11A.464422
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

B. SCHMITZ, PHILIP, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 9800 ALYDAR COURT
 City NOKESVILLE State VA Zip Code 20181-3387
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) VIRGINIA CONTRACTORS SUPPLY, INC. Occupation (for Individual) COMMODITIES TRADER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 479.00

Date of Receipt 10 / 31 / 2016
Transaction ID : SA11A.457756
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

C. SCHMITZ, PHILIP, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 9800 ALYDAR COURT
 City NOKESVILLE State VA Zip Code 20181-3387
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) VIRGINIA CONTRACTORS SUPPLY, INC. Occupation (for Individual) COMMODITIES TRADER
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 479.00

Date of Receipt 10 / 30 / 2016
Transaction ID : SA11A.460119
 Amount of Each Receipt this Period 59.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	334.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3282 OF 4311
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. SCHMITZ, PHILIP, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address **9800 ALYDAR COURT**

City NOKESVILLE	State VA	Zip Code 20181-3387
---------------------------	--------------------	-------------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) VIRGINIA CONTRACTORS SUPPLY, INC.	Occupation (for Individual) COMMODITIES TRADER
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
479.00

Date of Receipt
11 / 04 / 2016

Transaction ID : SA11A.472728

Amount of Each Receipt this Period
59.00

Memo Item
CONTRIBUTION

B. SCHMID, RONALD, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address **48 SPERRY ROAD**

City WATERTOWN	State CT	Zip Code 06795-3020
--------------------------	--------------------	-------------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) INFORMATION REQUESTED PER BEST EFFORTS	Occupation (for Individual) INFORMATION REQUESTED PER BE
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
2000.00

Date of Receipt
10 / 26 / 2016

Transaction ID : SA11A.447607

Amount of Each Receipt this Period
2000.00

Memo Item
CONTRIBUTION

C. SCHMIDT, SANDEFUR, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address **501 E. NORMANDY DR.**

City PROVO	State UT	Zip Code 84604-5956
----------------------	--------------------	-------------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
--	---

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
1475.00

Date of Receipt
10 / 21 / 2016

Transaction ID : SA11A.444338

Amount of Each Receipt this Period
100.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	2159.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3283 OF 4311
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. SCHMIDT, SANDEFUR, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 501 E. NORMANDY DR.
 City PROVO State UT Zip Code 84604-5956
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1475.00

Date of Receipt **10 / 24 / 2016**
Transaction ID : SA11A.445973
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

B. SCHMIDT, SANDEFUR, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 501 E. NORMANDY DR.
 City PROVO State UT Zip Code 84604-5956
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1475.00

Date of Receipt **11 / 02 / 2016**
Transaction ID : SA11A.467001
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

C. SCHMOECKEL, JON, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 14310 DELLWOOD ROAD N
 City STILLWATER State MN Zip Code 55082-4281
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) MOORHEAD Occupation (for Individual) ENGINEER
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt **10 / 24 / 2016**
Transaction ID : SA11A.443709
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	600.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3284 OF 4311
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. SCHMOYER, RANDALL, L., MR., JR.
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 33641 STETSON LN

City LEESBURG	State FL	Zip Code 34788-3735
------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
317.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	31	/	2016

Transaction ID : SA11A.463475

Amount of Each Receipt this Period
25.00

Memo Item CONTRIBUTION

B. SCHNADIG, J LAWRENCE, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1443 N TIGERTAIL ROAD

City LOS ANGELES	State CA	Zip Code 90049-1428
---------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) SELF	Occupation (for Individual) REAL ESTATE
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	04	/	2016

Transaction ID : SA11A.467682

Amount of Each Receipt this Period
200.00

Memo Item CONTRIBUTION

C. SCHNEIDER, BEVERLY, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1223 BALDRIDGE DR

City EATON	State CO	Zip Code 80615-8630
---------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
480.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	27	/	2016

Transaction ID : SA11A.456742

Amount of Each Receipt this Period
25.00

Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	250.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3285 OF 4311
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. SCHNEIDER, BEVERLY, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1223 BALDRIDGE DR

City EATON	State CO	Zip Code 80615-8630
---------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
480.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	27	/	2016

Transaction ID : SA11A.456743

Amount of Each Receipt this Period
25.00

Memo Item CONTRIBUTION

B. SCHNEIDER, BEVERLY, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1223 BALDRIDGE DR

City EATON	State CO	Zip Code 80615-8630
---------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
480.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	04	/	2016

Transaction ID : SA11A.474130

Amount of Each Receipt this Period
50.00

Memo Item CONTRIBUTION

C. SCHNEIDER, FREDERICK, F., MR.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 632 SKYLINE DRIVE

City CODY	State WY	Zip Code 82414-5012
--------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
300.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	25	/	2016

Transaction ID : SA11A.447357

Amount of Each Receipt this Period
100.00

Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	175.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3286 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. SCHNEIDER, JAMES, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 939 CHARLES CT
 City ONALASKA State WI Zip Code 54650-3113
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 475.00

Date of Receipt
 11 / 02 / 2016
Transaction ID : SA11A.469430
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION

B. SCHNEIDER, JAMES, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 939 CHARLES CT
 City ONALASKA State WI Zip Code 54650-3113
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 475.00

Date of Receipt
 11 / 06 / 2016
Transaction ID : SA11A.476884
 Amount of Each Receipt this Period
 50.00
 Memo Item
 CONTRIBUTION

C. SCHNEIDER, JAMES, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 939 CHARLES CT
 City ONALASKA State WI Zip Code 54650-3113
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 475.00

Date of Receipt
 11 / 06 / 2016
Transaction ID : SA11A.476885
 Amount of Each Receipt this Period
 50.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	200.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3287 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. SCHNEIDER, MARTIN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 19 HARRISON STREET
 City EDISON State NJ Zip Code 08817-2968
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) INFORMATION REQUESTED PER BEST EFFORTS Occupation (for Individual) INFORMATION REQUESTED PER BE
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 250.00

Date of Receipt
 11 / 01 / 2016
Transaction ID : SA11A.461714
 Amount of Each Receipt this Period
 150.00
 Memo Item
 CONTRIBUTION

B. SCHNEIDER, WALTER, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 914 MAIN ST 2004
 City HOUSTON State TX Zip Code 77002-6200
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) MERRILL LYNCH Occupation (for Individual) FINANCIAL ADVISOR
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 2700.00

Date of Receipt
 11 / 02 / 2016
Transaction ID : SA11A.470229
 Amount of Each Receipt this Period
 2700.00
 Memo Item
 CONTRIBUTION

C. SCHNITZER, DOUGLAS, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 11 GREENWAY PLAZA SUITE 3100
 City HOUSTON State TX Zip Code 77046-1143
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SENTERRA LLC Occupation (for Individual) REAL ESTATE DEVELOPMENT
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 50000.00

Date of Receipt
 10 / 24 / 2016
Transaction ID : SA11A.444074
 Amount of Each Receipt this Period
 50000.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	52850.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3288 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13 <input type="checkbox"/> 11b <input type="checkbox"/> 14 <input type="checkbox"/> 11c <input type="checkbox"/> 15 <input type="checkbox"/> 12 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. SCHNITZER, KENNETH, LEE, MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4939 BROOKVIEW DR
 City DALLAS State TX Zip Code 75220-3917
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) PARK PLACE DEALERSHIPS Occupation (for Individual) CHAIRMAN
 Receipt For: Primary General Other (specify) Aggregate Year-to-Date 50000.00

Date of Receipt 10 / 24 / 2016
Transaction ID : SA11A.443486
 Amount of Each Receipt this Period 50000.00
 Memo Item CONTRIBUTION

B. SCHOCK, JANICE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2762 NW NIGHTFALL CIRCLE
 City BEND State OR Zip Code 97703-5437
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) Aggregate Year-to-Date 230.00

Date of Receipt 10 / 20 / 2016
Transaction ID : SA11A.442025
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

C. SCHOCK, JANICE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2762 NW NIGHTFALL CIRCLE
 City BEND State OR Zip Code 97703-5437
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) Aggregate Year-to-Date 230.00

Date of Receipt 11 / 04 / 2016
Transaction ID : SA11A.472689
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	50200.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3289 OF 4311		
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14	<input type="checkbox"/> 11c <input type="checkbox"/> 15	<input type="checkbox"/> 12 <input type="checkbox"/> 16

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NAME OF COMMITTEE (In Full)
Team Ryan

A. SCHOECK, CLYDE, C., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 8004 47TH STREET
 City MILAN State IL Zip Code 61264-3273
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 02 / 2016
Transaction ID : SA11A.465097
 Amount of Each Receipt this Period
 100.00
 Memo Item CONTRIBUTION

B. SCHOLLAND, JOHN, , MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 58 BLOSSOM LN
 City MARLBOROUGH State MA Zip Code 01752-1409
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 31 / 2016
Transaction ID : SA11A.464641
 Amount of Each Receipt this Period
 25.00
 Memo Item CONTRIBUTION

C. SCHOLLAND, JOHN, , MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 58 BLOSSOM LN
 City MARLBOROUGH State MA Zip Code 01752-1409
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 02 / 2016
Transaction ID : SA11A.466567
 Amount of Each Receipt this Period
 50.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	175.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3290 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. SCHOLLAND, JOHN, , MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 58 BLOSSOM LN
 City MARLBOROUGH State MA Zip Code 01752-1409
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 11 / 02 / 2016
Transaction ID : SA11A.466577
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

B. SCHOLLAND, JOHN, , MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 58 BLOSSOM LN
 City MARLBOROUGH State MA Zip Code 01752-1409
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 11 / 03 / 2016
Transaction ID : SA11A.468603
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

C. SCHOLLAND, JOHN, , MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 58 BLOSSOM LN
 City MARLBOROUGH State MA Zip Code 01752-1409
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 11 / 03 / 2016
Transaction ID : SA11A.468605
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 75.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3291 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. SCHOLLAND, JOHN, , MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 58 BLOSSOM LN
 City MARLBOROUGH State MA Zip Code 01752-1409
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 11 / 07 / 2016
Transaction ID : SA11A.475794
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

B. SCHOLLAND, JOHN, , MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 58 BLOSSOM LN
 City MARLBOROUGH State MA Zip Code 01752-1409
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 11 / 07 / 2016
Transaction ID : SA11A.475800
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

C. SCHOULTZ, ROBERT, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 13840 N DESERT DR 372
 City PEORIA State AZ Zip Code 85381-
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETITED Occupation (for Individual) RETIRE
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 209.00

Date of Receipt 10 / 21 / 2016
Transaction ID : SA11A.444464
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶ 100.00
TOTAL This Period (last page this line number only).....▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3292 OF 4311
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. SCHOULTZ, ROBERT, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 13840 N DESERT DR
 372
 City PEORIA State AZ Zip Code 85381-
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRE
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 209.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 04 / 2016
Transaction ID : SA11A.471780
 Amount of Each Receipt this Period
 50.00
 Memo Item
 CONTRIBUTION

B. SCHRAUDENBACH, JOHN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2545 SUGARLOAF CLUB DR
 City DULUTH State GA Zip Code 30097-7406
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) EY Occupation (for Individual) CPA
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 2750.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 31 / 2016
Transaction ID : SA11A.457514
 Amount of Each Receipt this Period
 500.00
 Memo Item
 CONTRIBUTION

C. SCHRETTTER, JENNIFER, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1103 ELMWOOD AVE.
 City WILMETTE State IL Zip Code 60091-1601
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 04 / 2016
Transaction ID : SA11A.474153
 Amount of Each Receipt this Period
 50.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 600.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3293 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
Team Ryan

A. SCHRIMSHER, FRANK, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1541 HEMPEL AVE.
 City WINDERMERE State FL Zip Code 34786-8117
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) REAL ESTATE DEVELOPER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1850.00

Date of Receipt 10 / 27 / 2016
Transaction ID : SA11A.453237
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

B. SCHRIMSHER, FRANK, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1541 HEMPEL AVE.
 City WINDERMERE State FL Zip Code 34786-8117
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) REAL ESTATE DEVELOPER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1850.00

Date of Receipt 10 / 27 / 2016
Transaction ID : SA11A.453238
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

C. SCHRON, CHARLES, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO BOX 50485
 City PHOENIX State AZ Zip Code 85076-0485
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SOUTHEAST GASTROENTEROLOGY CONSULTANT Occupation (for Individual) PHYSICIAN
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 11 / 02 / 2016
Transaction ID : SA11A.467120
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	750.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3294 OF 4311
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. SCHROEDER, CHARLES, L., MR.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1973 BATCHELDER COURT

City EL CAJON	State CA	Zip Code 92020-2801
------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) RETIRED	Occupation (for Individual) RETIRED
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
700.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	01	/	2016

Transaction ID : SA11A.461624

Amount of Each Receipt this Period
500.00

Memo Item CONTRIBUTION

B. SCHROEDER, LOWELL, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 3128 ADIRONDACK DRIVE NE

City CEDAR RAPIDS	State IA	Zip Code 52402-3310
----------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	24	/	2016

Transaction ID : SA11A.443980

Amount of Each Receipt this Period
50.00

Memo Item CONTRIBUTION

C. SCHROEDER, LOWELL, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 3128 ADIRONDACK DRIVE NE

City CEDAR RAPIDS	State IA	Zip Code 52402-3310
----------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	04	/	2016

Transaction ID : SA11A.467598

Amount of Each Receipt this Period
50.00

Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	600.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3295 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. SCHROEDER, SHEILA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 10006 W COURT STREET
 City PASCO State WA Zip Code 99301-6505
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 11 / 03 / 2016
Transaction ID : SA11A.469044
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

B. SCHUBERT, RICHARD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 213 DUTTS MILL EAST
 City WEST CHESTER State PA Zip Code 19382-7600
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) MSTI Occupation (for Individual) ENGINEER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 750.00

Date of Receipt 11 / 07 / 2016
Transaction ID : SA11A.476104
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

C. SCHULTZ, LARRY, , MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1012 SUMMER RIDGE COURT
 City MURRYSVILLE State PA Zip Code 15668-8510
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 350.00

Date of Receipt 10 / 27 / 2016
Transaction ID : SA11A.452303
 Amount of Each Receipt this Period 150.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 250.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3296 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
Team Ryan

A. SCHULTZ, ROBERT, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 10914 W. WEDGEWOOD DR.
 City SUN CITY State AZ Zip Code 85351-1038
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 205.00

Date of Receipt **10 / 25 / 2016**
Transaction ID : SA11A.448922
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

B. SCHULTZ, ROBERT, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 10914 W. WEDGEWOOD DR.
 City SUN CITY State AZ Zip Code 85351-1038
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 205.00

Date of Receipt **11 / 04 / 2016**
Transaction ID : SA11A.472927
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

C. SCHULTZ, ROBERT, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 10914 W. WEDGEWOOD DR.
 City SUN CITY State AZ Zip Code 85351-1038
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 205.00

Date of Receipt **11 / 04 / 2016**
Transaction ID : SA11A.474041
 Amount of Each Receipt this Period 15.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	65.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3297 OF 4311
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. SCHULZ, RONALD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1240 NORTHERN AVE.
 City FERGUS FALLS State MN Zip Code 56537-1543
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RDO EQUIPMENT Occupation (for Individual) PARTSMAN
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 350.00

Date of Receipt 10 / 28 / 2016
Transaction ID : SA11A.456036
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

B. SCHUMACHER, JAMES, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2315 PHILLIPS CIRCLE APT B APT B
 City MONTROSE State CO Zip Code 81401-5755
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) INFORMATION REQUESTED PER BEST EFFORTS Occupation (for Individual) INFORMATION REQUESTED PER BE
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 11 / 01 / 2016
Transaction ID : SA11A.461855
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

C. SCHUMANN, WILLIAM, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 900 N GREEN BAY RD
 City LAKE FOREST State IL Zip Code 60045-1709
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 10 / 29 / 2016
Transaction ID : SA11A.460357
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	200.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3298 OF 4311
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. SCHUSTER, ALEXANDER, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 7039 SOLOMON SEAL CT.

City SPRINGFIELD	State VA	Zip Code 22152-3153
---------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) RAYTHEON COMPANY	Occupation (for Individual) SOFTWARE ENGINEER
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
350.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
11		08		2016

Transaction ID : SA11A.479781

Amount of Each Receipt this Period
50.00

Memo Item
CONTRIBUTION

B. SCHUTTER, GEORGE, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 506 7TH STREET SE

City WASHINGTON	State DC	Zip Code 20003-2737
--------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) DISTRICT OF COLUMBIA	Occupation (for Individual) CHIEF PROCUREMENT OFFICER
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
300.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
11		28		2016

Transaction ID : SA11A.481124

Amount of Each Receipt this Period
300.00

Memo Item
CONTRIBUTION

C. SCHWARZ, ALAN, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 126 MAPLE AVENUE

City OLD SAYBROOK	State CT	Zip Code 06475-2451
----------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) PROHEALTH	Occupation (for Individual) PHYSICIAN
--	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
400.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
11		01		2016

Transaction ID : SA11A.461874

Amount of Each Receipt this Period
200.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	550.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3299 OF 4311		
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14	<input type="checkbox"/> 11c <input type="checkbox"/> 15	<input type="checkbox"/> 12 <input type="checkbox"/> 16

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NAME OF COMMITTEE (In Full)
Team Ryan

A. SCHWARTZ, HELGA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 29 HUNTERS CIRCLE
 City LEBANON State NJ Zip Code 08833-4396
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 225.00

Date of Receipt 10 / 26 / 2016
Transaction ID : SA11A.454487
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

B. SCHWARTZ, HELGA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 29 HUNTERS CIRCLE
 City LEBANON State NJ Zip Code 08833-4396
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 225.00

Date of Receipt 11 / 06 / 2016
Transaction ID : SA11A.477259
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

C. SCHWAB, HELEN, O'NEILL, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 188 FAIR OAKS LANE
 City ATHERTON State CA Zip Code 94027-3032
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) INVESTOR
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 41100.00

Date of Receipt 10 / 24 / 2016
Transaction ID : SA11A.443485
 Amount of Each Receipt this Period 41100.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	41175.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3300 OF 4311
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. SCHWARTZ , JOHN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1228 AMALFI
 City PACIFIC PALISADES State CA Zip Code 90272-4032
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 350.00

Date of Receipt 11 / 01 / 2016
Transaction ID : SA11A.467257
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

B. SCHWALBE, RICHARD, A., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3190 GATEWAY RD. SUITE 201
 City BROOKFIELD State WI Zip Code 53045-5167
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RICK SCHWALBE Occupation (for Individual) REAL ESTATE
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 265.00

Date of Receipt 10 / 31 / 2016
Transaction ID : SA11A.458972
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

C. SCHWAB, ROBERT, , MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5123 E CALLE DEL NORTE
 City PHOENIX State AZ Zip Code 85018-4427
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1500.00

Date of Receipt 11 / 06 / 2016
Transaction ID : SA11A.478294
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 250.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3301 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. SCHWAB, ROBERT, , MR.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 5123 E CALLE DEL NORTE

City PHOENIX	State AZ	Zip Code 85018-4427
-----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	07	/	2016

Transaction ID : SA11A.480440

Amount of Each Receipt this Period
50.00

Memo Item
CONTRIBUTION

B. SCHWENK, THORNTON, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 514 EASTLAKE DR SE

City RIO RANCHO	State NM	Zip Code 87124-2161
--------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
525.48

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	24	/	2016

Transaction ID : SA11A.449166

Amount of Each Receipt this Period
50.00

Memo Item
CONTRIBUTION

C. SCHWENK, THORNTON, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 514 EASTLAKE DR SE

City RIO RANCHO	State NM	Zip Code 87124-2161
--------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
525.48

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	30	/	2016

Transaction ID : SA11A.460278

Amount of Each Receipt this Period
25.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	125.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3302 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. SCHWENK, THORNTON, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 514 EASTLAKE DR SE
 City RIO RANCHO State NM Zip Code 87124-2161
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 525.48

Date of Receipt 11 / 02 / 2016
Transaction ID : SA11A.465901
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

B. SCHWENK, THORNTON, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 514 EASTLAKE DR SE
 City RIO RANCHO State NM Zip Code 87124-2161
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 525.48

Date of Receipt 11 / 02 / 2016
Transaction ID : SA11A.469529
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

C. SCHWENK, THORNTON, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 514 EASTLAKE DR SE
 City RIO RANCHO State NM Zip Code 87124-2161
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 525.48

Date of Receipt 11 / 02 / 2016
Transaction ID : SA11A.470254
 Amount of Each Receipt this Period 60.48
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	135.48
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3303 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. SCHWENK, THORNTON, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 514 EASTLAKE DR SE
 City RIO RANCHO State NM Zip Code 87124-2161
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 525.48

Date of Receipt
 11 / 04 / 2016
Transaction ID : SA11A.471476
 Amount of Each Receipt this Period
 50.00
 Memo Item CONTRIBUTION

B. SCHWENK, THORNTON, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 514 EASTLAKE DR SE
 City RIO RANCHO State NM Zip Code 87124-2161
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 525.48

Date of Receipt
 11 / 04 / 2016
Transaction ID : SA11A.471860
 Amount of Each Receipt this Period
 25.00
 Memo Item CONTRIBUTION

C. SCHWENK, THORNTON, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 514 EASTLAKE DR SE
 City RIO RANCHO State NM Zip Code 87124-2161
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 525.48

Date of Receipt
 11 / 07 / 2016
Transaction ID : SA11A.474617
 Amount of Each Receipt this Period
 50.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	125.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3304 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. SCHWISOW, BARBARA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 9026 24TH AVENUE NW
 City TULALIP State WA Zip Code 98271-6944
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) PRMCE Occupation (for Individual) RN
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 347.00

Date of Receipt 10 / 26 / 2016
Transaction ID : SA11A.449766
 Amount of Each Receipt this Period 50.00
 Memo Item
CONTRIBUTION

B. SCHWISOW, BARBARA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 9026 24TH AVENUE NW
 City TULALIP State WA Zip Code 98271-6944
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) PRMCE Occupation (for Individual) RN
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 347.00

Date of Receipt 10 / 26 / 2016
Transaction ID : SA11A.449789
 Amount of Each Receipt this Period 50.00
 Memo Item
CONTRIBUTION

C. SCHWISOW, BARBARA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 9026 24TH AVENUE NW
 City TULALIP State WA Zip Code 98271-6944
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) PRMCE Occupation (for Individual) RN
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 347.00

Date of Receipt 11 / 01 / 2016
Transaction ID : SA11A.463059
 Amount of Each Receipt this Period 25.00
 Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	125.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3305 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
-----------------------------	-----------------------------	-----------------------------

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NAME OF COMMITTEE (In Full)
Team Ryan

A. SCHWISOW, BARBARA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 9026 24TH AVENUE NW
 City TULALIP State WA Zip Code 98271-6944
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) PRMCE Occupation (for Individual) RN
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 347.00

Date of Receipt 11 / 01 / 2016
Transaction ID : SA11A.463063
 Amount of Each Receipt this Period 25.00
 Memo Item
CONTRIBUTION

B. SCHWISOW, BARBARA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 9026 24TH AVENUE NW
 City TULALIP State WA Zip Code 98271-6944
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) PRMCE Occupation (for Individual) RN
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 347.00

Date of Receipt 11 / 04 / 2016
Transaction ID : SA11A.471430
 Amount of Each Receipt this Period 50.00
 Memo Item
CONTRIBUTION

C. SCIOSCIA, EVELYN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 502 APPLEHILL CT
 City GIBSONIA State PA Zip Code 15044-8068
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 5000.00

Date of Receipt 11 / 04 / 2016
Transaction ID : SA11A.472497
 Amount of Each Receipt this Period 1000.00
 Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	1075.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3306 OF 4311
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. SCOCIMARA, ERIBERTO, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 16 LAUREL LANE
 City GREENWICH State CT Zip Code 06830-3846
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 2450.00

Date of Receipt 11 / 04 / 2016
Transaction ID : SA11A.472361
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

B. SCOTTI, CAROL, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 715 N. BEVERLY DRIVE
 City BEVERLY HILLS State CA Zip Code 90210-3321
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 10 / 23 / 2016
Transaction ID : SA11A.446370
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

C. SCOTTI, CAROL, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 715 N. BEVERLY DRIVE
 City BEVERLY HILLS State CA Zip Code 90210-3321
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 10 / 31 / 2016
Transaction ID : SA11A.458829
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 375.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3307 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. SCOTTI, CAROL, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 715 N. BEVERLY DRIVE
 City BEVERLY HILLS State CA Zip Code 90210-3321
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 31 / 2016
Transaction ID : SA11A.458839
 Amount of Each Receipt this Period
 25.00
 Memo Item
 CONTRIBUTION

B. SCOTT, DAVID, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1363 146TH AVE. NW
 City ANDOVER State MN Zip Code 55304-7713
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) FARMQA Occupation (for Individual) SALES DIRECTOR
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 20 / 2016
Transaction ID : SA11A.442188
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION

C. SCOTT, DAVID, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO BOX 43
 City WINNSBORO State TX Zip Code 75494-0043
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 7350.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 20 / 2016
Transaction ID : SA11A.442363
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	225.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3308 OF 4311
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. SCOTT, DAVID, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address **PO BOX 43**

City **WINNSBORO** State **TX** Zip Code **75494-0043**

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) **NONE** Occupation (for Individual) **RETIRED**

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **7350.00**

Date of Receipt **10 / 20 / 2016**

Transaction ID : SA11A.442366

Amount of Each Receipt this Period **100.00**

Memo Item CONTRIBUTION

B. SCOTT, DAVID, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address **PO BOX 43**

City **WINNSBORO** State **TX** Zip Code **75494-0043**

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) **NONE** Occupation (for Individual) **RETIRED**

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **7350.00**

Date of Receipt **10 / 23 / 2016**

Transaction ID : SA11A.446520

Amount of Each Receipt this Period **200.00**

Memo Item CONTRIBUTION

C. SCOTT, DAVID, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address **PO BOX 43**

City **WINNSBORO** State **TX** Zip Code **75494-0043**

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) **NONE** Occupation (for Individual) **RETIRED**

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼ **7350.00**

Date of Receipt **10 / 25 / 2016**

Transaction ID : SA11A.448157

Amount of Each Receipt this Period **250.00**

Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... **550.00**

TOTAL This Period (last page this line number only).....

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3309 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. SCOTT, DAVID, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO BOX 43
 City WINNSBORO State TX Zip Code 75494-0043
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 7350.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 26 / 2016
Transaction ID : SA11A.450584
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION

B. SCOTT, DAVID, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO BOX 43
 City WINNSBORO State TX Zip Code 75494-0043
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 7350.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 28 / 2016
Transaction ID : SA11A.455834
 Amount of Each Receipt this Period
 250.00
 Memo Item
 CONTRIBUTION

C. SCOTT, DAVID, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO BOX 43
 City WINNSBORO State TX Zip Code 75494-0043
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 7350.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 31 / 2016
Transaction ID : SA11A.464439
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	450.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3310 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. SCOTT, DAVID, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO BOX 43
 City WINNSBORO State TX Zip Code 75494-0043
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 7350.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 02 / 2016
Transaction ID : SA11A.466866
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION

B. SCOTT, DAVID, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO BOX 43
 City WINNSBORO State TX Zip Code 75494-0043
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 7350.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 03 / 2016
Transaction ID : SA11A.468615
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION

C. SCOTT, DAVID, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1363 146TH AVE. NW
 City ANDOVER State MN Zip Code 55304-7713
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) FARMQA Occupation (for Individual) SALES DIRECTOR
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 04 / 2016
Transaction ID : SA11A.473297
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	300.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3311 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. SCOTT, DAVID, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO BOX 43
 City WINNSBORO State TX Zip Code 75494-0043
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 7350.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 11 / 07 / 2016
Transaction ID : SA11A.475398
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION

B. SCOTT, DAVID, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO BOX 43
 City WINNSBORO State TX Zip Code 75494-0043
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 7350.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 11 / 07 / 2016
Transaction ID : SA11A.476484
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION

C. SCOTT, DAVID, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO BOX 43
 City WINNSBORO State TX Zip Code 75494-0043
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 7350.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 11 / 05 / 2016
Transaction ID : SA11A.479226
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	300.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3312 OF 4311
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. SCOTT, DAVID, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address **PO BOX 43**

City **WINNSBORO** State **TX** Zip Code **75494-0043**

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) **NONE** Occupation (for Individual) **RETIRED**

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **7350.00**

Date of Receipt
11 / 05 / 2016
Transaction ID : SA11A.479253

Amount of Each Receipt this Period
200.00

Memo Item
CONTRIBUTION

B. SCOTT, DAVID, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address **PO BOX 43**

City **WINNSBORO** State **TX** Zip Code **75494-0043**

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) **NONE** Occupation (for Individual) **RETIRED**

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **7350.00**

Date of Receipt
11 / 05 / 2016
Transaction ID : SA11A.479254

Amount of Each Receipt this Period
200.00

Memo Item
CONTRIBUTION

C. SCOTT, ELANE, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address **307 E AVE E**

City **ALPINE** State **TX** Zip Code **79830-4729**

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) **BIRTH2WORK** Occupation (for Individual) **PRESIDENT**

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼ **250.00**

Date of Receipt
10 / 29 / 2016
Transaction ID : SA11A.460378

Amount of Each Receipt this Period
250.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... **650.00**

TOTAL This Period (last page this line number only).....

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3313 OF 4311
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. SCOTT, JAMES, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 3804 CAMDEN FALLS CT

City GREENSBORO	State NC	Zip Code 27410-2186
--------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	02	/	2016

Transaction ID : SA11A.469523

Amount of Each Receipt this Period
250.00

Memo Item
CONTRIBUTION

B. SCOTT, JAMES, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 8516 NORWICH DRIVE

City SAN ANTONIO	State TX	Zip Code 78217-5118
---------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
262.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	07	/	2016

Transaction ID : SA11A.474627

Amount of Each Receipt this Period
131.00

Memo Item
CONTRIBUTION

C. SCOTT, VICTORIA, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 2417 W MOSS AVE

City WEST PEORIA	State IL	Zip Code 61604-5447
---------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) CEFCU	Occupation (for Individual) COLLECTION REP
--	---

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
300.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	30	/	2016

Transaction ID : SA11A.459927

Amount of Each Receipt this Period
100.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	481.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3314 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. SCOTT, YVONNE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address P.O.BOX 11356
 12
 City BURKE State VA Zip Code 22009-1356
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 711.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 31 / 2016
Transaction ID : SA11A.457668
 Amount of Each Receipt this Period
 50.00
 Memo Item
 CONTRIBUTION

B. SCOTT, YVONNE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address P.O.BOX 11356
 12
 City BURKE State VA Zip Code 22009-1356
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 711.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 31 / 2016
Transaction ID : SA11A.457685
 Amount of Each Receipt this Period
 50.00
 Memo Item
 CONTRIBUTION

C. SCOTT, YVONNE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address P.O.BOX 11356
 12
 City BURKE State VA Zip Code 22009-1356
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 711.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 30 / 2016
Transaction ID : SA11A.459740
 Amount of Each Receipt this Period
 30.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	130.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 3315 OF 4311
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Team Ryan

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
A. SCOTT, YVONNE, , ,

Mailing Address P.O.BOX 11356
12

City BURKE State VA Zip Code 22009-1356

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
711.00

Date of Receipt
M M M / D D D / Y Y Y Y Y Y
10 / 29 / 2016

Transaction ID : **SA11A.460983**

Amount of Each Receipt this Period
100.00

Memo Item CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
B. SCOTT, YVONNE, , ,

Mailing Address P.O.BOX 11356
12

City BURKE State VA Zip Code 22009-1356

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
711.00

Date of Receipt
M M M / D D D / Y Y Y Y Y Y
11 / 04 / 2016

Transaction ID : **SA11A.471642**

Amount of Each Receipt this Period
100.00

Memo Item CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
C. SCOWBY, RONALD, S., ,

Mailing Address 140 LOCUST HILL

City FRANKFORT State KY Zip Code 40601-4824

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
327.00

Date of Receipt
M M M / D D D / Y Y Y Y Y Y
10 / 23 / 2016

Transaction ID : **SA11A.449626**

Amount of Each Receipt this Period
50.00

Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	250.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3316 OF 4311
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. SCOWBY, RONALD, S.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 140 LOCUST HILL

City FRANKFORT	State KY	Zip Code 40601-4824
-------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
327.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	04	/	2016

Transaction ID : SA11A.473017

Amount of Each Receipt this Period
50.00

Memo Item
CONTRIBUTION

B. SCRIBA, RALPH, D., MR.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 2055 VIA VISALIA

City PALOS VERDES ESTAT	State CA	Zip Code 90274-2062
----------------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) SCRIBA ENTERPRISES	Occupation (for Individual) PRESIDENT
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	07	/	2016

Transaction ID : SA11A.467804

Amount of Each Receipt this Period
500.00

Memo Item
CONTRIBUTION

C. SCRUGGS , WILLIAM, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 214 CALLE GALISTEO

City SANTA FE	State NM	Zip Code 87508-1521
------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	23	/	2016

Transaction ID : SA11A.446340

Amount of Each Receipt this Period
50.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	600.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 3317 OF 4311
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. SCUDDER, JACK, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 35 HIGH CIRCLE DR

City IOWA CITY	State IA	Zip Code 52240-7935
-------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) UNIVERSITY OF IOWA	Occupation (for Individual) PROFESSOR
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1050.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	27	/	2016

Transaction ID : SA11A.456833

Amount of Each Receipt this Period
250.00

Memo Item
CONTRIBUTION

B. SCUDDER, JACK, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 35 HIGH CIRCLE DR

City IOWA CITY	State IA	Zip Code 52240-7935
-------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) UNIVERSITY OF IOWA	Occupation (for Individual) PROFESSOR
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1050.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	31	/	2016

Transaction ID : SA11A.458866

Amount of Each Receipt this Period
50.00

Memo Item
CONTRIBUTION

C. SCULLY, SUZANNE, M., ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1250 W SOUTHWINDS BOULEVARD
APT 213

City VERO BEACH	State FL	Zip Code 32963-4335
--------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
700.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	20	/	2016

Transaction ID : SA11A.433453

Amount of Each Receipt this Period
200.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	500.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3318 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. SCULLY, WILLIAM, P., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 771 MANATEE COVE
 City VERO BEACH State FL Zip Code 32963-3730
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 9000.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 04 / 2016
Transaction ID : SA11A.471910
 Amount of Each Receipt this Period
 1000.00
 Memo Item
 CONTRIBUTION

B. SEALS, ERNA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 8225 TAUNTON PLACE
 City SPRINGFIELD State VA Zip Code 22152-2428
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 04 / 2016
Transaction ID : SA11A.473084
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION

C. SEAMAN, JEFFREY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 400 PERIMETER CENTER TER NE SUITE 800
 City ATLANTA State GA Zip Code 30346-1235
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) ROOMS TO GO Occupation (for Individual) CEO
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 3700.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 28 / 2016
Transaction ID : SA11A.454684
 Amount of Each Receipt this Period
 2700.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	3800.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3319 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. SEARS, GEORGE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1908 E SUMMER MEADOW CIRCLE
 City SANDY State UT Zip Code 84093-7010
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 800.00

Date of Receipt 10 / 23 / 2016
Transaction ID : SA11A.449590
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

B. SEARS, GEORGE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1908 E SUMMER MEADOW CIRCLE
 City SANDY State UT Zip Code 84093-7010
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 800.00

Date of Receipt 10 / 26 / 2016
Transaction ID : SA11A.451278
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

C. SEAVER, ALEXANDER, , MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 510 WEST RD
 City NEW CANAAN State CT Zip Code 06840-2511
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) STADIUM CAPITAL MANAGEMENT LLC Occupation (for Individual) MANAGING PARTNER
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 75000.00

Date of Receipt 11 / 03 / 2016
Transaction ID : SA11A.465203
 Amount of Each Receipt this Period 25000.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	25150.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3320 OF 4311
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. SEBASTIAN, GAIL, M., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2941 ROCK CREEK RD
 City NORTH WILKESBORO State NC Zip Code 28659-7615
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 665.00

Date of Receipt **10 / 25 / 2016**
Transaction ID : SA11A.452141
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

B. SEBASTIAN, GAIL, M., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2941 ROCK CREEK RD
 City NORTH WILKESBORO State NC Zip Code 28659-7615
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 665.00

Date of Receipt **10 / 28 / 2016**
Transaction ID : SA11A.456260
 Amount of Each Receipt this Period 20.00
 Memo Item CONTRIBUTION

C. SEBASTIAN, GAIL, M., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2941 ROCK CREEK RD
 City NORTH WILKESBORO State NC Zip Code 28659-7615
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 665.00

Date of Receipt **11 / 01 / 2016**
Transaction ID : SA11A.462508
 Amount of Each Receipt this Period 30.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 75.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3321 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name A. SEBASTIAN, GAIL, M., ,		Date of Receipt MM / DD / YYYY 11 / 02 / 2016 Transaction ID : SA11A.466914
Mailing Address 2941 ROCK CREEK RD		Amount of Each Receipt this Period 50.00
City NORTH WILKESBORO	State NC	Zip Code 28659-7615
FEC ID number of contributing federal political committee. C		<input type="checkbox"/> Memo Item CONTRIBUTION
Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 665.00	

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name B. SEBASTIAN, GAIL, M., ,		Date of Receipt MM / DD / YYYY 11 / 02 / 2016 Transaction ID : SA11A.466930
Mailing Address 2941 ROCK CREEK RD		Amount of Each Receipt this Period 50.00
City NORTH WILKESBORO	State NC	Zip Code 28659-7615
FEC ID number of contributing federal political committee. C		<input type="checkbox"/> Memo Item CONTRIBUTION
Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 665.00	

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name C. SEBASTIAN, GAIL, M., ,		Date of Receipt MM / DD / YYYY 11 / 02 / 2016 Transaction ID : SA11A.466944
Mailing Address 2941 ROCK CREEK RD		Amount of Each Receipt this Period 50.00
City NORTH WILKESBORO	State NC	Zip Code 28659-7615
FEC ID number of contributing federal political committee. C		<input type="checkbox"/> Memo Item CONTRIBUTION
Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Aggregate Year-to-Date ▼ 665.00	

SUBTOTAL of Receipts This Page (optional).....▶	150.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3322 OF 4311
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. SEBASTIAN, GAIL, M., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2941 ROCK CREEK RD
 City NORTH WILKESBORO State NC Zip Code 28659-7615
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 665.00

Date of Receipt
 11 / 03 / 2016
Transaction ID : SA11A.469201
 Amount of Each Receipt this Period 30.00
 Memo Item CONTRIBUTION

B. SEBASTIAN, GAIL, M., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2941 ROCK CREEK RD
 City NORTH WILKESBORO State NC Zip Code 28659-7615
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 665.00

Date of Receipt
 11 / 04 / 2016
Transaction ID : SA11A.470608
 Amount of Each Receipt this Period 30.00
 Memo Item CONTRIBUTION

C. SEBASTIAN, GAIL, M., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2941 ROCK CREEK RD
 City NORTH WILKESBORO State NC Zip Code 28659-7615
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 665.00

Date of Receipt
 11 / 04 / 2016
Transaction ID : SA11A.473485
 Amount of Each Receipt this Period 30.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	90.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3323 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name A. SEBASTIAN, GAIL, M., ,		Date of Receipt MM / DD / YYYY 11 / 04 / 2016 Transaction ID : SA11A.473585
Mailing Address 2941 ROCK CREEK RD		Amount of Each Receipt this Period 25.00
City NORTH WILKESBORO	State NC	Zip Code 28659-7615
FEC ID number of contributing federal political committee. C		<input type="checkbox"/> Memo Item CONTRIBUTION
Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 665.00	

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name B. SEBASTIAN, GAIL, M., ,		Date of Receipt MM / DD / YYYY 11 / 04 / 2016 Transaction ID : SA11A.473881
Mailing Address 2941 ROCK CREEK RD		Amount of Each Receipt this Period 25.00
City NORTH WILKESBORO	State NC	Zip Code 28659-7615
FEC ID number of contributing federal political committee. C		<input type="checkbox"/> Memo Item CONTRIBUTION
Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 665.00	

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name C. SECH, BRUCE, , ,		Date of Receipt MM / DD / YYYY 10 / 31 / 2016 Transaction ID : SA11A.459084
Mailing Address 670 SPRINGWOOD DR.		Amount of Each Receipt this Period 50.00
City KALAMAZOO	State MI	Zip Code 49009-9387
FEC ID number of contributing federal political committee. C		<input type="checkbox"/> Memo Item CONTRIBUTION
Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Aggregate Year-to-Date ▼ 250.00	

SUBTOTAL of Receipts This Page (optional).....▶	100.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3324 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
Team Ryan

A. SECKER, PHILLIP, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 13244 N SUNSET MESA DRIVE
 City MARANA State AZ Zip Code 85658-4054
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) PHILLIP SECKER JR Occupation (for Individual) SONLIGHT HOME CARE, INC.
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 10 / 26 / 2016
Transaction ID : SA11A.451314
 Amount of Each Receipt this Period 30.00
 Memo Item CONTRIBUTION

B. SECKER, PHILLIP, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 13244 N SUNSET MESA DRIVE
 City MARANA State AZ Zip Code 85658-4054
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) PHILLIP SECKER JR Occupation (for Individual) SONLIGHT HOME CARE, INC.
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 10 / 26 / 2016
Transaction ID : SA11A.451315
 Amount of Each Receipt this Period 30.00
 Memo Item CONTRIBUTION

C. SECKER, PHILLIP, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 13244 N SUNSET MESA DRIVE
 City MARANA State AZ Zip Code 85658-4054
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) PHILLIP SECKER JR Occupation (for Individual) SONLIGHT HOME CARE, INC.
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 10 / 26 / 2016
Transaction ID : SA11A.451316
 Amount of Each Receipt this Period 30.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	90.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3325 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. SECKER, PHILLIP, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 13244 N SUNSET MESA DRIVE

City MARANA	State AZ	Zip Code 85658-4054
----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) PHILLIP SECKER JR	Occupation (for Individual) SONLIGHT HOME CARE, INC.
--	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 26 / 2016
Transaction ID : SA11A.451317

Amount of Each Receipt this Period
30.00

Memo Item
CONTRIBUTION

B. SECKER, PHILLIP, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 13244 N SUNSET MESA DRIVE

City MARANA	State AZ	Zip Code 85658-4054
----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) PHILLIP SECKER JR	Occupation (for Individual) SONLIGHT HOME CARE, INC.
--	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 04 / 2016
Transaction ID : SA11A.472104

Amount of Each Receipt this Period
25.00

Memo Item
CONTRIBUTION

C. SECKER, PHILLIP, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 13244 N SUNSET MESA DRIVE

City MARANA	State AZ	Zip Code 85658-4054
----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) PHILLIP SECKER JR	Occupation (for Individual) SONLIGHT HOME CARE, INC.
--	---

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 04 / 2016
Transaction ID : SA11A.473022

Amount of Each Receipt this Period
30.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	85.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3326 OF 4311
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
Team Ryan

A. SECKEL, WILLIAM, P., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2000 EAGLE POINTE
 City PALM HARBOR State FL Zip Code 34685-3339
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) INFORMATION REQUESTED PER BEST EFFORTS Occupation (for Individual) INFORMATION REQUESTED PER BE
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 300.00

Date of Receipt 10 / 31 / 2016
Transaction ID : SA11A.457297
 Amount of Each Receipt this Period 200.00
 Memo Item CONTRIBUTION

B. SECREST, GLENDA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 711 S PACKWOOD AVE
 City TAMPA State FL Zip Code 33606-2544
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) CLAYTON GRAY HOME Occupation (for Individual) ADMIN ASST
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 250.00

Date of Receipt 10 / 24 / 2016
Transaction ID : SA11A.449548
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

C. SECREST, GLENDA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 711 S PACKWOOD AVE
 City TAMPA State FL Zip Code 33606-2544
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) CLAYTON GRAY HOME Occupation (for Individual) ADMIN ASST
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 250.00

Date of Receipt 10 / 31 / 2016
Transaction ID : SA11A.458175
 Amount of Each Receipt this Period 75.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 325.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3327 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
Team Ryan

A. SECREST, GLENDA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 711 S PACKWOOD AVE
 City TAMPA State FL Zip Code 33606-2544
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) CLAYTON GRAY HOME Occupation (for Individual) ADMIN ASST
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 10 / 31 / 2016
Transaction ID : SA11A.458263
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

B. SECREST, GLENDA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 711 S PACKWOOD AVE
 City TAMPA State FL Zip Code 33606-2544
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) CLAYTON GRAY HOME Occupation (for Individual) ADMIN ASST
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 11 / 02 / 2016
Transaction ID : SA11A.465764
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

C. SECREST, JERRY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 250 WILLOWBROOK DR
 City PORTOLA VALLEY State CA Zip Code 94028-7840
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) REAL ESTATE INVESTMENT
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 10 / 26 / 2016
Transaction ID : SA11A.450403
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	150.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3328 OF 4311
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. SEELING, ROBERT, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 2000 NORTHSTAR PLACE

City WILMINGTON	State NC	Zip Code 28405-4260
--------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
425.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	26	/	2016

Transaction ID : SA11A.454334

Amount of Each Receipt this Period
50.00

Memo Item
CONTRIBUTION

B. SEELING, ROBERT, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 2000 NORTHSTAR PLACE

City WILMINGTON	State NC	Zip Code 28405-4260
--------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
425.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	02	/	2016

Transaction ID : SA11A.466511

Amount of Each Receipt this Period
50.00

Memo Item
CONTRIBUTION

C. SEELING, ROBERT, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 2000 NORTHSTAR PLACE

City WILMINGTON	State NC	Zip Code 28405-4260
--------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
425.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	06	/	2016

Transaction ID : SA11A.477608

Amount of Each Receipt this Period
25.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	125.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3329 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
Team Ryan

A. SEIBEL, BRUCE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 30 QUARRY DRIVE
 City WOODLAND PARK State NJ Zip Code 07424-4201
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 465.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 25 / 2016
Transaction ID : SA11A.448866
 Amount of Each Receipt this Period
 55.00
 Memo Item
 CONTRIBUTION

B. SEIBEL, BRUCE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 30 QUARRY DRIVE
 City WOODLAND PARK State NJ Zip Code 07424-4201
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 465.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 04 / 2016
Transaction ID : SA11A.472764
 Amount of Each Receipt this Period
 55.00
 Memo Item
 CONTRIBUTION

C. SEIDERS, GREG, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 212 N WEST ST.
 City DOYLESTOWN State PA Zip Code 18901-3522
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 700.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 20 / 2016
Transaction ID : SA11A.442411
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	210.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3330 OF 4311
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
A. SEIDEL, JOSEPH, L., ,

Mailing Address **8058 GLENDALE ROAD**

City CHEVY CHASE	State MD	Zip Code 20815-5901
----------------------------	--------------------	-------------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) CREDIT SUISSE SECURITIES USA	Occupation (for Individual) ATTORNEY
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
10400.00

Date of Receipt
10 / 24 / 2016

Transaction ID : SA11A.443438

Amount of Each Receipt this Period
5000.00

Memo Item
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
B. SEILER, GEORGE, , ,

Mailing Address **12751 DUNVEGAN DRIVE**

City CLIFTON	State VA	Zip Code 20124-1803
------------------------	--------------------	-------------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
--	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
380.00

Date of Receipt
10 / 21 / 2016

Transaction ID : SA11A.444135

Amount of Each Receipt this Period
50.00

Memo Item
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
C. SEILER, GEORGE, , ,

Mailing Address **12751 DUNVEGAN DRIVE**

City CLIFTON	State VA	Zip Code 20124-1803
------------------------	--------------------	-------------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
--	---

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
380.00

Date of Receipt
11 / 02 / 2016

Transaction ID : SA11A.466443

Amount of Each Receipt this Period
25.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	5075.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3331 OF 4311
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. SEILER, GEORGE, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 12751 DUNVEGAN DRIVE

City CLIFTON State VA Zip Code 20124-1803

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 380.00

Date of Receipt 11 / 01 / 2016
Transaction ID : SA11A.467317

Amount of Each Receipt this Period 25.00

Memo Item CONTRIBUTION

B. SEIME, WAYNE, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 103 HIGHLANDER ST

City LAKEWAY State TX Zip Code 78734-4322

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt 10 / 24 / 2016
Transaction ID : SA11A.446014

Amount of Each Receipt this Period 100.00

Memo Item CONTRIBUTION

C. SEIPP, PAUL, E., ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 118 GROVE DRIVE

City PORTOLA VALLEY State CA Zip Code 94028-7639

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) INVESTOR

Receipt For: Primary General Other (specify)

Aggregate Year-to-Date ▼ 1000.00

Date of Receipt 10 / 28 / 2016
Transaction ID : SA11A.454688

Amount of Each Receipt this Period 1000.00

Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 1125.00

TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3332 OF 4311
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. SEITER, JOHN, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 335 W BELLEVUE DRIVE

City PASADENA	State CA	Zip Code 91105-1804
------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
3250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		31		2016

Transaction ID : SA11A.458502

Amount of Each Receipt this Period
1000.00

Memo Item
CONTRIBUTION

B. SEITER, JOHN, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 335 W BELLEVUE DRIVE

City PASADENA	State CA	Zip Code 91105-1804
------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
3250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		30		2016

Transaction ID : SA11A.459643

Amount of Each Receipt this Period
250.00

Memo Item
CONTRIBUTION

C. SEITZ, THOMAS, J., ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 603 S KANSAS AVENUE

City OLATHE	State KS	Zip Code 66061-4524
----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) RETIRED	Occupation (for Individual) RETIRED
--	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11		10		2016

Transaction ID : SA11A.468190

Amount of Each Receipt this Period
500.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	1750.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3333 OF 4311
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. SEIVER, JOHN, R., ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 2432 FAIRWAY POINTE DRIVE
City LEAGUE CITY State TX Zip Code 77573-5558
FEC ID number of contributing federal political committee. **C**
Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 300.00

Date of Receipt **10 / 28 / 2016**
Transaction ID : SA11A.455612
Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

B. SEIVER, JOHN, R., ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 2432 FAIRWAY POINTE DRIVE
City LEAGUE CITY State TX Zip Code 77573-5558
FEC ID number of contributing federal political committee. **C**
Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 300.00

Date of Receipt **11 / 07 / 2016**
Transaction ID : SA11A.476221
Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

C. SELBY, JAN, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 510 BROOME STREET APT 6E
City NEW YORK State NY Zip Code 10013-1614
FEC ID number of contributing federal political committee. **C**
Name of Employer (for Individual) INFORMATION REQUESTED PER BEST EFFORTS Occupation (for Individual) INFORMATION REQUESTED PER BEST EFFORTS
Receipt For: Primary General Other (specify)
Aggregate Year-to-Date ▼ 500.00

Date of Receipt **10 / 28 / 2016**
Transaction ID : SA11A.454750
Amount of Each Receipt this Period 500.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 700.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3334 OF 4311
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. SELFRIDGE, RICHARD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 320 VALLEY VISTA DR
 City CAMARILLO State CA Zip Code 93010-1634
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1547.00

Date of Receipt **11 / 01 / 2016**
Transaction ID : SA11A.462818
 Amount of Each Receipt this Period 200.00
 Memo Item CONTRIBUTION

B. SELKE, WILLIAM, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 10 S. WILLE STREET UNIT 208
 City MOUNT PROSPECT State IL Zip Code 60056-3186
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt **10 / 20 / 2016**
Transaction ID : SA11A.442178
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

C. SELKE, WILLIAM, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 10 S. WILLE STREET UNIT 208
 City MOUNT PROSPECT State IL Zip Code 60056-3186
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt **10 / 28 / 2016**
Transaction ID : SA11A.455631
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	250.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3335 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
A. SELKE, WILLIAM, , ,

Mailing Address **10 S. WILLE STREET
UNIT 208**

City **MOUNT PROSPECT** State **IL** Zip Code **60056-3186**

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) **NONE** Occupation (for Individual) **RETIRED**

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt
11 / 05 / 2016

Transaction ID : SA11A.479213

Amount of Each Receipt this Period
25.00

Memo Item
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
B. SELL, RON, , ,

Mailing Address **4933 BEECH CT**

City **SCHNECKSVILLE** State **PA** Zip Code **18078-2900**

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) **CRYSTAL SPRING ELECTRIC CO** Occupation (for Individual) **ELECTRICAL CONTRACTOR**

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
270.00

Date of Receipt
11 / 04 / 2016

Transaction ID : SA11A.472522

Amount of Each Receipt this Period
50.00

Memo Item
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
C. SENCENBAUGH, LEE, , MR.,

Mailing Address **PO BOX 1205**

City **LOS BANOS** State **CA** Zip Code **93635-1205**

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) **NONE** Occupation (for Individual) **RETIRED**

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
500.00

Date of Receipt
10 / 27 / 2016

Transaction ID : SA11A.452295

Amount of Each Receipt this Period
200.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	275.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3336 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. SENN, WILLIAM, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 8892 ASHGROVE HOUSE LN
 City VIENNA State VA Zip Code 22182-5550
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 600.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 04 / 2016
Transaction ID : SA11A.472735
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION

B. SENSKE, BARBARA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 18467 BEARPATH TRAIL
 City EDEN PRAIRIE State MN Zip Code 55347-3472
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) COMMERCE LABEL, INC. Occupation (for Individual) EXECUTIVE
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 350.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 26 / 2016
Transaction ID : SA11A.450523
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION

C. SENSKE, BARBARA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 18467 BEARPATH TRAIL
 City EDEN PRAIRIE State MN Zip Code 55347-3472
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) COMMERCE LABEL, INC. Occupation (for Individual) EXECUTIVE
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 350.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 04 / 2016
Transaction ID : SA11A.472560
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	300.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3337 OF 4311
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. SENSKE, BARBARA, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 18467 BEARPATH TRAIL

City EDEN PRAIRIE	State MN	Zip Code 55347-3472
----------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) COMMERCE LABEL, INC.	Occupation (for Individual) EXECUTIVE
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
350.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
11		05		2016

Transaction ID : SA11A.478549

Amount of Each Receipt this Period
25.00

Memo Item
CONTRIBUTION

B. SENSKE, BARBARA, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 18467 BEARPATH TRAIL

City EDEN PRAIRIE	State MN	Zip Code 55347-3472
----------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) COMMERCE LABEL, INC.	Occupation (for Individual) EXECUTIVE
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
350.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
11		05		2016

Transaction ID : SA11A.478550

Amount of Each Receipt this Period
25.00

Memo Item
CONTRIBUTION

C. SENTHAVONG, BOUNCHANH, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 8106 VIOLA ST

City SPRINGFIELD	State VA	Zip Code 22152-3626
---------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
595.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
10		20		2016

Transaction ID : SA11A.442464

Amount of Each Receipt this Period
25.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	75.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3338 OF 4311
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. SENTHAVONG, BOUNCHANH, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 8106 VIOLA ST

City SPRINGFIELD	State VA	Zip Code 22152-3626
---------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
595.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	27	/	2016

Transaction ID : SA11A.453338

Amount of Each Receipt this Period
25.00

Memo Item CONTRIBUTION

B. SENTHAVONG, BOUNCHANH, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 8106 VIOLA ST

City SPRINGFIELD	State VA	Zip Code 22152-3626
---------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
595.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	27	/	2016

Transaction ID : SA11A.456660

Amount of Each Receipt this Period
25.00

Memo Item CONTRIBUTION

C. SENTHAVONG, BOUNCHANH, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 8106 VIOLA ST

City SPRINGFIELD	State VA	Zip Code 22152-3626
---------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
595.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	01	/	2016

Transaction ID : SA11A.461770

Amount of Each Receipt this Period
35.00

Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	85.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3339 OF 4311
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. SENTHAVONG, BOUNCHANH, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 8106 VIOLA ST

City SPRINGFIELD	State VA	Zip Code 22152-3626
---------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
595.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	04	/	2016

Transaction ID : SA11A.473550

Amount of Each Receipt this Period
25.00

Memo Item CONTRIBUTION

B. SEPULVADO, WILNA, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 8709 GLENMORA DRIVE

City SHREVEPORT	State LA	Zip Code 71106-6234
--------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) SEPULVADO CONSULTING GROUP	Occupation (for Individual) ACCOUNTANT
---	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	28	/	2016

Transaction ID : SA11A.455635

Amount of Each Receipt this Period
250.00

Memo Item CONTRIBUTION

C. SERRENO, WILLIAM, , MR.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 9023 STOURBRIDGE DRIVE

City HUNTERSVILLE	State NC	Zip Code 28078-9792
----------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
245.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	20	/	2016

Transaction ID : SA11A.444715

Amount of Each Receipt this Period
50.00

Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	325.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3340 OF 4311
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. SERRENO, WILLIAM, , MR.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 9023 STOURBRIDGE DRIVE

City HUNTERSVILLE	State NC	Zip Code 28078-9792
----------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
245.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		20		2016

Transaction ID : SA11A.444717

Amount of Each Receipt this Period
25.00

Memo Item
CONTRIBUTION

B. SERRENO, WILLIAM, , MR.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 9023 STOURBRIDGE DRIVE

City HUNTERSVILLE	State NC	Zip Code 28078-9792
----------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
245.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		20		2016

Transaction ID : SA11A.444718

Amount of Each Receipt this Period
25.00

Memo Item
CONTRIBUTION

C. SETZER, EDWIN, P., MR.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1483 NORTHRIDGE DRIVE

City PRESCOTT	State AZ	Zip Code 86301-4450
------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
917.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		21		2016

Transaction ID : SA11A.444329

Amount of Each Receipt this Period
50.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	100.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3341 OF 4311
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. SETZER, EDWIN, P., MR.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1483 NORTHRIDGE DRIVE

City PRESCOTT State AZ Zip Code 86301-4450

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 917.00

Date of Receipt 10 / 24 / 2016
Transaction ID : SA11A.445708

Amount of Each Receipt this Period 25.00

Memo Item CONTRIBUTION

B. SETZER, EDWIN, P., MR.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1483 NORTHRIDGE DRIVE

City PRESCOTT State AZ Zip Code 86301-4450

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 917.00

Date of Receipt 10 / 23 / 2016
Transaction ID : SA11A.446471

Amount of Each Receipt this Period 25.00

Memo Item CONTRIBUTION

C. SETZER, EDWIN, P., MR.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1483 NORTHRIDGE DRIVE

City PRESCOTT State AZ Zip Code 86301-4450

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 917.00

Date of Receipt 10 / 25 / 2016
Transaction ID : SA11A.448373

Amount of Each Receipt this Period 30.00

Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶ 80.00

TOTAL This Period (last page this line number only).....▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3342 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. SETZER, EDWIN, P., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1483 NORTHRIDGE DRIVE
 City PRESCOTT State AZ Zip Code 86301-4450
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 917.00

Date of Receipt 10 / 26 / 2016
Transaction ID : SA11A.450761
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

B. SETZER, EDWIN, P., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1483 NORTHRIDGE DRIVE
 City PRESCOTT State AZ Zip Code 86301-4450
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 917.00

Date of Receipt 10 / 28 / 2016
Transaction ID : SA11A.455783
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

C. SETZER, EDWIN, P., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1483 NORTHRIDGE DRIVE
 City PRESCOTT State AZ Zip Code 86301-4450
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 917.00

Date of Receipt 10 / 29 / 2016
Transaction ID : SA11A.460565
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 75.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3343 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. SETZER, EDWIN, P., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1483 NORTHRIDGE DRIVE
 City PRESCOTT State AZ Zip Code 86301-4450
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 917.00

Date of Receipt 11 / 03 / 2016
Transaction ID : SA11A.468529
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

B. SETZER, EDWIN, P., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1483 NORTHRIDGE DRIVE
 City PRESCOTT State AZ Zip Code 86301-4450
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 917.00

Date of Receipt 11 / 06 / 2016
Transaction ID : SA11A.477099
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

C. SETZER, EDWIN, P., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1483 NORTHRIDGE DRIVE
 City PRESCOTT State AZ Zip Code 86301-4450
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 917.00

Date of Receipt 11 / 05 / 2016
Transaction ID : SA11A.479104
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	100.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3344 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. SETZER, EDWIN, P., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1483 NORTHRIDGE DRIVE
 City PRESCOTT State AZ Zip Code 86301-4450
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 917.00

Date of Receipt 11 / 07 / 2016
Transaction ID : SA11A.480345
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

B. SEVER, HERBERT, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 720 FIRST ST
 City ORANGE CITY State FL Zip Code 32763-6402
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 270.00

Date of Receipt 10 / 27 / 2016
Transaction ID : SA11A.453585
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

C. SEVILLE, THOMAS, R., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 25 FERNRIDGE AVE
 City VALLEY PARK State MO Zip Code 63088-1612
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1400.00

Date of Receipt 10 / 27 / 2016
Transaction ID : SA11A.457005
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶ 100.00
TOTAL This Period (last page this line number only).....▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3345 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
Team Ryan

A. SEVILLE, THOMAS, R., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 25 FERNRIDGE AVE
 City VALLEY PARK State MO Zip Code 63088-1612
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1400.00

Date of Receipt 10 / 27 / 2016
Transaction ID : SA11A.457006
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

B. SEVILLE, THOMAS, R., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 25 FERNRIDGE AVE
 City VALLEY PARK State MO Zip Code 63088-1612
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1400.00

Date of Receipt 10 / 27 / 2016
Transaction ID : SA11A.457039
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

C. SEVILLE, THOMAS, R., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 25 FERNRIDGE AVE
 City VALLEY PARK State MO Zip Code 63088-1612
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1400.00

Date of Receipt 10 / 27 / 2016
Transaction ID : SA11A.457040
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	250.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3346 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. SEVILLE, THOMAS, R., MR.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 25 FERNRIDGE AVE

City VALLEY PARK	State MO	Zip Code 63088-1612
---------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1400.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11		06		2016

Transaction ID : SA11A.477251

Amount of Each Receipt this Period
50.00

Memo Item CONTRIBUTION

B. SEVILLE, THOMAS, R., MR.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 25 FERNRIDGE AVE

City VALLEY PARK	State MO	Zip Code 63088-1612
---------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1400.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11		06		2016

Transaction ID : SA11A.477256

Amount of Each Receipt this Period
50.00

Memo Item CONTRIBUTION

C. SEYMOUR, ALLYN, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 42 WESTWOOD ROAD

City WEST HARTFORD	State CT	Zip Code 06117-2252
-----------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
350.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		27		2016

Transaction ID : SA11A.452313

Amount of Each Receipt this Period
150.00

Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	250.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3347 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. SEYMOUR, ALLYN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 42 WESTWOOD ROAD
 City WEST HARTFORD State CT Zip Code 06117-2252
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 350.00

Date of Receipt 11 / 07 / 2016
Transaction ID : SA11A.467722
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

B. SEYMOUR, DALE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 6711 MONROE ST. BLDG V
 City SYLVANIA State OH Zip Code 43560-1993
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SEYMOUR & ASSOCIATES Occupation (for Individual) FINANANCAIL ADVISOR
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 11 / 02 / 2016
Transaction ID : SA11A.466107
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

C. SFERRA, GEORGE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2 MERRITT CT
 City KATONAH State NY Zip Code 10536-2700
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) GEORGE W SFERRA JR DDS PC Occupation (for Individual) DENTIST
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 11 / 06 / 2016
Transaction ID : SA11A.477097
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	600.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3348 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. SFERRA, GEORGE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2 MERRITT CT
 City KATONAH State NY Zip Code 10536-2700
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) GEORGE W SFERRA JR DDS PC Occupation (for Individual) DENTIST
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 11 / 06 / 2016
Transaction ID : SA11A.477116
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

B. SHABBAS, SHADRAK, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 172 BEECHNUT DRIVE
 City HERCULES State CA Zip Code 94547-1122
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) TED JACOB ENGINEERING Occupation (for Individual) CFO
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 350.00

Date of Receipt 10 / 26 / 2016
Transaction ID : SA11A.451337
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

C. SHABBAS, SHADRAK, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 172 BEECHNUT DRIVE
 City HERCULES State CA Zip Code 94547-1122
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) TED JACOB ENGINEERING Occupation (for Individual) CFO
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 350.00

Date of Receipt 11 / 07 / 2016
Transaction ID : SA11A.476634
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	600.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3349 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. SHABO, RN, BARBARA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 406 SOUTH BRISTOL AV
 City LOS ANGELES State CA Zip Code 90049-3833
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 216.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 22 / 2016
Transaction ID : SA11A.446934
 Amount of Each Receipt this Period
 36.00
 Memo Item
 CONTRIBUTION

B. SHABO, RN, BARBARA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 406 SOUTH BRISTOL AV
 City LOS ANGELES State CA Zip Code 90049-3833
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 216.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 04 / 2016
Transaction ID : SA11A.471500
 Amount of Each Receipt this Period
 36.00
 Memo Item
 CONTRIBUTION

C. SHACKLEY, DOUGLAS, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 95 BOUTWELL ST
 City SAN FRANCISCO State CA Zip Code 94124-1903
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) PACIFIC AUXILIARY FIRE ALARM CO. Occupation (for Individual) BUSINESS OWNER
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 981.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 21 / 2016
Transaction ID : SA11A.447137
 Amount of Each Receipt this Period
 25.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	97.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3350 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. SHACKLEY, DOUGLAS, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 95 BOUTWELL ST
 City SAN FRANCISCO State CA Zip Code 94124-1903
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) PACIFIC AUXILIARY FIRE ALARM CO. Occupation (for Individual) BUSINESS OWNER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 981.00

Date of Receipt 10 / 31 / 2016
Transaction ID : SA11A.457795
 Amount of Each Receipt this Period 30.00
 Memo Item CONTRIBUTION

B. SHACKLEY, DOUGLAS, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 95 BOUTWELL ST
 City SAN FRANCISCO State CA Zip Code 94124-1903
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) PACIFIC AUXILIARY FIRE ALARM CO. Occupation (for Individual) BUSINESS OWNER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 981.00

Date of Receipt 10 / 31 / 2016
Transaction ID : SA11A.457796
 Amount of Each Receipt this Period 30.00
 Memo Item CONTRIBUTION

C. SHACKLEY, DOUGLAS, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 95 BOUTWELL ST
 City SAN FRANCISCO State CA Zip Code 94124-1903
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) PACIFIC AUXILIARY FIRE ALARM CO. Occupation (for Individual) BUSINESS OWNER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 981.00

Date of Receipt 10 / 30 / 2016
Transaction ID : SA11A.460108
 Amount of Each Receipt this Period 59.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶ 119.00
TOTAL This Period (last page this line number only).....▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3351 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. SHACKLEY, DOUGLAS, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 95 BOUTWELL ST
 City SAN FRANCISCO State CA Zip Code 94124-1903
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) PACIFIC AUXILIARY FIRE ALARM CO. Occupation (for Individual) BUSINESS OWNER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 981.00

Date of Receipt 11 / 04 / 2016
Transaction ID : SA11A.471169
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

B. SHACKLEY, DOUGLAS, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 95 BOUTWELL ST
 City SAN FRANCISCO State CA Zip Code 94124-1903
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) PACIFIC AUXILIARY FIRE ALARM CO. Occupation (for Individual) BUSINESS OWNER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 981.00

Date of Receipt 11 / 04 / 2016
Transaction ID : SA11A.472489
 Amount of Each Receipt this Period 59.00
 Memo Item CONTRIBUTION

C. SHACKLEY, DOUGLAS, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 95 BOUTWELL ST
 City SAN FRANCISCO State CA Zip Code 94124-1903
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) PACIFIC AUXILIARY FIRE ALARM CO. Occupation (for Individual) BUSINESS OWNER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 981.00

Date of Receipt 11 / 05 / 2016
Transaction ID : SA11A.479318
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	109.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3352 OF 4311
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. SHACKLEY, DOUGLAS, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 95 BOUTWELL ST

City SAN FRANCISCO	State CA	Zip Code 94124-1903
-----------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) PACIFIC AUXILIARY FIRE ALARM CO.	Occupation (for Individual) BUSINESS OWNER
---	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
981.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	05	/	2016

Transaction ID : SA11A.479319

Amount of Each Receipt this Period
25.00

Memo Item
CONTRIBUTION

B. SHAFER, WARREN, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 315 MINEAR DRIVE

City LIBERTYVILLE	State IL	Zip Code 60048-1676
----------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) VALENT BIO SCIENCES CORP	Occupation (for Individual) SCIENTIST
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	02	/	2016

Transaction ID : SA11A.465010

Amount of Each Receipt this Period
250.00

Memo Item
CONTRIBUTION

C. SHAFFER, MAUREEN, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1470 E. MINERAL PL.

City CENTENNIAL	State CO	Zip Code 80122-2909
--------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	27	/	2016

Transaction ID : SA11A.457122

Amount of Each Receipt this Period
225.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	500.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3353 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. SHAGRITHAYA, BALA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4420 RHEIMS PLACE
 City DALLAS State TX Zip Code 75205-3627
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) ESMT GROUP Occupation (for Individual) CEO
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 10 / 20 / 2016
Transaction ID : SA11A.442333
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

B. SHAGRITHAYA, BALA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4420 RHEIMS PLACE
 City DALLAS State TX Zip Code 75205-3627
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) ESMT GROUP Occupation (for Individual) CEO
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 10 / 31 / 2016
Transaction ID : SA11A.459010
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

C. SHAH, SATISH, C., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 6361 SE HARBOR CIRCLE
 City STUART State FL Zip Code 34996-1921
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 700.00

Date of Receipt 10 / 26 / 2016
Transaction ID : SA11A.450550
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 125.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3354 OF 4311
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. SHAH, SATISH, C., MR.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 6361 SE HARBOR CIRCLE

City STUART	State FL	Zip Code 34996-1921
----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
700.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	06	/	2016

Transaction ID : SA11A.477771

Amount of Each Receipt this Period
50.00

Memo Item
CONTRIBUTION

B. SHAIKH, IQBAL, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 7632 FOUR WINDS DR

City FORT WORTH	State TX	Zip Code 76133-7566
--------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) IQBAL M SHAIKH	Occupation (for Individual) TECHNICAL SUPPORT
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
469.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	24	/	2016

Transaction ID : SA11A.449390

Amount of Each Receipt this Period
100.00

Memo Item
CONTRIBUTION

C. SHAIKH, IQBAL, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 7632 FOUR WINDS DR

City FORT WORTH	State TX	Zip Code 76133-7566
--------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) IQBAL M SHAIKH	Occupation (for Individual) TECHNICAL SUPPORT
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
469.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	08	/	2016

Transaction ID : SA11A.479759

Amount of Each Receipt this Period
50.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	200.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3355 OF 4311
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. SHALABI, ISLAM, H., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4604 CLEAR LAKE LANE
 City MESQUITE State TX Zip Code 75150-8245
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) INFORMATION REQUESTED PER BEST EFFORTS Occupation (for Individual) INFORMATION REQUESTED PER BE
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 2500.00

Date of Receipt 10 / 24 / 2016
Transaction ID : SA11A.443481
 Amount of Each Receipt this Period 2500.00
 Memo Item CONTRIBUTION

B. SHALABI, MONTASER, M., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 156 OLD VINEYARD LANE
 City HEATH State TX Zip Code 75032-8313
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) INFORMATION REQUESTED PER BEST EFFORTS Occupation (for Individual) INFORMATION REQUESTED PER BE
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 2500.00

Date of Receipt 10 / 24 / 2016
Transaction ID : SA11A.443482
 Amount of Each Receipt this Period 2500.00
 Memo Item CONTRIBUTION

C. SHALE, R., ANNE, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1104 CHRISTI CIRCLE
 City BEAVERCREEK State OH Zip Code 45434-6376
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) HOLZFASTER, CECIL, MCKNIGHT & MUES Occupation (for Individual) ATTORNEY
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 440.00

Date of Receipt 10 / 27 / 2016
Transaction ID : SA11A.454150
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 5025.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3356 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
-----------------------------	-----------------------------	-----------------------------

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NAME OF COMMITTEE (In Full)
Team Ryan

A. SHALINE, JOHN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address P. O. BOX 12206
 City GREEN BAY State WI Zip Code 54307-2206
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 26 / 2016
Transaction ID : SA11A.450559
 Amount of Each Receipt this Period
 50.00
 Memo Item
 CONTRIBUTION

B. SHALINE, JOHN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address P. O. BOX 12206
 City GREEN BAY State WI Zip Code 54307-2206
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 04 / 2016
Transaction ID : SA11A.472657
 Amount of Each Receipt this Period
 50.00
 Memo Item
 CONTRIBUTION

C. SHANNON, LESLIE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1812 NORWAY ROAD
 City ANN ARBOR State MI Zip Code 48104-3641
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) ACCOUNTANT
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 350.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 28 / 2016
Transaction ID : SA11A.455836
 Amount of Each Receipt this Period
 250.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	350.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3357 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. SHANNON, LESLIE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1812 NORWAY ROAD
 City ANN ARBOR State MI Zip Code 48104-3641
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) ACCOUNTANT
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 350.00

Date of Receipt 11 / 07 / 2016
Transaction ID : SA11A.480370
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

B. SHAPIRO, JEFFREY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1133 TOWLSTON ROAD
 City MCLEAN State VA Zip Code 22102-1123
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) HYMAN PHELPS Occupation (for Individual) ATTORNEY
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 2519.00

Date of Receipt 10 / 30 / 2016
Transaction ID : SA11A.460135
 Amount of Each Receipt this Period 247.00
 Memo Item CONTRIBUTION

C. SHAPIRO, JEFFREY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1133 TOWLSTON ROAD
 City MCLEAN State VA Zip Code 22102-1123
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) HYMAN PHELPS Occupation (for Individual) ATTORNEY
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 2519.00

Date of Receipt 11 / 04 / 2016
Transaction ID : SA11A.473287
 Amount of Each Receipt this Period 247.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	594.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3358 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. SHAPIRO, JEFFREY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1133 TOWLSTON ROAD
 City MCLEAN State VA Zip Code 22102-1123
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) HYMAN PHELPS Occupation (for Individual) ATTORNEY
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 2519.00

Date of Receipt 11 / 04 / 2016
Transaction ID : SA11A.473789
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

B. SHAPPEE, RUDOLPH, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 7243 VIAR AVENUE
 City SAN DIEGO State CA Zip Code 92120-1926
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt 10 / 24 / 2016
Transaction ID : SA11A.446181
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

C. SHAPPEE, RUDOLPH, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 7243 VIAR AVENUE
 City SAN DIEGO State CA Zip Code 92120-1926
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt 11 / 04 / 2016
Transaction ID : SA11A.473391
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	300.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3359 OF 4311
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. SHARP, DONALD, A., DR., M.D.
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 139 CENTER PARK LANE

City OAK RIDGE	State TN	Zip Code 37830-9026
-------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) SELF EMPLOYED	Occupation (for Individual) PHYSICIAN
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		28		2016

Transaction ID : SA11A.454692

Amount of Each Receipt this Period
250.00

Memo Item
CONTRIBUTION

B. SHARP, JIM, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1601 FRONTIER DR

City VESTAVIA	State AL	Zip Code 35226-3509
------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) SHARP CLEANEERS	Occupation (for Individual) DRYCLEANER
--	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		26		2016

Transaction ID : SA11A.451079

Amount of Each Receipt this Period
25.00

Memo Item
CONTRIBUTION

C. SHARP, JIM, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1601 FRONTIER DR

City VESTAVIA	State AL	Zip Code 35226-3509
------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) SHARP CLEANEERS	Occupation (for Individual) DRYCLEANER
--	---

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11		04		2016

Transaction ID : SA11A.470881

Amount of Each Receipt this Period
25.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	300.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3360 OF 4311
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
A. SHARPE, RAYMOND, , MR.,

Mailing Address **26221 N 114TH ST**

City SCOTTSDALE	State AZ	Zip Code 85255-8274
---------------------------	--------------------	-------------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
--	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
425.00

Date of Receipt
10 / 29 / 2016

Transaction ID : SA11A.461164

Amount of Each Receipt this Period
50.00

Memo Item
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
B. SHARPE, RAYMOND, , MR.,

Mailing Address **26221 N 114TH ST**

City SCOTTSDALE	State AZ	Zip Code 85255-8274
---------------------------	--------------------	-------------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
--	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
425.00

Date of Receipt
11 / 04 / 2016

Transaction ID : SA11A.471337

Amount of Each Receipt this Period
50.00

Memo Item
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
C. SHARRETT, ALLAN, , ,

Mailing Address **7504 VINCA CT.**

City MOSELEY	State VA	Zip Code 23120-2403
------------------------	--------------------	-------------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
--	---

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
250.00

Date of Receipt
11 / 02 / 2016

Transaction ID : SA11A.466328

Amount of Each Receipt this Period
250.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	350.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3361 OF 4311
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. SHARRATT, DEAN, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 7931 E STONECLIFF CIRCLE

City MESA	State AZ	Zip Code 85207-1472
--------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
240.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		26		2016

Transaction ID : SA11A.450579

Amount of Each Receipt this Period
30.00

Memo Item CONTRIBUTION

B. SHARRATT, DEAN, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 7931 E STONECLIFF CIRCLE

City MESA	State AZ	Zip Code 85207-1472
--------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
240.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11		04		2016

Transaction ID : SA11A.473505

Amount of Each Receipt this Period
30.00

Memo Item CONTRIBUTION

C. SHAW, ALAN, J., MR.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 5 HAMBLETONIAN DRIVE

City COLTS NECK	State NJ	Zip Code 07722-2121
--------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
1100.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11		04		2016

Transaction ID : SA11A.472562

Amount of Each Receipt this Period
100.00

Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	160.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3362 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. SHAW, GEORGE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 701 RAVENEL ROAD
 City AUGUSTA State GA Zip Code 30909-1835
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 243.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 26 / 2016
Transaction ID : SA11A.451068
 Amount of Each Receipt this Period
 25.00
 Memo Item
 CONTRIBUTION

B. SHAW, GEORGE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 701 RAVENEL ROAD
 City AUGUSTA State GA Zip Code 30909-1835
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 243.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 04 / 2016
Transaction ID : SA11A.473149
 Amount of Each Receipt this Period
 25.00
 Memo Item
 CONTRIBUTION

C. SHAW, JULIUS, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 44 CHATEAUX
 City FENTON State MI Zip Code 48430-
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 398.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 29 / 2016
Transaction ID : SA11A.461021
 Amount of Each Receipt this Period
 36.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	86.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3363 OF 4311
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Team Ryan

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name A. SHAW, JULIUS, , ,		Date of Receipt
Mailing Address 44 CHATEAUX		<input type="text" value="11"/> / <input type="text" value="04"/> / <input type="text" value="2016"/>
City FENTON	State MI	Zip Code 48430-
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		Transaction ID : SA11A.471908
Name of Employer (for Individual) NONE		Amount of Each Receipt this Period <input type="text" value="36.00"/>
Occupation (for Individual) RETIRED		<input type="checkbox"/> Memo Item CONTRIBUTION
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ <input type="text" value="398.00"/>	

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name B. SHEA, JAMES, , ,		Date of Receipt
Mailing Address 9427 KATELYN COURT		<input type="text" value="10"/> / <input type="text" value="31"/> / <input type="text" value="2016"/>
City MANASSAS PARK	State VA	Zip Code 20111-3043
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		Transaction ID : SA11A.459194
Name of Employer (for Individual) NONE		Amount of Each Receipt this Period <input type="text" value="25.00"/>
Occupation (for Individual) RETIRED		<input type="checkbox"/> Memo Item CONTRIBUTION
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ <input type="text" value="295.00"/>	

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name C. SHEA, JAMES, , ,		Date of Receipt
Mailing Address 9427 KATELYN COURT		<input type="text" value="11"/> / <input type="text" value="04"/> / <input type="text" value="2016"/>
City MANASSAS PARK	State VA	Zip Code 20111-3043
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		Transaction ID : SA11A.474173
Name of Employer (for Individual) NONE		Amount of Each Receipt this Period <input type="text" value="25.00"/>
Occupation (for Individual) RETIRED		<input type="checkbox"/> Memo Item CONTRIBUTION
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Aggregate Year-to-Date ▼ <input type="text" value="295.00"/>	

SUBTOTAL of Receipts This Page (optional).....▶	<input type="text" value="86.00"/>
TOTAL This Period (last page this line number only).....▶	<input type="text"/>

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3364 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. SHEARMAN, KATE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 99 POMEORY RD
 City MADISON State NJ Zip Code 07940-2639
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) UMS GROUP Occupation (for Individual) EXECUTIVE
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt **10 / 29 / 2016**
Transaction ID : SA11A.461145
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

B. SHEARMAN, KATE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 99 POMEORY RD
 City MADISON State NJ Zip Code 07940-2639
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) UMS GROUP Occupation (for Individual) EXECUTIVE
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt **11 / 04 / 2016**
Transaction ID : SA11A.472701
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

C. SHEARER, OTIS, C., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO BOX 520
 City BOOKER State TX Zip Code 79005-0520
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt **10 / 24 / 2016**
Transaction ID : SA11A.443895
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	150.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3365 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. SHEBELSKY, ROBERT, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 172 HIDDEN LAKE DRIVE
 City EAST STROUDSBURG State PA Zip Code 18302-9097
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt 11 / 01 / 2016
Transaction ID : SA11A.462466
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

B. SHEBELSKY, ROBERT, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 172 HIDDEN LAKE DRIVE
 City EAST STROUDSBURG State PA Zip Code 18302-9097
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt 11 / 07 / 2016
Transaction ID : SA11A.480432
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

C. SHEEL, ROSEMARY, , MRS.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 652 TRUENO AVE.
 City CAMARILLO State CA Zip Code 93010-1060
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 450.00

Date of Receipt 10 / 26 / 2016
Transaction ID : SA11A.454580
 Amount of Each Receipt this Period 200.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	400.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3366 OF 4311
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
Team Ryan

A. SHEETS, CHARLES, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 58 PACES LAKES OVERLOOK

City DALLAS	State GA	Zip Code 30157-1764
----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
411.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		26		2016

Transaction ID : SA11A.454313

Amount of Each Receipt this Period
30.00

Memo Item CONTRIBUTION

B. SHEETS, CHARLES, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 58 PACES LAKES OVERLOOK

City DALLAS	State GA	Zip Code 30157-1764
----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
411.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		26		2016

Transaction ID : SA11A.454316

Amount of Each Receipt this Period
25.00

Memo Item CONTRIBUTION

C. SHEETS, CHARLES, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 58 PACES LAKES OVERLOOK

City DALLAS	State GA	Zip Code 30157-1764
----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
411.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		31		2016

Transaction ID : SA11A.464053

Amount of Each Receipt this Period
25.00

Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	80.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3367 OF 4311
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
Team Ryan

A. SHEETS, CHARLES, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 58 PACES LAKES OVERLOOK

City DALLAS	State GA	Zip Code 30157-1764
----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
411.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		31		2016

Transaction ID : SA11A.464059

Amount of Each Receipt this Period
25.00

Memo Item
CONTRIBUTION

B. SHEETS, CHARLES, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 58 PACES LAKES OVERLOOK

City DALLAS	State GA	Zip Code 30157-1764
----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
411.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11		06		2016

Transaction ID : SA11A.476739

Amount of Each Receipt this Period
25.00

Memo Item
CONTRIBUTION

C. SHEETS, CHARLES, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 58 PACES LAKES OVERLOOK

City DALLAS	State GA	Zip Code 30157-1764
----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
411.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11		06		2016

Transaction ID : SA11A.476746

Amount of Each Receipt this Period
25.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	75.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3368 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. SHEFFIELD, CYNTHIA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 109 MORNING DOVE CT
 City ARGYLE State TX Zip Code 76226-5115
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) CYNTHIA SHEFFIELD Occupation (for Individual) TREAD SHEFFIELD
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 241.00

Date of Receipt 11 / 07 / 2016
Transaction ID : SA11A.480173
 Amount of Each Receipt this Period 5.00
 Memo Item CONTRIBUTION

B. SHEFFIELD, CYNTHIA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 109 MORNING DOVE CT
 City ARGYLE State TX Zip Code 76226-5115
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) CYNTHIA SHEFFIELD Occupation (for Individual) TREAD SHEFFIELD
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 241.00

Date of Receipt 11 / 07 / 2016
Transaction ID : SA11A.480175
 Amount of Each Receipt this Period 18.00
 Memo Item CONTRIBUTION

C. SHEFFIELD, CYNTHIA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 109 MORNING DOVE CT
 City ARGYLE State TX Zip Code 76226-5115
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) CYNTHIA SHEFFIELD Occupation (for Individual) TREAD SHEFFIELD
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 241.00

Date of Receipt 11 / 07 / 2016
Transaction ID : SA11A.480176
 Amount of Each Receipt this Period 18.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶ 41.00
TOTAL This Period (last page this line number only).....▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3369 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
Team Ryan

A. SHEFFIELD, CYNTHIA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 109 MORNING DOVE CT
 City ARGYLE State TX Zip Code 76226-5115
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) CYNTHIA SHEFFIELD Occupation (for Individual) TREAD SHEFFIELD
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 241.00

Date of Receipt 11 / 07 / 2016
Transaction ID : SA11A.480180
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

B. SHELL, MARK, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 212 MIDSUMMER CIRCLE
 City GAITHERSBURG State MD Zip Code 20878-5230
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYES Occupation (for Individual) SALES
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 10 / 22 / 2016
Transaction ID : SA11A.446875
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

C. SHELTON, KATHY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 206 RIVERWOOD
 City BOERNE State TX Zip Code 78006-6048
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 275.00

Date of Receipt 10 / 29 / 2016
Transaction ID : SA11A.461088
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	125.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3370 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. SHEPHERD-FREY, CAROL, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 636 FISHER FIELD RD
 City BLAIRSVILLE State GA Zip Code 30512-7752
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 800.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 25 / 2016
Transaction ID : SA11A.448697
 Amount of Each Receipt this Period
 50.00
 Memo Item
 CONTRIBUTION

B. SHEPHERD-FREY, CAROL, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 636 FISHER FIELD RD
 City BLAIRSVILLE State GA Zip Code 30512-7752
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 800.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 25 / 2016
Transaction ID : SA11A.448699
 Amount of Each Receipt this Period
 50.00
 Memo Item
 CONTRIBUTION

C. SHEPHERD-FREY, CAROL, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 636 FISHER FIELD RD
 City BLAIRSVILLE State GA Zip Code 30512-7752
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 800.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 03 / 2016
Transaction ID : SA11A.468777
 Amount of Each Receipt this Period
 50.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	150.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3371 OF 4311
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. SHEPHERD, CASSANDRA, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 3515 ESTATES RD

City TALLAHASSEE	State FL	Zip Code 32305-6948
---------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		21		2016

Transaction ID : SA11A.447119

Amount of Each Receipt this Period
25.00

Memo Item CONTRIBUTION

B. SHEPHERD, CASSANDRA, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 3515 ESTATES RD

City TALLAHASSEE	State FL	Zip Code 32305-6948
---------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		31		2016

Transaction ID : SA11A.458654

Amount of Each Receipt this Period
50.00

Memo Item CONTRIBUTION

C. SHEPHERD, CASSANDRA, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 3515 ESTATES RD

City TALLAHASSEE	State FL	Zip Code 32305-6948
---------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		31		2016

Transaction ID : SA11A.458661

Amount of Each Receipt this Period
50.00

Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	125.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3372 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. SHEPHERD, CASSANDRA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3515 ESTATES RD
 City TALLAHASSEE State FL Zip Code 32305-6948
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 10 / 31 / 2016
Transaction ID : SA11A.458706
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

B. SHEPHERD, CASSANDRA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3515 ESTATES RD
 City TALLAHASSEE State FL Zip Code 32305-6948
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 10 / 31 / 2016
Transaction ID : SA11A.458713
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

C. SHEPHERD, SHELLEY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 14240 EVERGREEN TRAIL
 City MANITOU BEACH State MI Zip Code 49253-9702
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) DOCTOR OF CHIROPRACTIC
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 434.00

Date of Receipt 11 / 04 / 2016
Transaction ID : SA11A.472370
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	125.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3373 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. SHEPTAK, GRACIA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 16 BALD EAGLE ROAD
 City HILTON HEAD ISLAND State SC Zip Code 29928-5611
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 10 / 24 / 2016
Transaction ID : SA11A.446175
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

B. SHERER, PATRIC, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 12750 JEFFERSON DAVIS HIGHWAY #104
 City CHESTER State VA Zip Code 23831-5308
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) INFORMATION REQUESTED PER BEST EFFORTS Occupation (for Individual) INFORMATION REQUESTED PER BE
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 275.00

Date of Receipt 10 / 25 / 2016
Transaction ID : SA11A.447504
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

C. SHERER, PATRIC, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 12750 JEFFERSON DAVIS HIGHWAY #104
 City CHESTER State VA Zip Code 23831-5308
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) INFORMATION REQUESTED PER BEST EFFORTS Occupation (for Individual) INFORMATION REQUESTED PER BE
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 275.00

Date of Receipt 11 / 17 / 2016
Transaction ID : SA11A.468390
 Amount of Each Receipt this Period 75.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 275.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3374 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. SHERIDAN, JAMES, L., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 832 BELL LANE
 City WINNETKA State IL Zip Code 60093-1604
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) INFORMATION REQUESTED PER BEST EFFORTS Occupation (for Individual) INFORMATION REQUESTED PER BE
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 400.00

Date of Receipt 10 / 20 / 2016
Transaction ID : SA11A.433504
 Amount of Each Receipt this Period 200.00
 Memo Item CONTRIBUTION

B. SHERIDAN BOETTGER, LOIS, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 23711 EASTSIDE RD
 City WILLITS State CA Zip Code 95490-5712
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) RANCHER/RET ANESTHITEST
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 925.00

Date of Receipt 10 / 25 / 2016
Transaction ID : SA11A.452098
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

C. SHERIDAN BOETTGER, LOIS, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 23711 EASTSIDE RD
 City WILLITS State CA Zip Code 95490-5712
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) RANCHER/RET ANESTHITEST
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 925.00

Date of Receipt 10 / 25 / 2016
Transaction ID : SA11A.452102
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	400.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3375 OF 4311
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. SHERIDAN BOETTGER, LOIS, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 23711 EASTSIDE RD

City WILLITS	State CA	Zip Code 95490-5712
-----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) SELF EMPLOYED	Occupation (for Individual) RANCHER/RET ANESTHITEST
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
925.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	27	/	2016

Transaction ID : SA11A.453835

Amount of Each Receipt this Period
75.00

Memo Item CONTRIBUTION

B. SHERIDAN BOETTGER, LOIS, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 23711 EASTSIDE RD

City WILLITS	State CA	Zip Code 95490-5712
-----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) SELF EMPLOYED	Occupation (for Individual) RANCHER/RET ANESTHITEST
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
925.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	04	/	2016

Transaction ID : SA11A.472734

Amount of Each Receipt this Period
75.00

Memo Item CONTRIBUTION

C. SHEW, JON, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 2215 ED CIDER MILL RD

City COLUMBIA CITY	State IN	Zip Code 46725-
-----------------------	-------------	--------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) J&K COMMUNICATIONS INC	Occupation (for Individual) COB
---	------------------------------------

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
950.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	23	/	2016

Transaction ID : SA11A.446506

Amount of Each Receipt this Period
100.00

Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	250.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3376 OF 4311
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. SHEW, JON, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 2215 ED CIDER MILL RD

City COLUMBIA CITY	State IN	Zip Code 46725-
-----------------------	-------------	--------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) J&K COMMUNICATIONS INC	Occupation (for Individual) COB
---	------------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
950.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		23		2016

Transaction ID : SA11A.446507

Amount of Each Receipt this Period
100.00

Memo Item
CONTRIBUTION

B. SHEW, JON, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 2215 ED CIDER MILL RD

City COLUMBIA CITY	State IN	Zip Code 46725-
-----------------------	-------------	--------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) J&K COMMUNICATIONS INC	Occupation (for Individual) COB
---	------------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
950.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11		02		2016

Transaction ID : SA11A.469779

Amount of Each Receipt this Period
50.00

Memo Item
CONTRIBUTION

C. SHEW, JON, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 2215 ED CIDER MILL RD

City COLUMBIA CITY	State IN	Zip Code 46725-
-----------------------	-------------	--------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) J&K COMMUNICATIONS INC	Occupation (for Individual) COB
---	------------------------------------

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
950.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11		04		2016

Transaction ID : SA11A.471348

Amount of Each Receipt this Period
100.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	250.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3377 OF 4311
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. SHEW, JON, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 2215 ED CIDER MILL RD

City COLUMBIA CITY	State IN	Zip Code 46725-
-----------------------	-------------	--------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) J&K COMMUNICATIONS INC	Occupation (for Individual) COB
---	------------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
950.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	04	/	2016

Transaction ID : SA11A.472765

Amount of Each Receipt this Period
50.00

Memo Item
CONTRIBUTION

B. SHEW, JON, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 2215 ED CIDER MILL RD

City COLUMBIA CITY	State IN	Zip Code 46725-
-----------------------	-------------	--------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) J&K COMMUNICATIONS INC	Occupation (for Individual) COB
---	------------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
950.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	07	/	2016

Transaction ID : SA11A.475261

Amount of Each Receipt this Period
100.00

Memo Item
CONTRIBUTION

C. SHEWELL, TANYA, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 3023 MEADOW LAKES DR

City WATKINSVILLE	State GA	Zip Code 30677-4988
----------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
550.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	25	/	2016

Transaction ID : SA11A.451510

Amount of Each Receipt this Period
50.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	200.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3378 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. SHEWELL, TANYA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3023 MEADOW LAKES DR
 City WATKINSVILLE State GA Zip Code 30677-4988
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 550.00

Date of Receipt 10 / 31 / 2016
Transaction ID : SA11A.457955
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

B. SHEWELL, TANYA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3023 MEADOW LAKES DR
 City WATKINSVILLE State GA Zip Code 30677-4988
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 550.00

Date of Receipt 10 / 31 / 2016
Transaction ID : SA11A.464262
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

C. SHIELDS, PATRICIA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1077 PONTE VEDRA BOULEVARD
 City PONTE VEDRA BEACH State FL Zip Code 32082-4016
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 900.00

Date of Receipt 11 / 01 / 2016
Transaction ID : SA11A.461810
 Amount of Each Receipt this Period 500.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	600.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3379 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. SHIELDS, VIRGINIA, P., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 6740 EPPING FOREST WAY N
 APT. 107
 City JACKSONVILLE State FL Zip Code 32217-2676
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1100.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 25 / 2016
Transaction ID : SA11A.447393
 Amount of Each Receipt this Period
 500.00
 Memo Item
 CONTRIBUTION

B. SHILLING, MICHAEL, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO BOX 1568
 City MANHATTAN State KS Zip Code 66505-1568
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SHILLING CONST. INC Occupation (for Individual) CONTRACTOR
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 375.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 26 / 2016
Transaction ID : SA11A.450571
 Amount of Each Receipt this Period
 50.00
 Memo Item
 CONTRIBUTION

C. SHILLING, MICHAEL, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO BOX 1568
 City MANHATTAN State KS Zip Code 66505-1568
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SHILLING CONST. INC Occupation (for Individual) CONTRACTOR
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 375.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 26 / 2016
Transaction ID : SA11A.450574
 Amount of Each Receipt this Period
 50.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	600.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3380 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
A. SHILLING, MICHAEL, , ,

Mailing Address **PO BOX 1568**

City MANHATTAN	State KS	Zip Code 66505-1568
--------------------------	--------------------	-------------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) SHILLING CONST. INC	Occupation (for Individual) CONTRACTOR
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
375.00

Date of Receipt
10 / 26 / 2016

Transaction ID : SA11A.450575

Amount of Each Receipt this Period
50.00

Memo Item
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
B. SHILLING, MICHAEL, , ,

Mailing Address **PO BOX 1568**

City MANHATTAN	State KS	Zip Code 66505-1568
--------------------------	--------------------	-------------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) SHILLING CONST. INC	Occupation (for Individual) CONTRACTOR
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
375.00

Date of Receipt
11 / 01 / 2016

Transaction ID : SA11A.462588

Amount of Each Receipt this Period
50.00

Memo Item
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
C. SHILLING, MICHAEL, , ,

Mailing Address **PO BOX 1568**

City MANHATTAN	State KS	Zip Code 66505-1568
--------------------------	--------------------	-------------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) SHILLING CONST. INC	Occupation (for Individual) CONTRACTOR
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
375.00

Date of Receipt
11 / 01 / 2016

Transaction ID : SA11A.462589

Amount of Each Receipt this Period
50.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	150.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3381 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. SHILLING, MICHAEL, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address **PO BOX 1568**

City **MANHATTAN** State **KS** Zip Code **66505-1568**

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) **SHILLING CONST. INC** Occupation (for Individual) **CONTRACTOR**

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **375.00**

Date of Receipt **11 / 03 / 2016**

Transaction ID : SA11A.468683

Amount of Each Receipt this Period **25.00**

Memo Item
CONTRIBUTION

B. SHINAL, PAUL, J., ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address **23 SHAMROCK AVENUE**

City **SENECA FALLS** State **NY** Zip Code **13148-1805**

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) **INFORMATION REQUESTED PER BEST EFFORTS** Occupation (for Individual) **INFORMATION REQUESTED PER BE**

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **250.00**

Date of Receipt **10 / 24 / 2016**

Transaction ID : SA11A.444038

Amount of Each Receipt this Period **250.00**

Memo Item
CONTRIBUTION

C. SHINGLETON, LARRY, V., ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address **771 KIPP DRIVE**

City **CINCINNATI** State **OH** Zip Code **45255-4510**

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) **INFORMATION REQUESTED PER BEST EFFORTS** Occupation (for Individual) **INFORMATION REQUESTED PER BE**

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼ **350.00**

Date of Receipt **11 / 04 / 2016**

Transaction ID : SA11A.467637

Amount of Each Receipt this Period **250.00**

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... **525.00**

TOTAL This Period (last page this line number only).....

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3382 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
Team Ryan

A. SHINKAY, SEAN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 11946 N. ST. RD. 26
 City FORT ATKINSON State WI Zip Code 53538-9403
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) RESTAURANT OWNER/LANDLORD
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 350.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 04 / 2016
Transaction ID : SA11A.474182
 Amount of Each Receipt this Period
 50.00
 Memo Item
 CONTRIBUTION

B. SHIPLEY, CHARLES, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1227 NE 94FH
 City SEATTLE State WA Zip Code 98115-
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 21 / 2016
Transaction ID : SA11A.444157
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION

C. SHIPLEY, CHARLES, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1227 NE 94FH
 City SEATTLE State WA Zip Code 98115-
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 1250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 01 / 2016
Transaction ID : SA11A.463041
 Amount of Each Receipt this Period
 50.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	200.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3383 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. SHIPLEY, EDWARD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 43 MCCAMPBELL ROAD
 City HOLMDEL State NJ Zip Code 07733-2232
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 2289.00

Date of Receipt 10 / 22 / 2016
Transaction ID : SA11A.446799
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

B. SHIPLEY, EDWARD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 43 MCCAMPBELL ROAD
 City HOLMDEL State NJ Zip Code 07733-2232
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 2289.00

Date of Receipt 10 / 25 / 2016
Transaction ID : SA11A.447977
 Amount of Each Receipt this Period 500.00
 Memo Item CONTRIBUTION

C. SHIRK, JANET, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1180 BROOKGATE WAY NE
 City ATLANTA State GA Zip Code 30319-2877
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 905.00

Date of Receipt 11 / 06 / 2016
Transaction ID : SA11A.477402
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 700.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3384 OF 4311
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. SHIVELY, MICHAEL, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 992 NOHUNTA CT
 City CINCINNATI State OH Zip Code 45231-2518
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) JAS ELECTRIC LLC OWNER Occupation (for Individual) ELECTRICIAN
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 800.00

Date of Receipt **10 / 26 / 2016**
Transaction ID : SA11A.450620
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

B. SHJEFLO, WALT, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2000 ALAMEDA DE LAS PULGAS #250
 City SAN MATEO State CA Zip Code 94403-1271
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) ATTORNEY
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1050.00

Date of Receipt **10 / 20 / 2016**
Transaction ID : SA11A.444876
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

C. SHORT, DELANA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 432 OAKWOOD RD
 City KERRVILLE State TX Zip Code 78028-8905
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 980.00

Date of Receipt **10 / 31 / 2016**
Transaction ID : SA11A.459228
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	375.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3385 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
Team Ryan

A. SHORT, DELANA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 432 OAKWOOD RD
 City KERRVILLE State TX Zip Code 78028-8905
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 980.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 31 / 2016
Transaction ID : SA11A.459229
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

B. SHORT, DELANA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 432 OAKWOOD RD
 City KERRVILLE State TX Zip Code 78028-8905
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 980.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 31 / 2016
Transaction ID : SA11A.463265
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

C. SHORT, DELANA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 432 OAKWOOD RD
 City KERRVILLE State TX Zip Code 78028-8905
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 980.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 31 / 2016
Transaction ID : SA11A.463267
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	75.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3386 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. SHORT, DELANA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 432 OAKWOOD RD
 City KERRVILLE State TX Zip Code 78028-8905
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 980.00

Date of Receipt
 11 / 02 / 2016
Transaction ID : SA11A.469437
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

B. SHORT, JERRY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 600 WEST LANCASTER RD
 City HAYDEN State ID Zip Code 83835-8601
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) JERRY SHORT CABINETS &,MILLWORK INC. Occupation (for Individual) CABINETMAKER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1329.00

Date of Receipt
 10 / 27 / 2016
Transaction ID : SA11A.453799
 Amount of Each Receipt this Period 147.00
 Memo Item CONTRIBUTION

C. SHORT, JERRY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 600 WEST LANCASTER RD
 City HAYDEN State ID Zip Code 83835-8601
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) JERRY SHORT CABINETS &,MILLWORK INC. Occupation (for Individual) CABINETMAKER
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 1329.00

Date of Receipt
 11 / 04 / 2016
Transaction ID : SA11A.472549
 Amount of Each Receipt this Period 147.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	319.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3387 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. SHRAKE, JIMMY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 6122 APPLE VALLEY LN
 SHROCKWORKS
 City HOUSTON State TX Zip Code 77069-2502
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SHROCKWORKS Occupation (for Individual) OWNER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 950.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 29 / 2016
Transaction ID : SA11A.460743
 Amount of Each Receipt this Period
 250.00
 Memo Item
 CONTRIBUTION

B. SHREM, LES, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3 OLMSTED LANE
 City MENDHAM State NJ Zip Code 07945-3058
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NORTHERN ANESTHESIA, PA Occupation (for Individual) PHYSICIAN
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 03 / 2016
Transaction ID : SA11A.468926
 Amount of Each Receipt this Period
 250.00
 Memo Item
 CONTRIBUTION

C. SHRODE, JAMES, M., MR,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 16442 GRIMAUD LANE
 City HUNTINGTON BEACH State CA Zip Code 92649-1827
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 1750.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 20 / 2016
Transaction ID : SA11A.433418
 Amount of Each Receipt this Period
 1000.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	1500.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3388 OF 4311
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. SHROPSHIRE, CAMERON, E., , JR.
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 4619 CRESTLINE RD

City FT. WORTH	State TX	Zip Code 76107-1505
-------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) INFORMATION REQUESTED PER BEST EFFORTS	Occupation (for Individual) INFORMATION REQUESTED PER BE
---	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		24		2016

Transaction ID : SA11A.443478

Amount of Each Receipt this Period
500.00

Memo Item
CONTRIBUTION

B. SHUEY, DAVID, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1105 W MAIN ST

City BERNE	State IN	Zip Code 46711-1302
---------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) FINANCIAL PARTNERS FCU	Occupation (for Individual) CEO
---	------------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		24		2016

Transaction ID : SA11A.445968

Amount of Each Receipt this Period
25.00

Memo Item
CONTRIBUTION

C. SHUEY, DAVID, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1105 W MAIN ST

City BERNE	State IN	Zip Code 46711-1302
---------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) FINANCIAL PARTNERS FCU	Occupation (for Individual) CEO
---	------------------------------------

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		31		2016

Transaction ID : SA11A.457997

Amount of Each Receipt this Period
25.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	550.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3389 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
Team Ryan

A. SHULLMAN, STEVEN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5868 PADDINGTON WAY
 City BOCA RATON State FL Zip Code 33496-2514
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SHULLMAN HEALTH MANAGEMENT Occupation (for Individual) SMALL BUSINESS OWNER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 600.00

Date of Receipt 10 / 31 / 2016
Transaction ID : SA11A.463280
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

B. SHUVALOV, ANDREW, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address BOX 738
 City MANOR State TX Zip Code 78653-0738
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) RANCHER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 650.00

Date of Receipt 10 / 24 / 2016
Transaction ID : SA11A.445583
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

C. SHUVALOV, ANDREW, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address BOX 738
 City MANOR State TX Zip Code 78653-0738
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) RANCHER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 650.00

Date of Receipt 10 / 26 / 2016
Transaction ID : SA11A.451070
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	250.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3390 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
Team Ryan

A. SHUVALOV, ANDREW, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address **BOX 738**
 City **MANOR** State **TX** Zip Code **78653-0738**
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) **SELF EMPLOYED** Occupation (for Individual) **RANCHER**
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ **650.00**

Date of Receipt **11 / 04 / 2016**
Transaction ID : SA11A.472586
 Amount of Each Receipt this Period **50.00**
 Memo Item
CONTRIBUTION

B. SICHER, BRYAN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address **835 LAKEMOUNT DRIVE**
 City **MONETA** State **VA** Zip Code **24121-5805**
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) **BRYAN GEORGE SICHER** Occupation (for Individual) **DENTIST**
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ **250.00**

Date of Receipt **10 / 24 / 2016**
Transaction ID : SA11A.449536
 Amount of Each Receipt this Period **50.00**
 Memo Item
CONTRIBUTION

C. SICHER, BRYAN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address **835 LAKEMOUNT DRIVE**
 City **MONETA** State **VA** Zip Code **24121-5805**
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) **BRYAN GEORGE SICHER** Occupation (for Individual) **DENTIST**
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ **250.00**

Date of Receipt **10 / 31 / 2016**
Transaction ID : SA11A.464587
 Amount of Each Receipt this Period **50.00**
 Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	150.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3391 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
Team Ryan

A. SICHER, BRYAN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 835 LAKEMOUNT DRIVE
 City MONETA State VA Zip Code 24121-5805
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) BRYAN GEORGE SICHER Occupation (for Individual) DENTIST
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 07 / 2016
Transaction ID : SA11A.480779
 Amount of Each Receipt this Period
 50.00
 Memo Item
 CONTRIBUTION

B. SIDES, DENNIE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2105 SANS SOUCI RD
 City SUMTER State SC Zip Code 29154-8735
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 24 / 2016
Transaction ID : SA11A.449460
 Amount of Each Receipt this Period
 25.00
 Memo Item
 CONTRIBUTION

C. SIDES, DENNIE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2105 SANS SOUCI RD
 City SUMTER State SC Zip Code 29154-8735
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 24 / 2016
Transaction ID : SA11A.449461
 Amount of Each Receipt this Period
 25.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	100.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3392 OF 4311
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. SIDES, DENNIE, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 2105 SANS SOUCI RD

City SUMTER	State SC	Zip Code 29154-8735
----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
300.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	25	/	2016

Transaction ID : SA11A.452167

Amount of Each Receipt this Period
50.00

Memo Item CONTRIBUTION

B. SIDES, DENNIE, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 2105 SANS SOUCI RD

City SUMTER	State SC	Zip Code 29154-8735
----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
300.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	27	/	2016

Transaction ID : SA11A.453916

Amount of Each Receipt this Period
25.00

Memo Item CONTRIBUTION

C. SIDES, DENNIE, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 2105 SANS SOUCI RD

City SUMTER	State SC	Zip Code 29154-8735
----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
300.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	26	/	2016

Transaction ID : SA11A.454604

Amount of Each Receipt this Period
50.00

Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	125.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3393 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
Team Ryan

A. SIDES, DENNIE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2105 SANS SOUCI RD
 City SUMTER State SC Zip Code 29154-8735
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt
 11 / 04 / 2016
Transaction ID : SA11A.471469
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

B. SIDES, DENNIE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2105 SANS SOUCI RD
 City SUMTER State SC Zip Code 29154-8735
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt
 11 / 04 / 2016
Transaction ID : SA11A.474075
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

C. SIDES, DENNIE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2105 SANS SOUCI RD
 City SUMTER State SC Zip Code 29154-8735
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt
 11 / 07 / 2016
Transaction ID : SA11A.474943
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	100.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3394 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
Team Ryan

A. SIE, THOMAS, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 9 TOPEKA AVE
 City SAN FRANCISCO State CA Zip Code 94124-2016
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 04 / 2016
Transaction ID : SA11A.471587
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION

B. SIEBER, GRAFTON, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 411 N NEW RIVER DR E, 706
 City FORT LAUDERDALE State FL Zip Code 33301-3179
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 26 / 2016
Transaction ID : SA11A.450676
 Amount of Each Receipt this Period
 50.00
 Memo Item
 CONTRIBUTION

C. SIEBER, GRAFTON, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 411 N NEW RIVER DR E, 706
 City FORT LAUDERDALE State FL Zip Code 33301-3179
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 05 / 2016
Transaction ID : SA11A.478761
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	250.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3395 OF 4311
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. SIEBERT, JEAN, F., ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 2724 SANDFIDDLER ROAD

City VIRGINIA BEACH	State VA	Zip Code 23456-4511
------------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) SIEBERT REALTY	Occupation (for Individual) REAL ESTATE
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
450.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	29	/	2016

Transaction ID : SA11A.461103

Amount of Each Receipt this Period
100.00

Memo Item
CONTRIBUTION

B. SIEBECKER, WILLIAM, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 7947 MATERA COURT

City BRADENTON	State FL	Zip Code 34202-2157
-------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) WILSON-HURD MFG CO	Occupation (for Individual) MANAGER
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	02	/	2016

Transaction ID : SA11A.465120

Amount of Each Receipt this Period
500.00

Memo Item
CONTRIBUTION

C. SIENKIEWICZ, STANLEY, , MR.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 5540 30TH ST NW

City WASHINGTON	State DC	Zip Code 20015-1250
--------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) US AGENCY FOR INTERNATIONAL DEVELOPMEN	Occupation (for Individual) FEDERAL GOVERNMENT
---	---

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	24	/	2016

Transaction ID : SA11A.449369

Amount of Each Receipt this Period
100.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	700.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3396 OF 4311
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. SIEVERS, JAMES, L., MR.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 12 HORSESHOE TRAIL
78132

City NEW BRAUNFELS State TX Zip Code 78132-3726

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 202.00

Date of Receipt 10 / 20 / 2016
Transaction ID : SA11A.444753

Amount of Each Receipt this Period 25.00

Memo Item CONTRIBUTION

B. SIEVERS, STEPHEN, G., DR.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 9519 HARDING BLVD

City WAUWATOSA State WI Zip Code 53226-1734

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) MILWAUKEE NEPHROLOGISTS Occupation (for Individual) PHYSICIAN

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt 10 / 30 / 2016
Transaction ID : SA11A.459412

Amount of Each Receipt this Period 100.00

Memo Item CONTRIBUTION

C. SIGAL, SANFORD, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 5850 CANOGA AVE STE 650

City WOODLAND HILLS State CA Zip Code 91367-6573

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NEWMARK MERRILL Occupation (for Individual) CEO

Receipt For: Primary General Other (specify)

Aggregate Year-to-Date ▼ 35000.00

Date of Receipt 11 / 01 / 2016
Transaction ID : SA11A.461886

Amount of Each Receipt this Period 10000.00

Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶ 10125.00

TOTAL This Period (last page this line number only).....▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3397 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name A. SIGMON, RICHARD, , ,			Date of Receipt M M M / D D D / Y Y Y Y Y Y 10 / 22 / 2016 Transaction ID : SA11A.449646
Mailing Address 2329 LABURNUM AVENUE			Amount of Each Receipt this Period 100.00
City CHARLOTTE	State NC	Zip Code 28205-6045	<input type="checkbox"/> Memo Item CONTRIBUTION
FEC ID number of contributing federal political committee. C			
Name of Employer (for Individual) CHARLOTTE MEDICAL CLINIC	Occupation (for Individual) PHYSICIAN		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 725.00		

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name B. SIGMON, RICHARD, , ,			Date of Receipt M M M / D D D / Y Y Y Y Y Y 10 / 25 / 2016 Transaction ID : SA11A.451933
Mailing Address 2329 LABURNUM AVENUE			Amount of Each Receipt this Period 100.00
City CHARLOTTE	State NC	Zip Code 28205-6045	<input type="checkbox"/> Memo Item CONTRIBUTION
FEC ID number of contributing federal political committee. C			
Name of Employer (for Individual) CHARLOTTE MEDICAL CLINIC	Occupation (for Individual) PHYSICIAN		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 725.00		

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name C. SIGMON, RICHARD, , ,			Date of Receipt M M M / D D D / Y Y Y Y Y Y 10 / 31 / 2016 Transaction ID : SA11A.464665
Mailing Address 2329 LABURNUM AVENUE			Amount of Each Receipt this Period 100.00
City CHARLOTTE	State NC	Zip Code 28205-6045	<input type="checkbox"/> Memo Item CONTRIBUTION
FEC ID number of contributing federal political committee. C			
Name of Employer (for Individual) CHARLOTTE MEDICAL CLINIC	Occupation (for Individual) PHYSICIAN		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Aggregate Year-to-Date ▼ 725.00		

SUBTOTAL of Receipts This Page (optional).....▶	300.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3398 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
Team Ryan

A. SIGMON, RICHARD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2329 LABURNUM AVENUE
 City CHARLOTTE State NC Zip Code 28205-6045
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) CHARLOTTE MEDICAL CLINIC Occupation (for Individual) PHYSICIAN
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 725.00

Date of Receipt
 11 / 05 / 2016
Transaction ID : SA11A.479028
 Amount of Each Receipt this Period
 100.00
 Memo Item CONTRIBUTION

B. SIGMON, RICHARD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2329 LABURNUM AVENUE
 City CHARLOTTE State NC Zip Code 28205-6045
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) CHARLOTTE MEDICAL CLINIC Occupation (for Individual) PHYSICIAN
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 725.00

Date of Receipt
 11 / 07 / 2016
Transaction ID : SA11A.480236
 Amount of Each Receipt this Period
 100.00
 Memo Item CONTRIBUTION

C. SILOWKA, LINDA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3727 CREST VIEW DRIVE
 City ALLENTOWN State PA Zip Code 18103-6143
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 285.00

Date of Receipt
 10 / 27 / 2016
Transaction ID : SA11A.456469
 Amount of Each Receipt this Period
 20.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	220.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3399 OF 4311
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. SILOWKA, LINDA, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 3727 CREST VIEW DRIVE

City ALLENTOWN	State PA	Zip Code 18103-6143
-------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
285.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		27		2016

Transaction ID : SA11A.456482

Amount of Each Receipt this Period
25.00

Memo Item CONTRIBUTION

B. SILVA, ALVARO, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 700 SUNSET DRIVE

City CORAL GABLES	State FL	Zip Code 33143-6239
----------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		25		2016

Transaction ID : SA11A.448001

Amount of Each Receipt this Period
250.00

Memo Item CONTRIBUTION

C. SILVA, ALVARO, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 700 SUNSET DRIVE

City CORAL GABLES	State FL	Zip Code 33143-6239
----------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
1250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11		02		2016

Transaction ID : SA11A.465141

Amount of Each Receipt this Period
500.00

Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	775.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3400 OF 4311
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. SILVEIRA, DARALENE, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 2171 PEBBLE BEACH CT

City MERCED	State CA	Zip Code 95340-0721
----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
229.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	21	/	2016

Transaction ID : SA11A.447080

Amount of Each Receipt this Period
25.00

Memo Item CONTRIBUTION

B. SILVERSTEIN, SUZANNE, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 140 W 58TH ST
APT. 2A

City NEW YORK	State NY	Zip Code 10019-2107
------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) KELLWOOD	Occupation (for Individual) FASHION
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
450.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	07	/	2016

Transaction ID : SA11A.475426

Amount of Each Receipt this Period
50.00

Memo Item CONTRIBUTION

C. SIMEK, LAUREN, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 3100 N. BROOK HILLS DRIVE

City GREEN BAY	State WI	Zip Code 54313-8280
-------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
300.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	04	/	2016

Transaction ID : SA11A.472432

Amount of Each Receipt this Period
100.00

Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	175.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3401 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
Team Ryan

A. SIMEK, LESLIE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2011 INDEPENDENCE DRIVE
 City NEW WINDSOR State NY Zip Code 12553-4910
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) WILLCARE Occupation (for Individual) REGISTERED NURSE
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 201.00

Date of Receipt 10 / 26 / 2016
Transaction ID : SA11A.451294
 Amount of Each Receipt this Period 10.00
 Memo Item CONTRIBUTION

B. SIMEK, LESLIE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2011 INDEPENDENCE DRIVE
 City NEW WINDSOR State NY Zip Code 12553-4910
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) WILLCARE Occupation (for Individual) REGISTERED NURSE
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 201.00

Date of Receipt 10 / 26 / 2016
Transaction ID : SA11A.451295
 Amount of Each Receipt this Period 18.00
 Memo Item CONTRIBUTION

C. SIMEK, LESLIE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2011 INDEPENDENCE DRIVE
 City NEW WINDSOR State NY Zip Code 12553-4910
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) WILLCARE Occupation (for Individual) REGISTERED NURSE
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 201.00

Date of Receipt 10 / 26 / 2016
Transaction ID : SA11A.451296
 Amount of Each Receipt this Period 18.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	46.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3402 OF 4311
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. SIMEK, LESLIE, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 2011 INDEPENDENCE DRIVE

City NEW WINDSOR	State NY	Zip Code 12553-4910
---------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) WILLCARE	Occupation (for Individual) REGISTERED NURSE
---	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
201.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		26		2016

Transaction ID : SA11A.451298

Amount of Each Receipt this Period
30.00

Memo Item CONTRIBUTION

B. SIMEK, LESLIE, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 2011 INDEPENDENCE DRIVE

City NEW WINDSOR	State NY	Zip Code 12553-4910
---------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) WILLCARE	Occupation (for Individual) REGISTERED NURSE
---	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
201.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		28		2016

Transaction ID : SA11A.455882

Amount of Each Receipt this Period
25.00

Memo Item CONTRIBUTION

C. SIMKINS, LEROY, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 103 MACARTAN ST.

City AUGUSTA	State GA	Zip Code 30901-1204
-----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) SIMKINS LAND CO.	Occupation (for Individual) BROKER
---	---------------------------------------

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
600.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		31		2016

Transaction ID : SA11A.459118

Amount of Each Receipt this Period
100.00

Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	155.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3403 OF 4311
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. SIMKINS, LEROY, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 103 MACARTAN ST.

City AUGUSTA	State GA	Zip Code 30901-1204
-----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) SIMKINS LAND CO.	Occupation (for Individual) BROKER
---	---------------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
600.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	04	/	2016

Transaction ID : SA11A.472203

Amount of Each Receipt this Period
100.00

Memo Item
CONTRIBUTION

B. SIMMELINK, DENNIS, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 98413 LILLIANN DR

City KENNEWICK	State WA	Zip Code 99338-7476
-------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
697.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	25	/	2016

Transaction ID : SA11A.448398

Amount of Each Receipt this Period
150.00

Memo Item
CONTRIBUTION

C. SIMMONS, ANNETTE, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 5915 DELOACHE

City DALLAS	State TX	Zip Code 75225-3006
----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) HAROLD SIMMONS FOUNDATIONS	Occupation (for Individual) CO-FOUNDER
---	---

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
105400.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	24	/	2016

Transaction ID : SA11A.443491

Amount of Each Receipt this Period
5400.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	5650.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3404 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
Team Ryan

A. SIMMONS, CARL, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 15 CHARLES ROAD
 City BERNARDSVILLE State NJ Zip Code 07924-1922
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) GNS,LLC Occupation (for Individual) CEO
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 683.00

Date of Receipt 10 / 25 / 2016
Transaction ID : SA11A.451542
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

B. SIMMONS, JIM, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 195 SUNSET COVE LANE
 City MOORESVILLE State NC Zip Code 28117-0500
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 350.00

Date of Receipt 11 / 07 / 2016
Transaction ID : SA11A.476307
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

C. SIMMONS, JIM, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 195 SUNSET COVE LANE
 City MOORESVILLE State NC Zip Code 28117-0500
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 350.00

Date of Receipt 11 / 07 / 2016
Transaction ID : SA11A.476310
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 200.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3405 OF 4311
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. SIMMONS, JUDY, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 23230 BONAIR ST

City DEARBORN HEIGHTS	State MI	Zip Code 48127-2308
--------------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) FORD MOTOR CO	Occupation (for Individual) ENGINEER
--	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
525.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		20		2016

Transaction ID : SA11A.442543

Amount of Each Receipt this Period
25.00

Memo Item
CONTRIBUTION

B. SIMMONS, JUDY, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 23230 BONAIR ST

City DEARBORN HEIGHTS	State MI	Zip Code 48127-2308
--------------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) FORD MOTOR CO	Occupation (for Individual) ENGINEER
--	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
525.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		21		2016

Transaction ID : SA11A.444365

Amount of Each Receipt this Period
50.00

Memo Item
CONTRIBUTION

C. SIMMONS, JUDY, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 23230 BONAIR ST

City DEARBORN HEIGHTS	State MI	Zip Code 48127-2308
--------------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) FORD MOTOR CO	Occupation (for Individual) ENGINEER
--	---

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
525.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		26		2016

Transaction ID : SA11A.450191

Amount of Each Receipt this Period
25.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	100.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3406 OF 4311
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. SIMMONS, JUDY, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 23230 BONAIR ST

City DEARBORN HEIGHTS	State MI	Zip Code 48127-2308
--------------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) FORD MOTOR CO	Occupation (for Individual) ENGINEER
--	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
525.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	26	/	2016

Transaction ID : SA11A.450193

Amount of Each Receipt this Period
25.00

Memo Item
CONTRIBUTION

B. SIMMONS, JUDY, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 23230 BONAIR ST

City DEARBORN HEIGHTS	State MI	Zip Code 48127-2308
--------------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) FORD MOTOR CO	Occupation (for Individual) ENGINEER
--	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
525.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	02	/	2016

Transaction ID : SA11A.466941

Amount of Each Receipt this Period
25.00

Memo Item
CONTRIBUTION

C. SIMMONS, JUDY, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 23230 BONAIR ST

City DEARBORN HEIGHTS	State MI	Zip Code 48127-2308
--------------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) FORD MOTOR CO	Occupation (for Individual) ENGINEER
--	---

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
525.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	02	/	2016

Transaction ID : SA11A.467100

Amount of Each Receipt this Period
25.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	75.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3407 OF 4311
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. SIMMONS, JUDY, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 23230 BONAIR ST

City DEARBORN HEIGHTS	State MI	Zip Code 48127-2308
--------------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) FORD MOTOR CO	Occupation (for Individual) ENGINEER
--	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
525.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
11	/	02	/	2016

Transaction ID : SA11A.467101

Amount of Each Receipt this Period
25.00

Memo Item
CONTRIBUTION

B. SIMMONS, LEE, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 90427 TIMBER RIDGE ROAD

City VALENTINE	State NE	Zip Code 69201-1631
-------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) SELF EMPLOYED	Occupation (for Individual) NIOBRARA RIVER RANCH
--	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
10	/	28	/	2016

Transaction ID : SA11A.461460

Amount of Each Receipt this Period
250.00

Memo Item
CONTRIBUTION

C. SIMMONS, MILTON, E., MR.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 10959 DOVETAIL DRIVE

City SHREVEPORT	State LA	Zip Code 71129-8757
--------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) RETIRED	Occupation (for Individual) RETIRED
--	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
1000.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
10	/	27	/	2016

Transaction ID : SA11A.452336

Amount of Each Receipt this Period
1000.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	1275.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3408 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
-----------------------------	-----------------------------	-----------------------------

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NAME OF COMMITTEE (In Full)
Team Ryan

A. SIMONIAN, ED, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address **PO BOX 775**
 City **SANTA MONICA** State **CA** Zip Code **90406-0775**
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) **NONE** Occupation (for Individual) **RETIRED**
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼ **300.00**

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	23	/	2016

Transaction ID : SA11A.446288
 Amount of Each Receipt this Period

50.00

 Memo Item
CONTRIBUTION

B. SIMONIAN, ED, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address **PO BOX 775**
 City **SANTA MONICA** State **CA** Zip Code **90406-0775**
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) **NONE** Occupation (for Individual) **RETIRED**
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼ **300.00**

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	24	/	2016

Transaction ID : SA11A.449551
 Amount of Each Receipt this Period

100.00

 Memo Item
CONTRIBUTION

C. SIMONIAN, ED, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address **PO BOX 775**
 City **SANTA MONICA** State **CA** Zip Code **90406-0775**
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) **NONE** Occupation (for Individual) **RETIRED**
 Receipt For:
 Primary General
 Other (specify)
 Aggregate Year-to-Date ▼ **300.00**

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	24	/	2016

Transaction ID : SA11A.449555
 Amount of Each Receipt this Period

100.00

 Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	250.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3409 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. SIMONSON, GERALD, , MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5813 JEFF PLACE
 City EDINA State MN Zip Code 55436-1937
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) DENY Occupation (for Individual) DENY
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 10 / 31 / 2016
Transaction ID : SA11A.458520
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

B. SIMON, HARRY, M., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 750 GLENRIDGE ROAD
 City SPARTANBURG State SC Zip Code 29301-5306
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 750.00

Date of Receipt 10 / 25 / 2016
Transaction ID : SA11A.447408
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

C. SIMONS, HELEN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 291 COVERED WAGON WAY
 City DRIFTWOOD State TX Zip Code 78619-4337
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 375.00

Date of Receipt 11 / 02 / 2016
Transaction ID : SA11A.466717
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	400.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3410 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. SIMONS, HELEN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 291 COVERED WAGON WAY
 City DRIFTWOOD State TX Zip Code 78619-4337
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 375.00

Date of Receipt
 11 / 02 / 2016
Transaction ID : SA11A.466718
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

B. SIMONS, HELEN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 291 COVERED WAGON WAY
 City DRIFTWOOD State TX Zip Code 78619-4337
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 375.00

Date of Receipt
 11 / 02 / 2016
Transaction ID : SA11A.466730
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

C. SIMONS, HELEN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 291 COVERED WAGON WAY
 City DRIFTWOOD State TX Zip Code 78619-4337
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 375.00

Date of Receipt
 11 / 02 / 2016
Transaction ID : SA11A.466733
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 150.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3411 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. SIMONS, HELEN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 291 COVERED WAGON WAY
 City DRIFTWOOD State TX Zip Code 78619-4337
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 375.00

Date of Receipt 11 / 07 / 2016
Transaction ID : SA11A.476145
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

B. SIMONS, HELEN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 291 COVERED WAGON WAY
 City DRIFTWOOD State TX Zip Code 78619-4337
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 375.00

Date of Receipt 11 / 06 / 2016
Transaction ID : SA11A.477461
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

C. SIMONS, STEPHEN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2556 NORTHPLACE DR
 City TUPELO State MS Zip Code 38804-5051
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) VIP CINEMA SEATING Occupation (for Individual) MANUFACTURING
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 10 / 30 / 2016
Transaction ID : SA11A.460021
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 325.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3412 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. SIMONSEN, SVEN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 69 FLOOD CIRCLE
 City ATHERTON State CA Zip Code 94027-2108
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 600.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 01 / 2016
Transaction ID : SA11A.462555
 Amount of Each Receipt this Period
 250.00
 Memo Item
 CONTRIBUTION

B. SIMPKINS, B, W., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 400 HIGH POINT DRIVE SUITE 500
 City COCOA State FL Zip Code 32926-6661
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) REAL ESTATE
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 25 / 2016
Transaction ID : SA11A.447300
 Amount of Each Receipt this Period
 500.00
 Memo Item
 CONTRIBUTION

C. SIMPSON, H, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1015 E. HWY #40 BYPASS
 City HAYS State KS Zip Code 67601-
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) BEST RADIATOR Occupation (for Individual) OWNER
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 02 / 2016
Transaction ID : SA11A.465720
 Amount of Each Receipt this Period
 250.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	1000.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3413 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
Team Ryan

A. SIMPSON, H, B., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 10875176TH CIRCLE NE
 APT 2803
 City REDMOND State WA Zip Code 98052-
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 25 / 2016
Transaction ID : SA11A.447352
 Amount of Each Receipt this Period
 200.00
 Memo Item
 CONTRIBUTION

B. SIMPSON, MURRAY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5606 MELALEUCA DRIVE
 City TAMARAC State FL Zip Code 33319-6124
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 24 / 2016
Transaction ID : SA11A.443846
 Amount of Each Receipt this Period
 200.00
 Memo Item
 CONTRIBUTION

C. SIMS, PAUL, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 419 QUAIL HOLLOW ROAD
 City AUBURNDALE State FL Zip Code 33823-9313
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 410.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 04 / 2016
Transaction ID : SA11A.479660
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	500.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3414 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
-----------------------------	-----------------------------	-----------------------------

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NAME OF COMMITTEE (In Full)
Team Ryan

A. SINERVO, KEN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3845 REDCOAT WAY
 City ALPHARETTA State GA Zip Code 30022-6338
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) KEN R SINERVO, MD, LLC Occupation (for Individual) PHYSICIAN
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 25 / 2016
Transaction ID : SA11A.452097
 Amount of Each Receipt this Period
 250.00
 Memo Item
 CONTRIBUTION

B. SINGER, BARBARA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 7 ABBOTSFORD COURT
 City DALLAS State TX Zip Code 75225-1803
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 07 / 2016
Transaction ID : SA11A.475730
 Amount of Each Receipt this Period
 50.00
 Memo Item
 CONTRIBUTION

C. SINGER, BARBARA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 7 ABBOTSFORD COURT
 City DALLAS State TX Zip Code 75225-1803
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 07 / 2016
Transaction ID : SA11A.475766
 Amount of Each Receipt this Period
 50.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	350.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3415 OF 4311
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. SINGLETON, REBECCA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2280 MILK SPRINGS ROAD
 City TUSCUMBIA State AL Zip Code 35674-3893
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 10 / 28 / 2016
Transaction ID : SA11A.456347
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

B. SINKEVICH, JAN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4747 HADLEY
 City OVERLAND PARK State KS Zip Code 66203-1326
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) PLATTE COUNTY BOARD OF SERVICES Occupation (for Individual) TEACHING COUNSELOR
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 225.00

Date of Receipt 10 / 29 / 2016
Transaction ID : SA11A.460619
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

C. SINNOTT, J, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 10100 N ALDER SPRINGS DR
 City ORO VALLEY State AZ Zip Code 85737-9494
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 5000.00

Date of Receipt 10 / 21 / 2016
Transaction ID : SA11A.444567
 Amount of Each Receipt this Period 500.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 775.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3416 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. SINNOTT, J, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 10100 N ALDER SPRINGS DR
 City ORO VALLEY State AZ Zip Code 85737-9494
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 5000.00

Date of Receipt 11 / 04 / 2016
Transaction ID : SA11A.472637
 Amount of Each Receipt this Period 500.00
 Memo Item CONTRIBUTION

B. SKAGGS, JAMES, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4700 TOREADOR DR. BLDG C-100
 City AUSTIN State TX Zip Code 78746-2411
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1600.00

Date of Receipt 10 / 20 / 2016
Transaction ID : SA11A.442157
 Amount of Each Receipt this Period 1000.00
 Memo Item CONTRIBUTION

C. SKAGGS, JOHN, R., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address P O BOX 2905
 City AMARILLO State TX Zip Code 79105-2905
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 985.00

Date of Receipt 10 / 26 / 2016
Transaction ID : SA11A.450728
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	1600.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3417 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. SKAGGS, JOHN, R., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address P O BOX 2905
 City AMARILLO State TX Zip Code 79105-2905
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 985.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 26 / 2016
Transaction ID : SA11A.450756
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION

B. SKAGGS, JOHN, R., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address P O BOX 2905
 City AMARILLO State TX Zip Code 79105-2905
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 985.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 02 / 2016
Transaction ID : SA11A.466632
 Amount of Each Receipt this Period
 50.00
 Memo Item
 CONTRIBUTION

C. SKAGGS, JOHN, R., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address P O BOX 2905
 City AMARILLO State TX Zip Code 79105-2905
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 985.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 02 / 2016
Transaction ID : SA11A.466633
 Amount of Each Receipt this Period
 50.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	200.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3418 OF 4311
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. SKANSE, CAROL, A., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5200 FRANCE AVENUE S UNIT 18
 UNIT 18
 City MINNEAPOLIS State MN Zip Code 55410-2065
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) HOMEMAKER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1100.00

Date of Receipt 10 / 27 / 2016
Transaction ID : SA11A.452442
 Amount of Each Receipt this Period 500.00
 Memo Item CONTRIBUTION

B. SKELTON, RONALD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1839 ALTA VISTA AVE
 City WAUWATOSA State WI Zip Code 53213-2321
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 225.00

Date of Receipt 10 / 28 / 2016
Transaction ID : SA11A.455356
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

C. SKEWES, ANNE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 14409 ISLEVIEW DR
 City WINTER GARDEN State FL Zip Code 34787-6203
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 10 / 21 / 2016
Transaction ID : SA11A.444126
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 575.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3419 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. SKEWES, ANNE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 14409 ISLEVIEW DR
 City WINTER GARDEN State FL Zip Code 34787-6203
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 21 / 2016
Transaction ID : SA11A.444127
 Amount of Each Receipt this Period
 25.00
 Memo Item
 CONTRIBUTION

B. SKILTON, HARRY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 109 DAHLIA COURT
 City PONTE VEDRA State FL Zip Code 32082-3901
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 07 / 2016
Transaction ID : SA11A.467841
 Amount of Each Receipt this Period
 250.00
 Memo Item
 CONTRIBUTION

C. SKOOG, PAUL, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 8825 34TH AVE NE L-150
 City TULALIP State WA Zip Code 98271-8085
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 26 / 2016
Transaction ID : SA11A.451075
 Amount of Each Receipt this Period
 25.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	300.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3420 OF 4311
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. SKOOG, PAUL, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 8825 34TH AVE NE L-150
 City TULALIP State WA Zip Code 98271-8085
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 11 / 04 / 2016
Transaction ID : SA11A.472645
 Amount of Each Receipt this Period
 25.00
 Memo Item
 CONTRIBUTION

B. SKOOG, PAUL, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 8825 34TH AVE NE L-150
 City TULALIP State WA Zip Code 98271-8085
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 11 / 06 / 2016
Transaction ID : SA11A.478173
 Amount of Each Receipt this Period
 25.00
 Memo Item
 CONTRIBUTION

C. SLATER, CLIFFORD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3105 PACIFIC HEIGHTS ROAD
 City HONOLULU State HI Zip Code 96813-1011
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 10 / 28 / 2016
Transaction ID : SA11A.456010
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	150.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3421 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. SLATER, CLIFFORD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3105 PACIFIC HEIGHTS ROAD
 City HONOLULU State HI Zip Code 96813-1011
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 11 / 04 / 2016
Transaction ID : SA11A.472952
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

B. SLATTERY, NEIL, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1120 MIRIKE DR.
 City FORT WORTH State TX Zip Code 76108-3068
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 265.00

Date of Receipt 10 / 26 / 2016
Transaction ID : SA11A.450645
 Amount of Each Receipt this Period 30.00
 Memo Item CONTRIBUTION

C. SLATTERY, NEIL, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1120 MIRIKE DR.
 City FORT WORTH State TX Zip Code 76108-3068
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 265.00

Date of Receipt 10 / 29 / 2016
Transaction ID : SA11A.461042
 Amount of Each Receipt this Period 27.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	157.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3422 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. SLATTERY, NEIL, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 1120 MIRIKE DR.
City FORT WORTH State TX Zip Code 76108-3068
FEC ID number of contributing federal political committee. **C**
Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 265.00

Date of Receipt 11 / 04 / 2016
Transaction ID : SA11A.472003
Amount of Each Receipt this Period 27.00
 Memo Item CONTRIBUTION

B. SLEY, RONALD, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 8734 CYPRESS CLUB DR
City RALEIGH State NC Zip Code 27615-2121
FEC ID number of contributing federal political committee. **C**
Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 525.00

Date of Receipt 10 / 27 / 2016
Transaction ID : SA11A.453971
Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

C. SLEY, RONALD, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 8734 CYPRESS CLUB DR
City RALEIGH State NC Zip Code 27615-2121
FEC ID number of contributing federal political committee. **C**
Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
Receipt For: Primary General Other (specify)
Aggregate Year-to-Date ▼ 525.00

Date of Receipt 11 / 03 / 2016
Transaction ID : SA11A.469086
Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶ 177.00
TOTAL This Period (last page this line number only).....▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3423 OF 4311
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. SLIKKER, HARRY, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 6420 E TROPICANA AVE UNIT 37

City LAS VEGAS	State NV	Zip Code 89122-7512
-------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
450.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	04	/	2016

Transaction ID : SA11A.473920

Amount of Each Receipt this Period
150.00

Memo Item CONTRIBUTION

B. SLOAN, DANIEL, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 428 SCOTLAND LANDING RD.

City WEST POINT	State VA	Zip Code 23181-3919
--------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	20	/	2016

Transaction ID : SA11A.442394

Amount of Each Receipt this Period
50.00

Memo Item CONTRIBUTION

C. SLOAN, DANIEL, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 428 SCOTLAND LANDING RD.

City WEST POINT	State VA	Zip Code 23181-3919
--------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	04	/	2016

Transaction ID : SA11A.471603

Amount of Each Receipt this Period
50.00

Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	250.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3424 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
Team Ryan

A. SLOAN, MARTHA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1220 E LAKESHORE DR
 City HOUGHTON State MI Zip Code 49931-1300
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1100.00

Date of Receipt **10 / 22 / 2016**
Transaction ID : SA11A.449658
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

B. SLOAN, MARTHA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1220 E LAKESHORE DR
 City HOUGHTON State MI Zip Code 49931-1300
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1100.00

Date of Receipt **10 / 31 / 2016**
Transaction ID : SA11A.457463
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

C. SLOAN, MARTHA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1220 E LAKESHORE DR
 City HOUGHTON State MI Zip Code 49931-1300
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1100.00

Date of Receipt **10 / 31 / 2016**
Transaction ID : SA11A.457464
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	300.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3425 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
Team Ryan

A. SLOAN, MARTHA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1220 E LAKESHORE DR
 City HOUGHTON State MI Zip Code 49931-1300
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1100.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 02 / 2016
Transaction ID : SA11A.467063
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION

B. SLOAN, MARTHA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1220 E LAKESHORE DR
 City HOUGHTON State MI Zip Code 49931-1300
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1100.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 02 / 2016
Transaction ID : SA11A.467066
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION

C. SLOTH, SELMA, K., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1425 10TH AVE. S. 460
 City MINNEAPOLIS State MN Zip Code 55404-1309
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 536.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 21 / 2016
Transaction ID : SA11A.447097
 Amount of Each Receipt this Period
 25.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	225.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3426 OF 4311
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. SLOTH, SELMA, K., ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1425 10TH AVE. S.
460

City MINNEAPOLIS State MN Zip Code 55404-1309

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 536.00

Date of Receipt 10 / 21 / 2016
Transaction ID : SA11A.447099

Amount of Each Receipt this Period 25.00

Memo Item CONTRIBUTION

B. SLOTH, SELMA, K., ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1425 10TH AVE. S.
460

City MINNEAPOLIS State MN Zip Code 55404-1309

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 536.00

Date of Receipt 11 / 01 / 2016
Transaction ID : SA11A.463049

Amount of Each Receipt this Period 25.00

Memo Item CONTRIBUTION

C. SLUZEWSKI, JOYCE, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 820 NAPOLI LN

City PUNTA GORDA State FL Zip Code 33950-6526

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED

Receipt For: Primary General Other (specify)

Aggregate Year-to-Date ▼ 300.00

Date of Receipt 10 / 30 / 2016
Transaction ID : SA11A.460174

Amount of Each Receipt this Period 100.00

Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶ 150.00

TOTAL This Period (last page this line number only).....▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3427 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
Team Ryan

A. SMALLEY, GLEN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 710 ARTHUR WOLFE RD
 City DUBLIN State GA Zip Code 31021-0922
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) PHYSICIAN
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 02 / 2016
Transaction ID : SA11A.469654
 Amount of Each Receipt this Period
 250.00
 Memo Item
 CONTRIBUTION

B. SMART, BARBARA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2310 25TH ST
 City ANACORTES State WA Zip Code 98221-2483
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 31 / 2016
Transaction ID : SA11A.458411
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION

C. SMELTZER, KAREN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1215 ROOT LANE
 City PASO ROBLES State CA Zip Code 93446-2081
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 345.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 24 / 2016
Transaction ID : SA11A.445607
 Amount of Each Receipt this Period
 25.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	375.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3428 OF 4311
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Team Ryan

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
A. SMELTZER, KAREN, , ,

Mailing Address 1215 ROOT LANE

City PASO ROBLES	State CA	Zip Code 93446-2081
---------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
345.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		25		2016

Transaction ID : SA11A.452084

Amount of Each Receipt this Period
25.00

Memo Item CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
B. SMELTZER, KAREN, , ,

Mailing Address 1215 ROOT LANE

City PASO ROBLES	State CA	Zip Code 93446-2081
---------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
345.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		31		2016

Transaction ID : SA11A.458793

Amount of Each Receipt this Period
25.00

Memo Item CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
C. SMILOW, JOEL, E., MR.,

Mailing Address 830 POST ROAD EAST SUITE 105

City WESTPORT	State CT	Zip Code 06880-5222
------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
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Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
1000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11		17		2016

Transaction ID : SA11A.468420

Amount of Each Receipt this Period
1000.00

Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	1050.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3429 OF 4311
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. SMITH, ALLEN, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1951 250TH STREET

City MILFORD	State IA	Zip Code 51351-7062
-----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) SELF EMPLOYED	Occupation (for Individual) PROPERTY MANAGER
--	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
11		06		2016

Transaction ID : SA11A.477645

Amount of Each Receipt this Period
250.00

Memo Item
CONTRIBUTION

B. SMITH, BETTY, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 198 BRISTOL POINT

City LONGWOOD	State FL	Zip Code 32779-5632
------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
436.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
10		26		2016

Transaction ID : SA11A.450387

Amount of Each Receipt this Period
5.00

Memo Item
CONTRIBUTION

C. SMITH, BETTY, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 198 BRISTOL POINT

City LONGWOOD	State FL	Zip Code 32779-5632
------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
436.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
10		26		2016

Transaction ID : SA11A.450389

Amount of Each Receipt this Period
18.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	273.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3430 OF 4311
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. SMITH, BETTY, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 198 BRISTOL POINT

City LONGWOOD	State FL	Zip Code 32779-5632
------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
436.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		26		2016

Transaction ID : SA11A.450415

Amount of Each Receipt this Period
50.00

Memo Item CONTRIBUTION

B. SMITH, BETTY, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 198 BRISTOL POINT

City LONGWOOD	State FL	Zip Code 32779-5632
------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
436.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		26		2016

Transaction ID : SA11A.450425

Amount of Each Receipt this Period
30.00

Memo Item CONTRIBUTION

C. SMITH, BETTY, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 198 BRISTOL POINT

City LONGWOOD	State FL	Zip Code 32779-5632
------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
436.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		26		2016

Transaction ID : SA11A.450427

Amount of Each Receipt this Period
30.00

Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	110.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3431 OF 4311
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. SMITH, BETTY, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 198 BRISTOL POINT

City LONGWOOD	State FL	Zip Code 32779-5632
------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
436.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
11		07		2016

Transaction ID : SA11A.480449

Amount of Each Receipt this Period
20.00

Memo Item CONTRIBUTION

B. SMITH, BETTY, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 198 BRISTOL POINT

City LONGWOOD	State FL	Zip Code 32779-5632
------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
436.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
11		07		2016

Transaction ID : SA11A.480459

Amount of Each Receipt this Period
20.00

Memo Item CONTRIBUTION

C. SMITH, BOYD, C., ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 3260 ASH STREET

City PALO ALTO	State CA	Zip Code 94306-2239
-------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) WSJ PROPERTIES	Occupation (for Individual) REAL ESTATE INVESTOR
---	---

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
53000.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
10		26		2016

Transaction ID : SA11A.454430

Amount of Each Receipt this Period
1000.00

Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	1040.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3432 OF 4311
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. SMITH, BOYD, C., ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 3260 ASH STREET

City PALO ALTO	State CA	Zip Code 94306-2239
-------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) WSJ PROPERTIES	Occupation (for Individual) REAL ESTATE INVESTOR
---	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
53000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11		01		2016

Transaction ID : SA11A.467373

Amount of Each Receipt this Period
2000.00

Memo Item
CONTRIBUTION

B. SMITH, BRIAN, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 2074 WOODBERRY AVENUE

City SHREVEPORT	State LA	Zip Code 71106-8565
--------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) ARKLATEX ORAL SURGERY	Occupation (for Individual) ORAL SURGEON
--	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		23		2016

Transaction ID : SA11A.446422

Amount of Each Receipt this Period
500.00

Memo Item
CONTRIBUTION

C. SMITH, BRYAN, , MR.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 500 NW 2ND AVE

City FLAGLER MIAMI	State FL	Zip Code 33101-0105
-----------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) INFORMATION REQUESTED PER BEST EFFORTS	Occupation (for Individual) INFORMATION REQUESTED PER BES
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
1720.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11		23		2016

Transaction ID : SA11A.481126

Amount of Each Receipt this Period
1720.00

Memo Item
CONTRIBUTION
TO BE CHARGED BACK

SUBTOTAL of Receipts This Page (optional).....	4220.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3433 OF 4311
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. SMITH, CHARLES, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address P O BOX 478

City EAST BERLIN	State PA	Zip Code 17316-0478
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	07	/	2016

Transaction ID : SA11A.480273

Amount of Each Receipt this Period
100.00

Memo Item CONTRIBUTION

B. SMITH, CHARLES, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address P O BOX 478

City EAST BERLIN	State PA	Zip Code 17316-0478
---------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	07	/	2016

Transaction ID : SA11A.480275

Amount of Each Receipt this Period
100.00

Memo Item CONTRIBUTION

C. SMITH, CONNIE, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 162 N 1380 W

City HURRICANE	State UT	Zip Code 84737-2061
-------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
285.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	26	/	2016

Transaction ID : SA11A.450093

Amount of Each Receipt this Period
25.00

Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	225.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3434 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. SMITH, CONNIE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 162 N 1380 W
 City HURRICANE State UT Zip Code 84737-2061
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 285.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 04 / 2016
Transaction ID : SA11A.472206
 Amount of Each Receipt this Period
 30.00
 Memo Item
 CONTRIBUTION

B. SMITH, CONNIE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 162 N 1380 W
 City HURRICANE State UT Zip Code 84737-2061
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 285.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 06 / 2016
Transaction ID : SA11A.477779
 Amount of Each Receipt this Period
 25.00
 Memo Item
 CONTRIBUTION

C. SMITH, CONNIE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 162 N 1380 W
 City HURRICANE State UT Zip Code 84737-2061
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 285.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 06 / 2016
Transaction ID : SA11A.477780
 Amount of Each Receipt this Period
 25.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	80.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3435 OF 4311
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. SMITH, CONNIE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 162 N 1380 W
 City HURRICANE State UT Zip Code 84737-2061
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 285.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 05 / 2016
Transaction ID : SA11A.478922
 Amount of Each Receipt this Period
 25.00
 Memo Item
 CONTRIBUTION

B. SMITH, DANIEL, R., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 240 SEMINOLE LA
 City GREEN BAY State WI Zip Code 54313-4950
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 31 / 2016
Transaction ID : SA11A.459114
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION

C. SMITH, DANIEL, R., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 240 SEMINOLE LA
 City GREEN BAY State WI Zip Code 54313-4950
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 04 / 2016
Transaction ID : SA11A.471141
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 225.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3436 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
-----------------------------	-----------------------------	-----------------------------

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NAME OF COMMITTEE (In Full)
Team Ryan

A. SMITH, DICK, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4001 WEST 5TH STREET
 City FORT WORTH State TX Zip Code 76107-1617
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 11 / 04 / 2016
Transaction ID : SA11A.471891
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

B. SMITH, DON, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 165 MILLVIEW DRIVE
 City PITTSBURGH State PA Zip Code 15238-1625
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RIDC Occupation (for Individual) PRESIDENT
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 10 / 26 / 2016
Transaction ID : SA11A.450823
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

C. SMITH, DOUGLAS, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 25 KIMBERLY COURT
 City SEVERNA PARK State MD Zip Code 21146-3732
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) LAWYER PUBLISHER
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 480.00

Date of Receipt 10 / 24 / 2016
Transaction ID : SA11A.446008
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	225.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3437 OF 4311
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. SMITH, DOUGLAS, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 25 KIMBERLY COURT

City SEVERNA PARK	State MD	Zip Code 21146-3732
----------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) SELF EMPLOYED	Occupation (for Individual) LAWYER PUBLISHER
--	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
480.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		25		2016

Transaction ID : SA11A.448807

Amount of Each Receipt this Period
25.00

Memo Item
CONTRIBUTION

B. SMITH, DOUGLAS, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 2210 COPELAND STREET

City LUFKIN	State TX	Zip Code 75904-5340
----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		28		2016

Transaction ID : SA11A.454722

Amount of Each Receipt this Period
500.00

Memo Item
CONTRIBUTION

C. SMITH, DOUGLAS, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 25 KIMBERLY COURT

City SEVERNA PARK	State MD	Zip Code 21146-3732
----------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) SELF EMPLOYED	Occupation (for Individual) LAWYER PUBLISHER
--	---

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
480.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		31		2016

Transaction ID : SA11A.464752

Amount of Each Receipt this Period
30.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	555.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3438 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
Team Ryan

A. SMITH, DOUGLAS, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 25 KIMBERLY COURT
 City SEVERNA PARK State MD Zip Code 21146-3732
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) LAWYER PUBLISHER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 480.00

Date of Receipt
 11 / 07 / 2016
Transaction ID : SA11A.480422
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

B. SMITH, EDWARD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 6109 STONEHAVEN DRIVE
 City NASHVILLE State TN Zip Code 37215-5613
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 900.00

Date of Receipt
 10 / 27 / 2016
Transaction ID : SA11A.453824
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

C. SMITH, EDWARD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 6109 STONEHAVEN DRIVE
 City NASHVILLE State TN Zip Code 37215-5613
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 900.00

Date of Receipt
 11 / 04 / 2016
Transaction ID : SA11A.472621
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	225.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3439 OF 4311
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. SMITH, FRANKLIN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 115 VIRGINIA DRIVE
 City BREWTON State AL Zip Code 36426-1260
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 31 / 2016
Transaction ID : SA11A.458239
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION

B. SMITH, GERRITT, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 50 WHITE TAIL LN
 City LAFAYETTE State IN Zip Code 47905-8522
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) PHYSICIAN
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 31 / 2016
Transaction ID : SA11A.463301
 Amount of Each Receipt this Period
 500.00
 Memo Item
 CONTRIBUTION

C. SMITH, GRACE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 89 QUEEN ST
 City GORHAM State ME Zip Code 04038-2633
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 705.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 25 / 2016
Transaction ID : SA11A.448153
 Amount of Each Receipt this Period
 50.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	650.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3440 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
Team Ryan

A. SMITH, GRACE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 89 QUEEN ST
 City GORHAM State ME Zip Code 04038-2633
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 705.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 03 / 2016
Transaction ID : SA11A.474511
 Amount of Each Receipt this Period
 25.00
 Memo Item CONTRIBUTION

B. SMITH, HARRIS, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 15230 SW BULL MT RD
 City PORTLAND State OR Zip Code 97224-1225
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 545.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 31 / 2016
Transaction ID : SA11A.464615
 Amount of Each Receipt this Period
 25.00
 Memo Item CONTRIBUTION

C. SMITH, HOWARD, P., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1936 MILLER ROAD
 City WAITSBURG State WA Zip Code 99361-9657
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF Occupation (for Individual) WHEAT FARMER
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 25 / 2016
Transaction ID : SA11A.447487
 Amount of Each Receipt this Period
 200.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	250.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3441 OF 4311
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. SMITH, JARE, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 4316 SCALES ST

City AUSTIN	State TX	Zip Code 78723-5396
----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
650.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		30		2016

Transaction ID : SA11A.459706

Amount of Each Receipt this Period
250.00

Memo Item
CONTRIBUTION

B. SMITH, JOAN, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 7330 N. HIGHWAY 1 #105 #105

City COCOA	State FL	Zip Code 32927-5074
---------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
355.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		21		2016

Transaction ID : SA11A.444148

Amount of Each Receipt this Period
50.00

Memo Item
CONTRIBUTION

C. SMITH, JOAN, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 7330 N. HIGHWAY 1 #105 #105

City COCOA	State FL	Zip Code 32927-5074
---------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
355.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		23		2016

Transaction ID : SA11A.446310

Amount of Each Receipt this Period
50.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	350.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3442 OF 4311
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. SMITH, JOAN, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 7330 N. HIGHWAY 1 #105
#105

City COCOA State FL Zip Code 32927-5074

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
355.00

Date of Receipt
11 / 04 / 2016
Transaction ID : SA11A.474228

Amount of Each Receipt this Period
25.00

Memo Item CONTRIBUTION

B. SMITH, JOHN, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 21 RIVERVIEW DRIVE

City WEST TRENTON State NJ Zip Code 08628-2617

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
300.00

Date of Receipt
10 / 29 / 2016
Transaction ID : SA11A.461107

Amount of Each Receipt this Period
100.00

Memo Item CONTRIBUTION

C. SMITH, JOHN, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 21 RIVERVIEW DRIVE

City WEST TRENTON State NJ Zip Code 08628-2617

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
300.00

Date of Receipt
11 / 04 / 2016
Transaction ID : SA11A.471201

Amount of Each Receipt this Period
100.00

Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 225.00

TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3443 OF 4311
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. SMITH, JOHN, F., , III
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1 WISTAR ROAD

City VILLANOVA	State PA	Zip Code 19085-1512
-------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		21		2016

Transaction ID : SA11A.443552

Amount of Each Receipt this Period
250.00

Memo Item CONTRIBUTION

B. SMITH, JOHN, W., DR., M.D.
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 85 SOUTHAMPTON AVE

City BERKELEY	State CA	Zip Code 94707-2034
------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
270.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		26		2016

Transaction ID : SA11A.449754

Amount of Each Receipt this Period
100.00

Memo Item CONTRIBUTION

C. SMITH, LARRY, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 2405 CAMPBELL RD.

City CLEARWATER	State FL	Zip Code 33765-1506
--------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) SOUTHPORT CONSTRUCTION CORP	Occupation (for Individual) SOUTHPORT CONST
--	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		30		2016

Transaction ID : SA11A.459967

Amount of Each Receipt this Period
250.00

Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	600.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3444 OF 4311
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
Team Ryan

A. SMITH, MARSHALL, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 26535 WESTON DR

City LOS ALTOS HILLS	State CA	Zip Code 94022-1937
-------------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
725.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		20		2016

Transaction ID : SA11A.444888

Amount of Each Receipt this Period
25.00

Memo Item
CONTRIBUTION

B. SMITH, MARSHALL, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 26535 WESTON DR

City LOS ALTOS HILLS	State CA	Zip Code 94022-1937
-------------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
725.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		25		2016

Transaction ID : SA11A.448431

Amount of Each Receipt this Period
25.00

Memo Item
CONTRIBUTION

C. SMITH, MARSHALL, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 26535 WESTON DR

City LOS ALTOS HILLS	State CA	Zip Code 94022-1937
-------------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
725.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		31		2016

Transaction ID : SA11A.457848

Amount of Each Receipt this Period
50.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	100.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3445 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
-----------------------------	-----------------------------	-----------------------------

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NAME OF COMMITTEE (In Full)
Team Ryan

A. SMITH, MARSHALL, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 26535 WESTON DR
 City LOS ALTOS HILLS State CA Zip Code 94022-1937
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 725.00

Date of Receipt 10 / 31 / 2016
Transaction ID : SA11A.458728
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

B. SMITH, MARSHALL, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 26535 WESTON DR
 City LOS ALTOS HILLS State CA Zip Code 94022-1937
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 725.00

Date of Receipt 10 / 29 / 2016
Transaction ID : SA11A.460715
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

C. SMITH, MARSHALL, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 26535 WESTON DR
 City LOS ALTOS HILLS State CA Zip Code 94022-1937
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 725.00

Date of Receipt 10 / 29 / 2016
Transaction ID : SA11A.460887
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	75.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3446 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. SMITH, MARSHALL, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 26535 WESTON DR
 City LOS ALTOS HILLS State CA Zip Code 94022-1937
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 725.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 01 / 2016
Transaction ID : SA11A.462677
 Amount of Each Receipt this Period
 25.00
 Memo Item
 CONTRIBUTION

B. SMITH, MARSHALL, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 26535 WESTON DR
 City LOS ALTOS HILLS State CA Zip Code 94022-1937
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 725.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 02 / 2016
Transaction ID : SA11A.466241
 Amount of Each Receipt this Period
 30.00
 Memo Item
 CONTRIBUTION

C. SMITH, MARSHALL, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 26535 WESTON DR
 City LOS ALTOS HILLS State CA Zip Code 94022-1937
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 725.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 03 / 2016
Transaction ID : SA11A.468808
 Amount of Each Receipt this Period
 30.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	85.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3447 OF 4311
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. SMITH, MARSHALL, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 26535 WESTON DR

City LOS ALTOS HILLS	State CA	Zip Code 94022-1937
-------------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
725.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	02	/	2016

Transaction ID : SA11A.470098

Amount of Each Receipt this Period
25.00

Memo Item CONTRIBUTION

B. SMITH, MARSHALL, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 26535 WESTON DR

City LOS ALTOS HILLS	State CA	Zip Code 94022-1937
-------------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
725.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	04	/	2016

Transaction ID : SA11A.470331

Amount of Each Receipt this Period
50.00

Memo Item CONTRIBUTION

C. SMITH, MARSHALL, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 26535 WESTON DR

City LOS ALTOS HILLS	State CA	Zip Code 94022-1937
-------------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
725.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	04	/	2016

Transaction ID : SA11A.470634

Amount of Each Receipt this Period
25.00

Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	100.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3448 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. SMITH, MARSHALL, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 26535 WESTON DR
 City LOS ALTOS HILLS State CA Zip Code 94022-1937
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 725.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 11 / 07 / 2016
Transaction ID : SA11A.475117
 Amount of Each Receipt this Period
 30.00
 Memo Item
 CONTRIBUTION

B. SMITH, MARSHALL, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 26535 WESTON DR
 City LOS ALTOS HILLS State CA Zip Code 94022-1937
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 725.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 11 / 07 / 2016
Transaction ID : SA11A.475989
 Amount of Each Receipt this Period
 25.00
 Memo Item
 CONTRIBUTION

C. SMITH, MARSHALL, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 26535 WESTON DR
 City LOS ALTOS HILLS State CA Zip Code 94022-1937
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 725.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 11 / 07 / 2016
Transaction ID : SA11A.476248
 Amount of Each Receipt this Period
 25.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	80.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3449 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
Team Ryan

A. SMITH, MARSHALL, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 26535 WESTON DR
 City LOS ALTOS HILLS State CA Zip Code 94022-1937
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 725.00

Date of Receipt
 11 / 07 / 2016
Transaction ID : SA11A.476623
 Amount of Each Receipt this Period
 30.00
 Memo Item
 CONTRIBUTION

B. SMITH, MARSHALL, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 26535 WESTON DR
 City LOS ALTOS HILLS State CA Zip Code 94022-1937
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 725.00

Date of Receipt
 11 / 06 / 2016
Transaction ID : SA11A.477154
 Amount of Each Receipt this Period
 25.00
 Memo Item
 CONTRIBUTION

C. SMITH, MARSHALL, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 26535 WESTON DR
 City LOS ALTOS HILLS State CA Zip Code 94022-1937
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 725.00

Date of Receipt
 11 / 06 / 2016
Transaction ID : SA11A.478079
 Amount of Each Receipt this Period
 25.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	80.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3450 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
Team Ryan

A. SMITH, MARSHALL, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 26535 WESTON DR
 City LOS ALTOS HILLS State CA Zip Code 94022-1937
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 725.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 05 / 2016
Transaction ID : SA11A.478430
 Amount of Each Receipt this Period
 30.00
 Memo Item
 CONTRIBUTION

B. SMITH, MARSHALL, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 26535 WESTON DR
 City LOS ALTOS HILLS State CA Zip Code 94022-1937
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 725.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 05 / 2016
Transaction ID : SA11A.478434
 Amount of Each Receipt this Period
 25.00
 Memo Item
 CONTRIBUTION

C. SMITH, MARSHALL, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 26535 WESTON DR
 City LOS ALTOS HILLS State CA Zip Code 94022-1937
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 725.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 07 / 2016
Transaction ID : SA11A.479937
 Amount of Each Receipt this Period
 50.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	105.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3451 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. SMITH, MARSHALL, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 26535 WESTON DR
 City LOS ALTOS HILLS State CA Zip Code 94022-1937
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 725.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 07 / 2016
Transaction ID : SA11A.480511
 Amount of Each Receipt this Period
 50.00
 Memo Item
 CONTRIBUTION

B. SMITH, MAUREEN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1096 MT DOBLE DR.
 City BIG BEAR CITY State CA Zip Code 92314-9443
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 230.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 24 / 2016
Transaction ID : SA11A.449155
 Amount of Each Receipt this Period
 25.00
 Memo Item
 CONTRIBUTION

C. SMITH, MAUREEN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1096 MT DOBLE DR.
 City BIG BEAR CITY State CA Zip Code 92314-9443
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 230.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 06 / 2016
Transaction ID : SA11A.476979
 Amount of Each Receipt this Period
 30.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	105.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3452 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
Team Ryan

A. SMITH, MAUREEN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1096 MT DOBLE DR.
 City BIG BEAR CITY State CA Zip Code 92314-9443
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 230.00

Date of Receipt 11 / 06 / 2016
Transaction ID : SA11A.476983
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

B. SMITH, MICHAEL, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5265 WAYSIDE DR
 City WIMBERLEY State TX Zip Code 78676-6420
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) ATTORNEY
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1219.00

Date of Receipt 10 / 23 / 2016
Transaction ID : SA11A.449630
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

C. SMITH, MICHAEL, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5265 WAYSIDE DR
 City WIMBERLEY State TX Zip Code 78676-6420
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) ATTORNEY
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1219.00

Date of Receipt 10 / 28 / 2016
Transaction ID : SA11A.456107
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	225.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3453 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
Team Ryan

A. SMITH, MICHAEL, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 6134 WILLERS WAY
 City HOUSTON State TX Zip Code 77057-2806
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SOURCE ROCK RESOURCES Occupation (for Individual) OIL AND GAS EXPLORATION
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 31 / 2016
Transaction ID : SA11A.457786
 Amount of Each Receipt this Period
 250.00
 Memo Item
 CONTRIBUTION

B. SMITH, MICHAEL, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5265 WAYSIDE DR
 City WIMBERLEY State TX Zip Code 78676-6420
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) ATTORNEY
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1219.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 04 / 2016
Transaction ID : SA11A.470776
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION

C. SMITH, MICHAEL, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5265 WAYSIDE DR
 City WIMBERLEY State TX Zip Code 78676-6420
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) ATTORNEY
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1219.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 04 / 2016
Transaction ID : SA11A.470981
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	450.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3454 OF 4311
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. SMITH, MICHAEL, P., ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 5908 REGENTS ROW

City TYLER State TX Zip Code 75703-4557

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) RENARD GROUP ADV. Occupation (for Individual) MANAGER

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt 11 / 21 / 2016
Transaction ID : SA11A.481002

Amount of Each Receipt this Period 200.00

Memo Item CONTRIBUTION

B. SMITH, MURRAY, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 2004 GARDEN PLACE

City BIRMINGHAM State AL Zip Code 35223-1162

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 475.00

Date of Receipt 10 / 22 / 2016
Transaction ID : SA11A.446866

Amount of Each Receipt this Period 75.00

Memo Item CONTRIBUTION

C. SMITH, MURRAY, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 2004 GARDEN PLACE

City BIRMINGHAM State AL Zip Code 35223-1162

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED

Receipt For: Primary General Other (specify)

Aggregate Year-to-Date ▼ 475.00

Date of Receipt 11 / 04 / 2016
Transaction ID : SA11A.472221

Amount of Each Receipt this Period 75.00

Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... 350.00

TOTAL This Period (last page this line number only).....

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3455 OF 4311
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. SMITH, PETER, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 931 CHAPMAN LAKE DRIVE

City WARSAW	State IN	Zip Code 46582-7833
----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) CHAPMAN SMITH CORPORATION	Occupation (for Individual) CEO
--	------------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	05	/	2016

Transaction ID : SA11A.478622

Amount of Each Receipt this Period
50.00

Memo Item
CONTRIBUTION

B. SMITH, R, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 14 BROOK HILLS CIRCLE

City WHITE PLAINS	State NY	Zip Code 10605-5004
----------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) LSTA	Occupation (for Individual) ED
---	-----------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	25	/	2016

Transaction ID : SA11A.448783

Amount of Each Receipt this Period
500.00

Memo Item
CONTRIBUTION

C. SMITH, R, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 14 BROOK HILLS CIRCLE

City WHITE PLAINS	State NY	Zip Code 10605-5004
----------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) LSTA	Occupation (for Individual) ED
---	-----------------------------------

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
1250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	01	/	2016

Transaction ID : SA11A.462263

Amount of Each Receipt this Period
250.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	800.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3456 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
Team Ryan

A. SMITH, SAMUEL, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 7821 NIGHT HAWK RD
 City CHATTANOOGA State TN Zip Code 37421-7304
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) ACE Occupation (for Individual) PHYSICIAN
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 10 / 21 / 2016
Transaction ID : SA11A.444598
 Amount of Each Receipt this Period 30.00
 Memo Item CONTRIBUTION

B. SMITH, SANDY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address N87 W35499 MAPLETON ROAD
 City OCONOMOWOC State WI Zip Code 53066-9616
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 325.00

Date of Receipt 10 / 25 / 2016
Transaction ID : SA11A.449054
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

C. SMITH, SANDY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address N87 W35499 MAPLETON ROAD
 City OCONOMOWOC State WI Zip Code 53066-9616
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 325.00

Date of Receipt 10 / 25 / 2016
Transaction ID : SA11A.449056
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	230.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3457 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
Team Ryan

A. SMITH, SANDY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address N87 W35499 MAPLETON ROAD
 City OCONOMOWOC State WI Zip Code 53066-9616
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 325.00

Date of Receipt 11 / 01 / 2016
Transaction ID : SA11A.462976
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

B. SMITH, SCOTT, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 12014 PEBBLE HILL
 City HOUSTON State TX Zip Code 77024-6208
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) VNR Occupation (for Individual) CEO
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 10 / 24 / 2016
Transaction ID : SA11A.445914
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

C. SMITH, SCOTT, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 12014 PEBBLE HILL
 City HOUSTON State TX Zip Code 77024-6208
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) VNR Occupation (for Individual) CEO
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 10 / 25 / 2016
Transaction ID : SA11A.448618
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 225.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3458 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. SMITH, SCOTT, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 12014 PEBBLE HILL
 City HOUSTON State TX Zip Code 77024-6208
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) VNR Occupation (for Individual) CEO
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 11 / 06 / 2016
Transaction ID : SA11A.480923
 Amount of Each Receipt this Period 50.00
 Memo Item
CONTRIBUTION

B. SMITH, SCOTT, , MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 9813 N MEADOW LANE
 City HIGHLAND State UT Zip Code 84003-9188
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) PHYSICIAN
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 750.00

Date of Receipt 11 / 01 / 2016
Transaction ID : SA11A.461560
 Amount of Each Receipt this Period 500.00
 Memo Item
CONTRIBUTION

C. SMITH, SEWARD, , MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2405 3RD PLACE SW
 City VERO BEACH State FL Zip Code 32962-3337
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 315.00

Date of Receipt 10 / 31 / 2016
Transaction ID : SA11A.459026
 Amount of Each Receipt this Period 100.00
 Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	650.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3459 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. SMITH, SEWARD, , MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2405 3RD PLACE SW
 City VERO BEACH State FL Zip Code 32962-3337
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 315.00

Date of Receipt 10 / 30 / 2016
Transaction ID : SA11A.459996
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

B. SMITH, SEWARD, , MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2405 3RD PLACE SW
 City VERO BEACH State FL Zip Code 32962-3337
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 315.00

Date of Receipt 11 / 06 / 2016
Transaction ID : SA11A.477801
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

C. SMITH, SHEN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 11535 S ELK LK ROAD
 City WILLIAMSBURG State MI Zip Code 49690-8519
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) BOKHARA PET RESORT OWNER
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 585.00

Date of Receipt 10 / 21 / 2016
Transaction ID : SA11A.444382
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	175.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3460 OF 4311
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name A. SMITH, SHEN, , ,		Date of Receipt M M M / D D D / Y Y Y Y Y Y 10 / 31 / 2016
Mailing Address 11535 S ELK LK ROAD		Transaction ID : SA11A.458531
City WILLIAMSBURG	State MI	Zip Code 49690-8519
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 30.00
Name of Employer (for Individual) SELF EMPLOYED	Occupation (for Individual) BOKHARA PET RESORT OWNER	<input type="checkbox"/> Memo Item CONTRIBUTION
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 585.00	

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name B. SMITH, SHEN, , ,		Date of Receipt M M M / D D D / Y Y Y Y Y Y 10 / 31 / 2016
Mailing Address 11535 S ELK LK ROAD		Transaction ID : SA11A.458533
City WILLIAMSBURG	State MI	Zip Code 49690-8519
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 30.00
Name of Employer (for Individual) SELF EMPLOYED	Occupation (for Individual) BOKHARA PET RESORT OWNER	<input type="checkbox"/> Memo Item CONTRIBUTION
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 585.00	

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name C. SMITH, SHEN, , ,		Date of Receipt M M M / D D D / Y Y Y Y Y Y 10 / 31 / 2016
Mailing Address 11535 S ELK LK ROAD		Transaction ID : SA11A.458582
City WILLIAMSBURG	State MI	Zip Code 49690-8519
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 25.00
Name of Employer (for Individual) SELF EMPLOYED	Occupation (for Individual) BOKHARA PET RESORT OWNER	<input type="checkbox"/> Memo Item CONTRIBUTION
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Aggregate Year-to-Date ▼ 585.00	

SUBTOTAL of Receipts This Page (optional).....▶	85.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3461 OF 4311
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. SMITH, SHEN, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 11535 S ELK LK ROAD

City WILLIAMSBURG	State MI	Zip Code 49690-8519
----------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) SELF EMPLOYED	Occupation (for Individual) BOKHARA PET RESORT OWNER
--	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
585.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		31		2016

Transaction ID : SA11A.458587

Amount of Each Receipt this Period
25.00

Memo Item
CONTRIBUTION

B. SMITH, STEPHEN, S., ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1246 FOREST HILL DRIVE

City LOWER GWYNEDD	State PA	Zip Code 19002-2058
-----------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) BRANDYWINE GLOBAL INVESTMENT MGMT	Occupation (for Individual) MANAGING DIRECTOR
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		31		2016

Transaction ID : SA11A.457241

Amount of Each Receipt this Period
1000.00

Memo Item
CONTRIBUTION

C. SMITH, SUSANNE, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 21 E CHESTNUT ST
16F

City CHICAGO	State IL	Zip Code 60611-2050
-----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) ARCHDIOCESE OF CHICAGO	Occupation (for Individual) SOCIAL MEDIA & MARKETING
---	---

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
635.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		22		2016

Transaction ID : SA11A.446864

Amount of Each Receipt this Period
50.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	1075.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3462 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
Team Ryan

A. SMITH, SUSANNE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 21 E CHESTNUT ST
 16F
 City CHICAGO State IL Zip Code 60611-2050
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) ARCHDIOCESE OF CHICAGO Occupation (for Individual) SOCIAL MEDIA & MARKETING
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 635.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 25 / 2016
Transaction ID : SA11A.448032
 Amount of Each Receipt this Period
 50.00
 Memo Item
 CONTRIBUTION

B. SMITH, SUSANNE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 21 E CHESTNUT ST
 16F
 City CHICAGO State IL Zip Code 60611-2050
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) ARCHDIOCESE OF CHICAGO Occupation (for Individual) SOCIAL MEDIA & MARKETING
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 635.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 25 / 2016
Transaction ID : SA11A.448033
 Amount of Each Receipt this Period
 50.00
 Memo Item
 CONTRIBUTION

C. SMITH, SUSANNE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 21 E CHESTNUT ST
 16F
 City CHICAGO State IL Zip Code 60611-2050
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) ARCHDIOCESE OF CHICAGO Occupation (for Individual) SOCIAL MEDIA & MARKETING
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 635.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 28 / 2016
Transaction ID : SA11A.455513
 Amount of Each Receipt this Period
 25.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	125.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3463 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
Team Ryan

A. SMITH, SUSANNE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 21 E CHESTNUT ST
 16F
 City CHICAGO State IL Zip Code 60611-2050
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) ARCHDIOCESE OF CHICAGO Occupation (for Individual) SOCIAL MEDIA & MARKETING
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 635.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 28 / 2016
Transaction ID : SA11A.455522
 Amount of Each Receipt this Period
 30.00
 Memo Item
 CONTRIBUTION

B. SMITH, SUSANNE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 21 E CHESTNUT ST
 16F
 City CHICAGO State IL Zip Code 60611-2050
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) ARCHDIOCESE OF CHICAGO Occupation (for Individual) SOCIAL MEDIA & MARKETING
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 635.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 31 / 2016
Transaction ID : SA11A.464643
 Amount of Each Receipt this Period
 25.00
 Memo Item
 CONTRIBUTION

C. SMITH, SUSANNE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 21 E CHESTNUT ST
 16F
 City CHICAGO State IL Zip Code 60611-2050
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) ARCHDIOCESE OF CHICAGO Occupation (for Individual) SOCIAL MEDIA & MARKETING
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 635.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 31 / 2016
Transaction ID : SA11A.464645
 Amount of Each Receipt this Period
 25.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	80.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3464 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. SMITH, SUSANNE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 21 E CHESTNUT ST
 16F
 City CHICAGO State IL Zip Code 60611-2050
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) ARCHDIOCESE OF CHICAGO Occupation (for Individual) SOCIAL MEDIA & MARKETING
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 635.00

Date of Receipt 11 / 04 / 2016
Transaction ID : SA11A.471114
 Amount of Each Receipt this Period 30.00
 Memo Item CONTRIBUTION

B. SMITH, SUSANNE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 21 E CHESTNUT ST
 16F
 City CHICAGO State IL Zip Code 60611-2050
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) ARCHDIOCESE OF CHICAGO Occupation (for Individual) SOCIAL MEDIA & MARKETING
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 635.00

Date of Receipt 11 / 04 / 2016
Transaction ID : SA11A.472120
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

C. SMITH, SUSANNE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 21 E CHESTNUT ST
 16F
 City CHICAGO State IL Zip Code 60611-2050
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) ARCHDIOCESE OF CHICAGO Occupation (for Individual) SOCIAL MEDIA & MARKETING
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 635.00

Date of Receipt 11 / 04 / 2016
Transaction ID : SA11A.473449
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	130.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3465 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. SMITH, SUSANNE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 21 E CHESTNUT ST
 16F
 City CHICAGO State IL Zip Code 60611-2050
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) ARCHDIOCESE OF CHICAGO Occupation (for Individual) SOCIAL MEDIA & MARKETING
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 635.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 07 / 2016
Transaction ID : SA11A.474643
 Amount of Each Receipt this Period
 25.00
 Memo Item
 CONTRIBUTION

B. SMITH, SUSANNE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 21 E CHESTNUT ST
 16F
 City CHICAGO State IL Zip Code 60611-2050
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) ARCHDIOCESE OF CHICAGO Occupation (for Individual) SOCIAL MEDIA & MARKETING
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 635.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 07 / 2016
Transaction ID : SA11A.480444
 Amount of Each Receipt this Period
 25.00
 Memo Item
 CONTRIBUTION

C. SMITH, SUZANNE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 185 BURMONT ROAD
 City DREXEL HILL State PA Zip Code 19026-2026
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) DCMH Occupation (for Individual) RN
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 405.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 06 / 2016
Transaction ID : SA11A.477595
 Amount of Each Receipt this Period
 25.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 75.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3466 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. SMITH, THERESA, M., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 43 FALCON WAY
 City HALES LOCATION State NH Zip Code 03860-7924
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 457.00

Date of Receipt **10 / 28 / 2016**
Transaction ID : SA11A.456045
 Amount of Each Receipt this Period 27.00
 Memo Item CONTRIBUTION

B. SMITH, THERESA, M., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 43 FALCON WAY
 City HALES LOCATION State NH Zip Code 03860-7924
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 457.00

Date of Receipt **11 / 07 / 2016**
Transaction ID : SA11A.467857
 Amount of Each Receipt this Period 53.00
 Memo Item CONTRIBUTION

C. SMITH, THERESA, M., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 43 FALCON WAY
 City HALES LOCATION State NH Zip Code 03860-7924
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 457.00

Date of Receipt **11 / 04 / 2016**
Transaction ID : SA11A.470850
 Amount of Each Receipt this Period 27.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶ 107.00
TOTAL This Period (last page this line number only).....▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3467 OF 4311
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. SMITH, TIMOTHY, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 330 WOODRIDGE

City BLOOMFIELD HILLS	State MI	Zip Code 48304-3467
--------------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		25		2016

Transaction ID : SA11A.448741

Amount of Each Receipt this Period
250.00

Memo Item
CONTRIBUTION

B. SMITH, TODD, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 18 MASTERS CIR

City LITTLE ROCK	State AR	Zip Code 72212-3304
---------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) RAD CON	Occupation (for Individual) MEDICAL
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
400.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11		03		2016

Transaction ID : SA11A.469318

Amount of Each Receipt this Period
100.00

Memo Item
CONTRIBUTION

C. SMITH, WARREN, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 557 DIVISION STREET

City ELIZABETHTON	State TN	Zip Code 37643-3935
----------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
275.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11		04		2016

Transaction ID : SA11A.473675

Amount of Each Receipt this Period
50.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	400.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3468 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. SMITH, WILLIAM, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2280 TANGLEWOOD BROOK LANE
 City BIRMINGHAM State AL Zip Code 35243-2170
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) TOOL-SMITH COMPANY Occupation (for Individual) BUSINESS OWNER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 480.00

Date of Receipt 10 / 21 / 2016
Transaction ID : SA11A.444496
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

B. SMITH, WILLIAM, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2280 TANGLEWOOD BROOK LANE
 City BIRMINGHAM State AL Zip Code 35243-2170
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) TOOL-SMITH COMPANY Occupation (for Individual) BUSINESS OWNER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 480.00

Date of Receipt 10 / 24 / 2016
Transaction ID : SA11A.446052
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

C. SMITH, WILLIAM, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2280 TANGLEWOOD BROOK LANE
 City BIRMINGHAM State AL Zip Code 35243-2170
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) TOOL-SMITH COMPANY Occupation (for Individual) BUSINESS OWNER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 480.00

Date of Receipt 10 / 24 / 2016
Transaction ID : SA11A.446061
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 75.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3469 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
-----------------------------	-----------------------------	-----------------------------

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NAME OF COMMITTEE (In Full)
Team Ryan

A. SMITH, WILLIAM, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2280 TANGLEWOOD BROOK LANE
 City BIRMINGHAM State AL Zip Code 35243-2170
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) TOOL-SMITH COMPANY Occupation (for Individual) BUSINESS OWNER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 480.00

Date of Receipt **10 / 27 / 2016**
Transaction ID : SA11A.457032
 Amount of Each Receipt this Period 30.00
 Memo Item CONTRIBUTION

B. SMITH, WILLIAM, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2280 TANGLEWOOD BROOK LANE
 City BIRMINGHAM State AL Zip Code 35243-2170
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) TOOL-SMITH COMPANY Occupation (for Individual) BUSINESS OWNER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 480.00

Date of Receipt **11 / 02 / 2016**
Transaction ID : SA11A.469964
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

C. SMITH, WILLIAM, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2280 TANGLEWOOD BROOK LANE
 City BIRMINGHAM State AL Zip Code 35243-2170
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) TOOL-SMITH COMPANY Occupation (for Individual) BUSINESS OWNER
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 480.00

Date of Receipt **11 / 04 / 2016**
Transaction ID : SA11A.470471
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶ 80.00
TOTAL This Period (last page this line number only).....▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3470 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. SMITH, WILLIAM, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2280 TANGLEWOOD BROOK LANE
 City BIRMINGHAM State AL Zip Code 35243-2170
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) TOOL-SMITH COMPANY Occupation (for Individual) BUSINESS OWNER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 480.00

Date of Receipt 11 / 04 / 2016
Transaction ID : SA11A.472826
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

B. SMITH, WILLIAM, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2280 TANGLEWOOD BROOK LANE
 City BIRMINGHAM State AL Zip Code 35243-2170
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) TOOL-SMITH COMPANY Occupation (for Individual) BUSINESS OWNER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 480.00

Date of Receipt 11 / 07 / 2016
Transaction ID : SA11A.480465
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

C. SMITH, WILLIAM, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2280 TANGLEWOOD BROOK LANE
 City BIRMINGHAM State AL Zip Code 35243-2170
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) TOOL-SMITH COMPANY Occupation (for Individual) BUSINESS OWNER
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 480.00

Date of Receipt 11 / 06 / 2016
Transaction ID : SA11A.480909
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	75.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3471 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. SMURLO JR, EDWARD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1144 S. AHRENS AVE
 City LOMBARD State IL Zip Code 60148-4053
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SMURLO & ASSOCIATES, LTD Occupation (for Individual) CPA
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 10 / 23 / 2016
Transaction ID : SA11A.446508
 Amount of Each Receipt this Period 100.00
 Memo Item
CONTRIBUTION

B. SMYTHE, JULIEN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3821 PIPING ROCK LN
 City HOUSTON State TX Zip Code 77027-4033
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) ROCK OIL CO Occupation (for Individual) EXECUTIVE
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 10000.00

Date of Receipt 10 / 20 / 2016
Transaction ID : SA11A.433368
 Amount of Each Receipt this Period 10000.00
 Memo Item
CONTRIBUTION

C. SNAVELY, WILLIAM, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5100 JOHN D RYAN BLVD 2504
 City SAN ANTONIO State TX Zip Code 78245-3527
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 550.00

Date of Receipt 10 / 26 / 2016
Transaction ID : SA11A.449976
 Amount of Each Receipt this Period 50.00
 Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶ 10150.00
TOTAL This Period (last page this line number only).....▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3472 OF 4311
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. SNAVELY, WILLIAM, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 5100 JOHN D RYAN BLVD
2504

City SAN ANTONIO State TX Zip Code 78245-3527

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
550.00

Date of Receipt
10 / 26 / 2016
Transaction ID : SA11A.449978

Amount of Each Receipt this Period
50.00

Memo Item
CONTRIBUTION

B. SNAVELY, WILLIAM, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 5100 JOHN D RYAN BLVD
2504

City SAN ANTONIO State TX Zip Code 78245-3527

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
550.00

Date of Receipt
11 / 01 / 2016
Transaction ID : SA11A.462514

Amount of Each Receipt this Period
50.00

Memo Item
CONTRIBUTION

C. SNAVELY, WILLIAM, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 5100 JOHN D RYAN BLVD
2504

City SAN ANTONIO State TX Zip Code 78245-3527

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
550.00

Date of Receipt
11 / 01 / 2016
Transaction ID : SA11A.462515

Amount of Each Receipt this Period
50.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 150.00

TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3473 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. SNAVELY, WILLIAM, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5100 JOHN D RYAN BLVD
 2504
 City SAN ANTONIO State TX Zip Code 78245-3527
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 550.00

Date of Receipt 11 / 04 / 2016
Transaction ID : SA11A.470569
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

B. SNEAD, CHARLOTTE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 608 BATTON HOLLOW RD
 City MOUNT CLARE State WV Zip Code 26408-7016
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt 11 / 07 / 2016
Transaction ID : SA11A.476566
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

C. SNEAD, CHARLOTTE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 608 BATTON HOLLOW RD
 City MOUNT CLARE State WV Zip Code 26408-7016
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt 11 / 07 / 2016
Transaction ID : SA11A.476568
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	250.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3474 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. SNEAD, DENNIS, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO BOX 341
 City DENVER CITY State TX Zip Code 79323-0341
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 350.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 27 / 2016
Transaction ID : SA11A.456937
 Amount of Each Receipt this Period
 25.00
 Memo Item
 CONTRIBUTION

B. SNEAD, DENNIS, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO BOX 341
 City DENVER CITY State TX Zip Code 79323-0341
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 350.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 27 / 2016
Transaction ID : SA11A.456940
 Amount of Each Receipt this Period
 25.00
 Memo Item
 CONTRIBUTION

C. SNEAD, DENNIS, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO BOX 341
 City DENVER CITY State TX Zip Code 79323-0341
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 350.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 30 / 2016
Transaction ID : SA11A.459453
 Amount of Each Receipt this Period
 250.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	300.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3475 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
Team Ryan

A. SNEAD, DENNIS, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO BOX 341
 City DENVER CITY State TX Zip Code 79323-0341
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 350.00

Date of Receipt 10 / 29 / 2016
Transaction ID : SA11A.460390
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

B. SNEAD, EDWARD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 9144 LEGHORN
 City FAIRFAX State VA Zip Code 22031-3012
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SNEAD NED (GMAIL) Occupation (for Individual) ANALYST
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 531.00

Date of Receipt 10 / 21 / 2016
Transaction ID : SA11A.444212
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

C. SNEAD, EDWARD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 9144 LEGHORN
 City FAIRFAX State VA Zip Code 22031-3012
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SNEAD NED (GMAIL) Occupation (for Individual) ANALYST
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 531.00

Date of Receipt 11 / 04 / 2016
Transaction ID : SA11A.474312
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶ 250.00
TOTAL This Period (last page this line number only).....▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3476 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. SNEAD, EDWARD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 9144 LEGHORN
 City FAIRFAX State VA Zip Code 22031-3012
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SNEAD NED (GMAIL) Occupation (for Individual) ANALYST
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 531.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 06 / 2016
Transaction ID : SA11A.477162
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION

B. SNEED JR., ALBERT, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO BOX 7376
 City ASHEVILLE State NC Zip Code 28802-8506
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) VAN WINKLE LAW FIRM Occupation (for Individual) ATTORNEY
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 750.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 23 / 2016
Transaction ID : SA11A.446490
 Amount of Each Receipt this Period
 250.00
 Memo Item
 CONTRIBUTION

C. SNEED JR., ALBERT, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO BOX 7376
 City ASHEVILLE State NC Zip Code 28802-8506
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) VAN WINKLE LAW FIRM Occupation (for Individual) ATTORNEY
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 750.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 23 / 2016
Transaction ID : SA11A.446491
 Amount of Each Receipt this Period
 250.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	600.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3477 OF 4311
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. SNEED, PAMELA, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 2008 LONGSTRAW PLACE

City THE WOODLANDS	State TX	Zip Code 77380-1835
-----------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	06	/	2016

Transaction ID : SA11A.476772

Amount of Each Receipt this Period
250.00

Memo Item CONTRIBUTION

B. SNELLMAN, KAJ, A., ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 8255 MEREDITH PL.

City VERO BEACH	State FL	Zip Code 32968-8513
--------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
725.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	25	/	2016

Transaction ID : SA11A.447424

Amount of Each Receipt this Period
200.00

Memo Item CONTRIBUTION

C. SNELLMAN, KAJ, A., ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 8255 MEREDITH PL.

City VERO BEACH	State FL	Zip Code 32968-8513
--------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
725.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	25	/	2016

Transaction ID : SA11A.448919

Amount of Each Receipt this Period
250.00

Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	700.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3478 OF 4311
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. SNIDER, NED, L., MR.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 3124 NORTH NELSON

City ARLINGTON	State VA	Zip Code 22207-5318
-------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
350.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	04	/	2016

Transaction ID : SA11A.471581

Amount of Each Receipt this Period
50.00

Memo Item CONTRIBUTION

B. SNITH, TOM, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 919 MILAN. SUITE 1960

City HOUSTON	State TX	Zip Code 77002-5350
-----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) HIGH ISLAND OIL	Occupation (for Individual) LANDMAN
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
600.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	21	/	2016

Transaction ID : SA11A.444504

Amount of Each Receipt this Period
100.00

Memo Item CONTRIBUTION

C. SNITH, TOM, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 919 MILAN. SUITE 1960

City HOUSTON	State TX	Zip Code 77002-5350
-----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) HIGH ISLAND OIL	Occupation (for Individual) LANDMAN
--	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
600.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	04	/	2016

Transaction ID : SA11A.471748

Amount of Each Receipt this Period
100.00

Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	250.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3479 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. SNOW, MARC, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 12551 GRANVILLE CYN WAY
 City ORO VALLEY State AZ Zip Code 85755-8939
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 360.00

Date of Receipt 10 / 25 / 2016
Transaction ID : SA11A.448491
 Amount of Each Receipt this Period 30.00
 Memo Item CONTRIBUTION

B. SNOW, MARK, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 125 HAMPTON LAKE DRIVE
 City PELHAM State AL Zip Code 35124-4813
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) PROCESS SPECIALTIES, LLC Occupation (for Individual) EXECUTIVE
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 10 / 26 / 2016
Transaction ID : SA11A.449795
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

C. SNOW, MARC, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 12551 GRANVILLE CYN WAY
 City ORO VALLEY State AZ Zip Code 85755-8939
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 360.00

Date of Receipt 10 / 28 / 2016
Transaction ID : SA11A.455400
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	305.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3480 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
SNOW, MARC, , ,

Mailing Address 12551 GRANVILLE CYN WAY

City ORO VALLEY	State AZ	Zip Code 85755-8939
--------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
360.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 07 / 2016

Transaction ID : SA11A.475782

Amount of Each Receipt this Period
25.00

Memo Item CONTRIBUTION

B. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
SNOW, MARC, , ,

Mailing Address 12551 GRANVILLE CYN WAY

City ORO VALLEY	State AZ	Zip Code 85755-8939
--------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
360.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 06 / 2016

Transaction ID : SA11A.478044

Amount of Each Receipt this Period
30.00

Memo Item CONTRIBUTION

C. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
SNOW, MARC, , ,

Mailing Address 12551 GRANVILLE CYN WAY

City ORO VALLEY	State AZ	Zip Code 85755-8939
--------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
360.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 04 / 2016

Transaction ID : SA11A.479595

Amount of Each Receipt this Period
25.00

Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	80.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3481 OF 4311
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. SNYDER, LOUIS, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1248 TANAGER TRAIL

City VIRGINIA BEACH	State VA	Zip Code 23451-4955
------------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) US SALES CORP	Occupation (for Individual) MFS REP
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
400.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
10		26		2016

Transaction ID : SA11A.450190

Amount of Each Receipt this Period
100.00

Memo Item
CONTRIBUTION

B. SNYDER, LOUIS, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1248 TANAGER TRAIL

City VIRGINIA BEACH	State VA	Zip Code 23451-4955
------------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) US SALES CORP	Occupation (for Individual) MFS REP
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
400.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
11		21		2016

Transaction ID : SA11A.481018

Amount of Each Receipt this Period
100.00

Memo Item
CONTRIBUTION

C. SNYDER, LYNN, , MRS.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 4091 N LARREA LN

City TUCSON	State AZ	Zip Code 85750-2436
----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
300.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
10		21		2016

Transaction ID : SA11A.447214

Amount of Each Receipt this Period
50.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	250.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3482 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. SNYDER, LYNN, , MRS.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4091 N LARREA LN
 City TUCSON State AZ Zip Code 85750-2436
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 11 / 07 / 2016
Transaction ID : SA11A.480167
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

B. SOBANIA, EVERETT, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 7751 410TH ST.
 City RICE State MN Zip Code 56367-9536
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 11 / 03 / 2016
Transaction ID : SA11A.469283
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

C. SODEN, BILL, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 550 OKEECHOBEE BLVD 1502
 City WEST PALM BEACH State FL Zip Code 33401-6317
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) COMPOSER
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 443.00

Date of Receipt 10 / 21 / 2016
Transaction ID : SA11A.444327
 Amount of Each Receipt this Period 75.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	375.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3483 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. SOHM, CHUCK, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 13505 S 22 ST
 City BELLEVUE State NE Zip Code 68123-4755
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 20 / 2016
Transaction ID : SA11A.442331
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION

B. SOHM, CHUCK, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 13505 S 22 ST
 City BELLEVUE State NE Zip Code 68123-4755
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 30 / 2016
Transaction ID : SA11A.459853
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION

C. SOIKE, DAVID, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4501 CHEROKEE ROAD
 City JONESBOROUGH State TN Zip Code 37659-6551
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) PHYSICIAN
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 04 / 2016
Transaction ID : SA11A.467457
 Amount of Each Receipt this Period
 500.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	700.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3484 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. SOKOL, STEPHEN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 239 WEST 100TH STREET #3F

City NEW YORK	State NY	Zip Code 10025-5391
------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) SELF EMPLOYED	Occupation (for Individual) FINANCIAL SERVICES
--	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1000.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 03 / 2016

Transaction ID : SA11A.474370

Amount of Each Receipt this Period
1000.00

Memo Item CONTRIBUTION

B. SOKOL, WILLIAM, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 143 EMERALD BAY

City LAGUNA BEACH	State CA	Zip Code 92651-1254
----------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) PHYSICIAN	Occupation (for Individual) PHYSICIAN
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1000.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 26 / 2016

Transaction ID : SA11A.450196

Amount of Each Receipt this Period
500.00

Memo Item CONTRIBUTION

C. SOKOL, WILLIAM, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 143 EMERALD BAY

City LAGUNA BEACH	State CA	Zip Code 92651-1254
----------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) PHYSICIAN	Occupation (for Individual) PHYSICIAN
--	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
1000.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 01 / 2016

Transaction ID : SA11A.462182

Amount of Each Receipt this Period
500.00

Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	2000.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3485 OF 4311
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. SOLIS, RENEE, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 10422 HUEBNER ROAD
APT.# 2903

City SAN ANTONIO State TX Zip Code 78240-1394

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) VETERANS ADMINISTRATION Occupation (for Individual) PHARMACIST

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
630.00

Date of Receipt
M M M / D D D / Y Y Y Y Y Y
10 / 31 / 2016

Transaction ID : SA11A.457690

Amount of Each Receipt this Period
25.00

Memo Item
CONTRIBUTION

B. SOLIS, RENEE, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 10422 HUEBNER ROAD
APT.# 2903

City SAN ANTONIO State TX Zip Code 78240-1394

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) VETERANS ADMINISTRATION Occupation (for Individual) PHARMACIST

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
630.00

Date of Receipt
M M M / D D D / Y Y Y Y Y Y
11 / 04 / 2016

Transaction ID : SA11A.467540

Amount of Each Receipt this Period
100.00

Memo Item
CONTRIBUTION

C. SOLIS, RENEE, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 10422 HUEBNER ROAD
APT.# 2903

City SAN ANTONIO State TX Zip Code 78240-1394

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) VETERANS ADMINISTRATION Occupation (for Individual) PHARMACIST

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
630.00

Date of Receipt
M M M / D D D / Y Y Y Y Y Y
11 / 06 / 2016

Transaction ID : SA11A.477570

Amount of Each Receipt this Period
30.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶ 155.00

TOTAL This Period (last page this line number only).....▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3486 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. SOLIS, RENEE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 10422 HUEBNER ROAD
 APT.# 2903
 City SAN ANTONIO State TX Zip Code 78240-1394
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) VETERANS ADMINISTRATION Occupation (for Individual) PHARMACIST
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 630.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 04 / 2016
Transaction ID : SA11A.479420
 Amount of Each Receipt this Period
 25.00
 Memo Item
 CONTRIBUTION

B. SOLIS, RENEE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 10422 HUEBNER ROAD
 APT.# 2903
 City SAN ANTONIO State TX Zip Code 78240-1394
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) VETERANS ADMINISTRATION Occupation (for Individual) PHARMACIST
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 630.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 04 / 2016
Transaction ID : SA11A.479421
 Amount of Each Receipt this Period
 25.00
 Memo Item
 CONTRIBUTION

C. SOLIS, RENEE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 10422 HUEBNER ROAD
 APT.# 2903
 City SAN ANTONIO State TX Zip Code 78240-1394
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) VETERANS ADMINISTRATION Occupation (for Individual) PHARMACIST
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 630.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 04 / 2016
Transaction ID : SA11A.479430
 Amount of Each Receipt this Period
 25.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	75.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3487 OF 4311
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. SOLOMON, DANA, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 5223 BRAESHEATHER DR
City HOUSTON State TX Zip Code 77096-4107
FEC ID number of contributing federal political committee. **C**
Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 1250.00

Date of Receipt 10 / 24 / 2016
Transaction ID : SA11A.446091
Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

B. SOLOMON, DANA, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 5223 BRAESHEATHER DR
City HOUSTON State TX Zip Code 77096-4107
FEC ID number of contributing federal political committee. **C**
Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 1250.00

Date of Receipt 10 / 24 / 2016
Transaction ID : SA11A.446093
Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

C. SOLOMON, DANA, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 5223 BRAESHEATHER DR
City HOUSTON State TX Zip Code 77096-4107
FEC ID number of contributing federal political committee. **C**
Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 1250.00

Date of Receipt 10 / 21 / 2016
Transaction ID : SA11A.447163
Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 600.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3488 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
Team Ryan

A. SOLOMON, DANA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5223 BRAESHEATHER DR
 City HOUSTON State TX Zip Code 77096-4107
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 21 / 2016
Transaction ID : SA11A.447164
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION

B. SOLOMON, DANA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5223 BRAESHEATHER DR
 City HOUSTON State TX Zip Code 77096-4107
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 04 / 2016
Transaction ID : SA11A.473440
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION

C. SOLOMON, DANA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5223 BRAESHEATHER DR
 City HOUSTON State TX Zip Code 77096-4107
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 07 / 2016
Transaction ID : SA11A.476579
 Amount of Each Receipt this Period
 25.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	225.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3489 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
-----------------------------	-----------------------------	-----------------------------

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NAME OF COMMITTEE (In Full)
Team Ryan

A. SOLOMON, DANA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5223 BRAESHEATHER DR
 City HOUSTON State TX Zip Code 77096-4107
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1250.00

Date of Receipt
 11 / 07 / 2016
Transaction ID : SA11A.476580
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

B. SOLOMON, ELIZABETH, , MS.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1906 E 24TH AVE
 City SPOKANE State WA Zip Code 99203-3808
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 375.00

Date of Receipt
 10 / 24 / 2016
Transaction ID : SA11A.445558
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

C. SOLOMON, ELIZABETH, , MS.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1906 E 24TH AVE
 City SPOKANE State WA Zip Code 99203-3808
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 375.00

Date of Receipt
 10 / 24 / 2016
Transaction ID : SA11A.445999
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	100.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3490 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. SOLOMON, ELIZABETH, , MS.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1906 E 24TH AVE
 City SPOKANE State WA Zip Code 99203-3808
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 375.00

Date of Receipt 10 / 21 / 2016
Transaction ID : SA11A.447242
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

B. SOLTES, CHARLES, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 28031 VIA TIRSO
 City MISSION VIEJO State CA Zip Code 92692-1506
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) B & B Occupation (for Individual) SALES
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 475.00

Date of Receipt 10 / 25 / 2016
Transaction ID : SA11A.447960
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

C. SOLTES, CHARLES, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 28031 VIA TIRSO
 City MISSION VIEJO State CA Zip Code 92692-1506
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) B & B Occupation (for Individual) SALES
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 475.00

Date of Receipt 10 / 28 / 2016
Transaction ID : SA11A.455963
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶ 150.00
TOTAL This Period (last page this line number only).....▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3491 OF 4311
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. SOLTES, CHARLES, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 28031 VIA TIRSO

City MISSION VIEJO	State CA	Zip Code 92692-1506
-----------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) B & B	Occupation (for Individual) SALES
--	--------------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
475.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		31		2016

Transaction ID : SA11A.458131

Amount of Each Receipt this Period
25.00

Memo Item
CONTRIBUTION

B. SOLTES, CHARLES, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 28031 VIA TIRSO

City MISSION VIEJO	State CA	Zip Code 92692-1506
-----------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) B & B	Occupation (for Individual) SALES
--	--------------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
475.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		31		2016

Transaction ID : SA11A.458133

Amount of Each Receipt this Period
25.00

Memo Item
CONTRIBUTION

C. SOLTES, CHARLES, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 28031 VIA TIRSO

City MISSION VIEJO	State CA	Zip Code 92692-1506
-----------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) B & B	Occupation (for Individual) SALES
--	--------------------------------------

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
475.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11		07		2016

Transaction ID : SA11A.475798

Amount of Each Receipt this Period
50.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	100.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3492 OF 4311
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. SOLTES, CHARLES, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 28031 VIA TIRSO

City MISSION VIEJO	State CA	Zip Code 92692-1506
-----------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) B & B	Occupation (for Individual) SALES
--	--------------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
475.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	06	/	2016

Transaction ID : SA11A.476837

Amount of Each Receipt this Period
50.00

Memo Item
CONTRIBUTION

B. SOMES, DONALD, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1655 S GEORGETOWN ST
APT 213

City WICHITA	State KS	Zip Code 67218-4122
-----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
300.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	26	/	2016

Transaction ID : SA11A.450127

Amount of Each Receipt this Period
100.00

Memo Item
CONTRIBUTION

C. SOMES, DONALD, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1655 S GEORGETOWN ST
APT 213

City WICHITA	State KS	Zip Code 67218-4122
-----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
300.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	30	/	2016

Transaction ID : SA11A.459352

Amount of Each Receipt this Period
100.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	250.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3493 OF 4311
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. SOMMERFELD, MARGO, A., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4454 CASITAS ST.
 City SAN DIEGO State CA Zip Code 92107-4218
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 565.00

Date of Receipt 10 / 21 / 2016
Transaction ID : SA11A.444210
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

B. SOMMERFELD, MARGO, A., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4454 CASITAS ST.
 City SAN DIEGO State CA Zip Code 92107-4218
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 565.00

Date of Receipt 10 / 24 / 2016
Transaction ID : SA11A.445767
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

C. SOMMERFELD, MARGO, A., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4454 CASITAS ST.
 City SAN DIEGO State CA Zip Code 92107-4218
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 565.00

Date of Receipt 10 / 26 / 2016
Transaction ID : SA11A.454586
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶ 75.00
TOTAL This Period (last page this line number only).....▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3494 OF 4311
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
Team Ryan

A. SOMMERFELD, MARGO, A., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4454 CASITAS ST.
 City SAN DIEGO State CA Zip Code 92107-4218
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 565.00

Date of Receipt 10 / 26 / 2016
Transaction ID : SA11A.454588
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

B. SOMMERFELD, MARGO, A., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4454 CASITAS ST.
 City SAN DIEGO State CA Zip Code 92107-4218
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 565.00

Date of Receipt 10 / 28 / 2016
Transaction ID : SA11A.455070
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

C. SOMMERS, RICHARD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 551 HIGHLAND AVENUE
 City CARLISLE State PA Zip Code 17013-3921
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 10 / 24 / 2016
Transaction ID : SA11A.445734
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶ 175.00
TOTAL This Period (last page this line number only).....▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3495 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
Team Ryan

A. SONGSTAD, ALLAN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 23835 BLUEHILL BAY
 City DANA POINT State CA Zip Code 92629-4402
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SONGSTAD RANDALL COFFEE & HUMPHREY Occupation (for Individual) PARTNER
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 450.00

Date of Receipt 10 / 20 / 2016
Transaction ID : SA11A.442215
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

B. SONGSTAD, ALLAN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 23835 BLUEHILL BAY
 City DANA POINT State CA Zip Code 92629-4402
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SONGSTAD RANDALL COFFEE & HUMPHREY Occupation (for Individual) PARTNER
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 450.00

Date of Receipt 10 / 29 / 2016
Transaction ID : SA11A.461117
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

C. SONGSTAD, ALLAN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 23835 BLUEHILL BAY
 City DANA POINT State CA Zip Code 92629-4402
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SONGSTAD RANDALL COFFEE & HUMPHREY Occupation (for Individual) PARTNER
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 450.00

Date of Receipt 11 / 04 / 2016
Transaction ID : SA11A.470731
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	200.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3496 OF 4311
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
Team Ryan

A. SOOK, PERRY, A., ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1804 POINT DE VUE DR

City FLOWER MOUND	State TX	Zip Code 75022-2604
----------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NEXSTAR BROADCASTING GROUP	Occupation (for Individual) EXECUTIVE
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
5000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		24		2016

Transaction ID : SA11A.443477

Amount of Each Receipt this Period
5000.00

Memo Item
CONTRIBUTION

B. SOPHER, EVELYN, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 3243 LEPRECHAUN LN

City PALM HARBOR	State FL	Zip Code 34683-2325
---------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
510.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		31		2016

Transaction ID : SA11A.463260

Amount of Each Receipt this Period
30.00

Memo Item
CONTRIBUTION

C. SOPHER, EVELYN, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 3243 LEPRECHAUN LN

City PALM HARBOR	State FL	Zip Code 34683-2325
---------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
510.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11		05		2016

Transaction ID : SA11A.478580

Amount of Each Receipt this Period
50.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	5080.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3497 OF 4311
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
Team Ryan

A. SORENSON, CURTIS, T., MR.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 5471 N SABLE DRIVE

City MILTON	State WI	Zip Code 53563-9479
----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) PEPSICO	Occupation (for Individual) MANAGER
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
355.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		28		2016

Transaction ID : SA11A.455982

Amount of Each Receipt this Period
50.00

Memo Item
CONTRIBUTION

B. SORENSON, CURTIS, T., MR.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 5471 N SABLE DRIVE

City MILTON	State WI	Zip Code 53563-9479
----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) PEPSICO	Occupation (for Individual) MANAGER
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
355.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11		04		2016

Transaction ID : SA11A.472828

Amount of Each Receipt this Period
50.00

Memo Item
CONTRIBUTION

C. SORENSON, JIM, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1776 DEVONSHIRE DR

City SALT LAKE CITY	State UT	Zip Code 84108-2500
------------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) SORENSON ASSOCIATES	Occupation (for Individual) REAL ESTATE
--	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
30700.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		31		2016

Transaction ID : SA11A.458966

Amount of Each Receipt this Period
30700.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	30800.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3498 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
Team Ryan

A. SOROVETZ, JOHN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 8389 HEARTWOOD DR
 City NEWPORT State MI Zip Code 48166-7806
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RED SPOT PAINT AND VARNISH CO., INC Occupation (for Individual) GENERAL MANAGER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 405.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 25 / 2016
Transaction ID : SA11A.451696
 Amount of Each Receipt this Period 50.00
 Memo Item
 CONTRIBUTION

B. SOROVETZ, JOHN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 8389 HEARTWOOD DR
 City NEWPORT State MI Zip Code 48166-7806
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RED SPOT PAINT AND VARNISH CO., INC Occupation (for Individual) GENERAL MANAGER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 405.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 31 / 2016
Transaction ID : SA11A.457550
 Amount of Each Receipt this Period 25.00
 Memo Item
 CONTRIBUTION

C. SOROVETZ, JOHN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 8389 HEARTWOOD DR
 City NEWPORT State MI Zip Code 48166-7806
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RED SPOT PAINT AND VARNISH CO., INC Occupation (for Individual) GENERAL MANAGER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 405.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 31 / 2016
Transaction ID : SA11A.457670
 Amount of Each Receipt this Period 25.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	100.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3499 OF 4311
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. SOROVETZ, JOHN, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 8389 HEARTWOOD DR

City NEWPORT	State MI	Zip Code 48166-7806
-----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) RED SPOT PAINT AND VARNISH CO., INC	Occupation (for Individual) GENERAL MANAGER
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
405.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	04	/	2016

Transaction ID : SA11A.473951

Amount of Each Receipt this Period
50.00

Memo Item
CONTRIBUTION

B. SOULE, WILLIAM, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1104 INDEPENDENCE DRIVE

City WEST CHESTER	State PA	Zip Code 19382-8043
----------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
450.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	24	/	2016

Transaction ID : SA11A.445936

Amount of Each Receipt this Period
25.00

Memo Item
CONTRIBUTION

C. SOULE, WILLIAM, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1104 INDEPENDENCE DRIVE

City WEST CHESTER	State PA	Zip Code 19382-8043
----------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
450.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	24	/	2016

Transaction ID : SA11A.445937

Amount of Each Receipt this Period
25.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	100.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3500 OF 4311
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. SOULE, WILLIAM, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 1104 INDEPENDENCE DRIVE

City WEST CHESTER	State PA	Zip Code 19382-8043
----------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
450.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		22		2016

Transaction ID : SA11A.447030

Amount of Each Receipt this Period
50.00

Memo Item
CONTRIBUTION

B. SOULE, WILLIAM, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 1104 INDEPENDENCE DRIVE

City WEST CHESTER	State PA	Zip Code 19382-8043
----------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
450.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		22		2016

Transaction ID : SA11A.447031

Amount of Each Receipt this Period
50.00

Memo Item
CONTRIBUTION

C. SOULE, WILLIAM, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 1104 INDEPENDENCE DRIVE

City WEST CHESTER	State PA	Zip Code 19382-8043
----------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
450.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		25		2016

Transaction ID : SA11A.448276

Amount of Each Receipt this Period
50.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	150.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3501 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. SOULE, WILLIAM, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1104 INDEPENDENCE DRIVE
 City WEST CHESTER State PA Zip Code 19382-8043
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 450.00

Date of Receipt 10 / 26 / 2016
Transaction ID : SA11A.450486
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

B. SOULE, WILLIAM, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1104 INDEPENDENCE DRIVE
 City WEST CHESTER State PA Zip Code 19382-8043
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 450.00

Date of Receipt 10 / 31 / 2016
Transaction ID : SA11A.458768
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

C. SOULE, WILLIAM, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1104 INDEPENDENCE DRIVE
 City WEST CHESTER State PA Zip Code 19382-8043
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 450.00

Date of Receipt 11 / 02 / 2016
Transaction ID : SA11A.466963
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 75.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3502 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. SOUTH, OKREY, T., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 700 E JACOB STREET
 City PILOT POINT State TX Zip Code 76258-4444
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt 10 / 31 / 2016
Transaction ID : SA11A.457304
 Amount of Each Receipt this Period 1000.00
 Memo Item CONTRIBUTION

B. SOUZA, ANDREW, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO BOX 17826
 City HONOLULU State HI Zip Code 96817-0826
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) MCCABE HAMILTON & RENNY CO LTD Occupation (for Individual) MAINT. DIRECTOR
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 475.00

Date of Receipt 10 / 31 / 2016
Transaction ID : SA11A.458407
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

C. SOWDER, NICK, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 201 NEWELL STREET
 City SEATTLE State WA Zip Code 98109-1818
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) INFORMATION REQUESTED PER BEST EFFORTS Occupation (for Individual) INFORMATION REQUESTED PER BEST EFFORTS
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 11 / 04 / 2016
Transaction ID : SA11A.467567
 Amount of Each Receipt this Period 500.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	1600.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3503 OF 4311
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. SOZZI, RAYMOND, V., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO BOX 567
 City CHAPPAQUA State NY Zip Code 10514-0567
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) INFORMATION REQUESTED PER BEST EFFORTS Occupation (for Individual) INFORMATION REQUESTED PER BE
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 500.00

Date of Receipt 10 / 21 / 2016
Transaction ID : SA11A.443678
 Amount of Each Receipt this Period 500.00
 Memo Item CONTRIBUTION

B. SPAIN, JON, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 7335 VIA LORADO
 City RANCHO PALOS VERDE State CA Zip Code 90275-4463
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 654.00

Date of Receipt 10 / 20 / 2016
Transaction ID : SA11A.442253
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

C. SPARKS, JERRY, V., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO BOX 1886
 City TEXARKANA State TX Zip Code 75504-1886
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) ECONOMIC DEVELOPMENT CONSULTANT Occupation (for Individual) EXECUTIVE
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 1000.00

Date of Receipt 10 / 24 / 2016
Transaction ID : SA11A.443468
 Amount of Each Receipt this Period 1000.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶ 1600.00
TOTAL This Period (last page this line number only).....▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3504 OF 4311
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. SPARROW, BERT, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1817 SAINT IVES CIRCLE

City LEXINGTON	State KY	Zip Code 40502-7714
-------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		31		2016

Transaction ID : SA11A.459170

Amount of Each Receipt this Period
50.00

Memo Item CONTRIBUTION

B. SPARROW, BERT, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1817 SAINT IVES CIRCLE

City LEXINGTON	State KY	Zip Code 40502-7714
-------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11		04		2016

Transaction ID : SA11A.472589

Amount of Each Receipt this Period
50.00

Memo Item CONTRIBUTION

C. SPATZ, DAVID, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 694 WINDSONG TRAIL

City WEST LAKE HILLS	State TX	Zip Code 78746-3555
-------------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) SPATZ DEVELOPMENT COMPANY	Occupation (for Individual) RE DEVELOPER
--	---

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		28		2016

Transaction ID : SA11A.455430

Amount of Each Receipt this Period
500.00

Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	600.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3505 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. SPAULDING, ALEXANDER, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 118 CONGRESS ST
 203
 City PORTLAND State ME Zip Code 04101-3887
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) HODGDON SHIPBUILDING Occupation (for Individual) BOAT BUILDING
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 05 / 2016
Transaction ID : SA11A.479228
 Amount of Each Receipt this Period
 250.00
 Memo Item
 CONTRIBUTION

B. SPEARE, DONALD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2581 SAND HILLS AVE
 City GRAND FORKS State ND Zip Code 58201-9229
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 31 / 2016
Transaction ID : SA11A.463259
 Amount of Each Receipt this Period
 250.00
 Memo Item
 CONTRIBUTION

C. SPEAR, KENNETH, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 11135 HAMES LANE
 City GLEN ALLEN State VA Zip Code 23059-6022
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) CARDNO Occupation (for Individual) ENGINEER
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 07 / 2016
Transaction ID : SA11A.467687
 Amount of Each Receipt this Period
 150.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	650.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3506 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. SPEECE, JEAN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5840 ROBERT E. LEE DRIVE
 City NASHVILLE State TN Zip Code 37215-5238
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 265.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 20 / 2016
Transaction ID : SA11A.442455
 Amount of Each Receipt this Period
 25.00
 Memo Item
 CONTRIBUTION

B. SPEECE, JEAN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5840 ROBERT E. LEE DRIVE
 City NASHVILLE State TN Zip Code 37215-5238
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 265.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 04 / 2016
Transaction ID : SA11A.472726
 Amount of Each Receipt this Period
 25.00
 Memo Item
 CONTRIBUTION

C. SPEECE, JEAN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5840 ROBERT E. LEE DRIVE
 City NASHVILLE State TN Zip Code 37215-5238
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 265.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 04 / 2016
Transaction ID : SA11A.473016
 Amount of Each Receipt this Period
 25.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	75.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3507 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. SPENCE, CORINNE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2921 LAUREL DR
 City SACRAMENTO State CA Zip Code 95864-4957
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 21998.00

Date of Receipt 10 / 30 / 2016
Transaction ID : SA11A.459369
 Amount of Each Receipt this Period 5000.00
 Memo Item CONTRIBUTION

B. SPENCER, DONALD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2180 SPARROW CT
 City SARASOTA State FL Zip Code 34239-3755
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 350.00

Date of Receipt 10 / 21 / 2016
Transaction ID : SA11A.444457
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

C. SPENCER, DONALD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2180 SPARROW CT
 City SARASOTA State FL Zip Code 34239-3755
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 350.00

Date of Receipt 10 / 25 / 2016
Transaction ID : SA11A.448055
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	5050.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3508 OF 4311
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. SPENCER, DONALD, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 2180 SPARROW CT

City SARASOTA	State FL	Zip Code 34239-3755
------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
350.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		26		2016

Transaction ID : SA11A.450707

Amount of Each Receipt this Period
25.00

Memo Item
CONTRIBUTION

B. SPENCER, DONALD, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 2180 SPARROW CT

City SARASOTA	State FL	Zip Code 34239-3755
------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
350.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		26		2016

Transaction ID : SA11A.450709

Amount of Each Receipt this Period
25.00

Memo Item
CONTRIBUTION

C. SPENCER, DONALD, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 2180 SPARROW CT

City SARASOTA	State FL	Zip Code 34239-3755
------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
350.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		30		2016

Transaction ID : SA11A.459576

Amount of Each Receipt this Period
25.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	75.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3509 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name A. SPENCER, DONALD, , ,		Date of Receipt M M M / D D D / Y Y Y Y Y Y 11 / 01 / 2016 Transaction ID : SA11A.462671
Mailing Address 2180 SPARROW CT		Amount of Each Receipt this Period 25.00
City SARASOTA	State FL	Zip Code 34239-3755
FEC ID number of contributing federal political committee. C		<input type="checkbox"/> Memo Item CONTRIBUTION
Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 350.00	

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name B. SPENCER, DONALD, , ,		Date of Receipt M M M / D D D / Y Y Y Y Y Y 11 / 02 / 2016 Transaction ID : SA11A.466723
Mailing Address 2180 SPARROW CT		Amount of Each Receipt this Period 25.00
City SARASOTA	State FL	Zip Code 34239-3755
FEC ID number of contributing federal political committee. C		<input type="checkbox"/> Memo Item CONTRIBUTION
Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 350.00	

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name C. SPENCER, DONALD, , ,		Date of Receipt M M M / D D D / Y Y Y Y Y Y 11 / 02 / 2016 Transaction ID : SA11A.467102
Mailing Address 2180 SPARROW CT		Amount of Each Receipt this Period 25.00
City SARASOTA	State FL	Zip Code 34239-3755
FEC ID number of contributing federal political committee. C		<input type="checkbox"/> Memo Item CONTRIBUTION
Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Aggregate Year-to-Date ▼ 350.00	

SUBTOTAL of Receipts This Page (optional).....▶	75.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3510 OF 4311
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. SPENCER, DONALD, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 2180 SPARROW CT

City SARASOTA	State FL	Zip Code 34239-3755
------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
350.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11		03		2016

Transaction ID : SA11A.468943

Amount of Each Receipt this Period
25.00

Memo Item
CONTRIBUTION

B. SPENCER, DONALD, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 2180 SPARROW CT

City SARASOTA	State FL	Zip Code 34239-3755
------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
350.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11		05		2016

Transaction ID : SA11A.478530

Amount of Each Receipt this Period
25.00

Memo Item
CONTRIBUTION

C. SPENCER, SUSAN, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 5127 SPANISH HEIGHS DRIVE

City LAS VEGAS	State NV	Zip Code 89148-1421
-------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
600.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		24		2016

Transaction ID : SA11A.445625

Amount of Each Receipt this Period
100.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	150.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3511 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
Team Ryan

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
A. SPENCER, SUSAN, , ,

Mailing Address 5127 SPANISH HEIGHTS DRIVE

City LAS VEGAS	State NV	Zip Code 89148-1421
-------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
600.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 28 / 2016

Transaction ID : SA11A.455471

Amount of Each Receipt this Period
100.00

Memo Item
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
B. SPENCER, SUSAN, , ,

Mailing Address 5127 SPANISH HEIGHTS DRIVE

City LAS VEGAS	State NV	Zip Code 89148-1421
-------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
600.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 28 / 2016

Transaction ID : SA11A.455472

Amount of Each Receipt this Period
100.00

Memo Item
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
C. SPENCE, TANCY, , ,

Mailing Address 2728 COUNTRY LANE

City BILLINGS	State MT	Zip Code 59106-1540
------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
750.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 30 / 2016

Transaction ID : SA11A.459975

Amount of Each Receipt this Period
250.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	450.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3512 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
-----------------------------	-----------------------------	-----------------------------

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NAME OF COMMITTEE (In Full)
Team Ryan

A. SPETZLER, LEITHA, J., MRS.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2 OAK FOREST COURT
 City PORTOLA VALLEY State CA Zip Code 94028-8063
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt 10 / 24 / 2016
Transaction ID : SA11A.444000
 Amount of Each Receipt this Period 200.00
 Memo Item CONTRIBUTION

B. SPIEGEL, AUDREY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2403 FOX MEADOW LANE
 City NORTHFIELD State IL Zip Code 60093-4302
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 7500.00

Date of Receipt 10 / 20 / 2016
Transaction ID : SA11A.433468
 Amount of Each Receipt this Period 5000.00
 Memo Item CONTRIBUTION

C. SPIELES, DEBRA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 649 PARKSIDE DR
 City WAUSEON State OH Zip Code 43567-9267
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) ARTIST
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 1450.00

Date of Receipt 10 / 28 / 2016
Transaction ID : SA11A.456296
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	5300.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3513 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13 <input type="checkbox"/> 11b <input type="checkbox"/> 14 <input type="checkbox"/> 11c <input type="checkbox"/> 15 <input type="checkbox"/> 12 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. SPIELES, DEBRA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 649 PARKSIDE DR
 City WAUSEON State OH Zip Code 43567-9267
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) ARTIST
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1450.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 28 / 2016
Transaction ID : SA11A.456301
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION

B. SPIELES, DEBRA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 649 PARKSIDE DR
 City WAUSEON State OH Zip Code 43567-9267
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) ARTIST
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1450.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 30 / 2016
Transaction ID : SA11A.464943
 Amount of Each Receipt this Period
 250.00
 Memo Item
 CONTRIBUTION

C. SPIES, AVIS, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 60 HEYBURN RD
 City CHADDS FORD State PA Zip Code 19317-9707
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 721.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 20 / 2016
Transaction ID : SA11A.442315
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 450.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3514 OF 4311
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
Team Ryan

A. SPIES, AVIS, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 60 HEYBURN RD

City CHADDS FORD	State PA	Zip Code 19317-9707
---------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
721.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		31		2016

Transaction ID : SA11A.457745

Amount of Each Receipt this Period
30.00

Memo Item
CONTRIBUTION

B. SPIES, AVIS, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 60 HEYBURN RD

City CHADDS FORD	State PA	Zip Code 19317-9707
---------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
721.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		31		2016

Transaction ID : SA11A.458828

Amount of Each Receipt this Period
25.00

Memo Item
CONTRIBUTION

C. SPIES, AVIS, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 60 HEYBURN RD

City CHADDS FORD	State PA	Zip Code 19317-9707
---------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
721.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		31		2016

Transaction ID : SA11A.458833

Amount of Each Receipt this Period
25.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	80.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3515 OF 4311
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. SPIKER, GREG, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 4025 VIA PICAPOSTE

City PALOS VERDES ESTAT	State CA	Zip Code 90274-1146
----------------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) KEN SPIKER AND ASSOCIATES, INC.	Occupation (for Individual) CONSULTANT
--	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
350.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		31		2016

Transaction ID : SA11A.457833

Amount of Each Receipt this Period
50.00

Memo Item
CONTRIBUTION

B. SPIKER, GREG, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 4025 VIA PICAPOSTE

City PALOS VERDES ESTAT	State CA	Zip Code 90274-1146
----------------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) KEN SPIKER AND ASSOCIATES, INC.	Occupation (for Individual) CONSULTANT
--	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
350.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11		04		2016

Transaction ID : SA11A.470367

Amount of Each Receipt this Period
50.00

Memo Item
CONTRIBUTION

C. SPIKER, GREG, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 4025 VIA PICAPOSTE

City PALOS VERDES ESTAT	State CA	Zip Code 90274-1146
----------------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) KEN SPIKER AND ASSOCIATES, INC.	Occupation (for Individual) CONSULTANT
--	---

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
350.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11		06		2016

Transaction ID : SA11A.477925

Amount of Each Receipt this Period
50.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	150.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3516 OF 4311
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. SPIKES, WARREN, W., MR.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address PO BOX 578

City HUGOTON	State KS	Zip Code 67951-0578
FEC ID number of contributing federal political committee. C		
Name of Employer (for Individual) NONE		Occupation (for Individual) RETIRED
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1100.00	

Date of Receipt
M M M / D D D / Y Y Y Y Y Y
10 / 28 / 2016
Transaction ID : SA11A.455323

Amount of Each Receipt this Period
25.00

Memo Item
CONTRIBUTION

B. SPIKES, WARREN, W., MR.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address PO BOX 578

City HUGOTON	State KS	Zip Code 67951-0578
FEC ID number of contributing federal political committee. C		
Name of Employer (for Individual) NONE		Occupation (for Individual) RETIRED
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1100.00	

Date of Receipt
M M M / D D D / Y Y Y Y Y Y
10 / 29 / 2016
Transaction ID : SA11A.460782

Amount of Each Receipt this Period
25.00

Memo Item
CONTRIBUTION

C. SPIKES, WARREN, W., MR.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address PO BOX 578

City HUGOTON	State KS	Zip Code 67951-0578
FEC ID number of contributing federal political committee. C		
Name of Employer (for Individual) NONE		Occupation (for Individual) RETIRED
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Aggregate Year-to-Date ▼ 1100.00	

Date of Receipt
M M M / D D D / Y Y Y Y Y Y
10 / 31 / 2016
Transaction ID : SA11A.463932

Amount of Each Receipt this Period
100.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	150.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3517 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. SPIKES, WARREN, W., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO BOX 578
 City HUGOTON State KS Zip Code 67951-0578
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1100.00

Date of Receipt 11 / 02 / 2016
Transaction ID : SA11A.470093
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

B. SPILLMAN, JAMES, A., LT. COL.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 805 S LEE POBOX354 PO BOX 354
 City SANTA ANNA State TX Zip Code 76878-0354
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 638.00

Date of Receipt 10 / 21 / 2016
Transaction ID : SA11A.444558
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

C. SPILLMAN, JAMES, A., LT. COL.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 805 S LEE POBOX354 PO BOX 354
 City SANTA ANNA State TX Zip Code 76878-0354
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 638.00

Date of Receipt 10 / 25 / 2016
Transaction ID : SA11A.452114
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 125.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3518 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. SPILLMAN, JAMES, A., LT. COL.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 805 S LEE POBOX354
 PO BOX 354
 City SANTA ANNA State TX Zip Code 76878-0354
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 638.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 26 / 2016
Transaction ID : SA11A.454592
 Amount of Each Receipt this Period
 50.00
 Memo Item
 CONTRIBUTION

B. SPILLMAN, JAMES, A., LT. COL.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 805 S LEE POBOX354
 PO BOX 354
 City SANTA ANNA State TX Zip Code 76878-0354
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 638.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 04 / 2016
Transaction ID : SA11A.472280
 Amount of Each Receipt this Period
 50.00
 Memo Item
 CONTRIBUTION

C. SPILLAR, KATHY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 6625 CLIFFORD DRIVE
 City CUPERTINO State CA Zip Code 95014-4530
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) N/A Occupation (for Individual) AT-HOME MOM
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 305.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 31 / 2016
Transaction ID : SA11A.463985
 Amount of Each Receipt this Period
 25.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	125.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3519 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
-----------------------------	-----------------------------	-----------------------------

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NAME OF COMMITTEE (In Full)
Team Ryan

A. SPILLAR, KATHY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 6625 CLIFFORD DRIVE
 City CUPERTINO State CA Zip Code 95014-4530
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) N/A Occupation (for Individual) AT-HOME MOM
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 305.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 04 / 2016
Transaction ID : SA11A.472396
 Amount of Each Receipt this Period
 30.00
 Memo Item
 CONTRIBUTION

B. SPINNER, SCOTT, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 515 AURORA
 City SIDNEY State OH Zip Code 45365-2912
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 225.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 01 / 2016
Transaction ID : SA11A.462616
 Amount of Each Receipt this Period
 25.00
 Memo Item
 CONTRIBUTION

C. SPITZ, RAYMOND, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1450 HIGHLAND CIRCLE
 City MYRTLE BEACH State SC Zip Code 29575-5856
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 01 / 2016
Transaction ID : SA11A.462875
 Amount of Each Receipt this Period
 50.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	105.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3520 OF 4311
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. SPIVACK, DOLORES, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 825 FIFTH AVENUE
7E

City NEW YORK State NY Zip Code 10065-7268

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1400.00

Date of Receipt
10 / 29 / 2016
Transaction ID : SA11A.460770

Amount of Each Receipt this Period
100.00

Memo Item CONTRIBUTION

B. SPIVACK, DOLORES, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 825 FIFTH AVENUE
7E

City NEW YORK State NY Zip Code 10065-7268

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1400.00

Date of Receipt
11 / 02 / 2016
Transaction ID : SA11A.465802

Amount of Each Receipt this Period
100.00

Memo Item CONTRIBUTION

C. SPIVEY, ROBERT, , MR.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1660 HOFFMAN RD
332

City GREEN BAY State WI Zip Code 54311-6299

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
600.00

Date of Receipt
10 / 29 / 2016
Transaction ID : SA11A.461140

Amount of Each Receipt this Period
100.00

Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 300.00

TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3521 OF 4311
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. SPOUSTA, LES, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address P.O. BOX 2668

City HOBBS	State NM	Zip Code 88241-2668
---------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) THE SALVATION ARMY	Occupation (for Individual) MINISTER
---	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
377.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		21		2016

Transaction ID : SA11A.444511

Amount of Each Receipt this Period
25.00

Memo Item
CONTRIBUTION

B. SPOUSTA, LES, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address P.O. BOX 2668

City HOBBS	State NM	Zip Code 88241-2668
---------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) THE SALVATION ARMY	Occupation (for Individual) MINISTER
---	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
377.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		31		2016

Transaction ID : SA11A.457849

Amount of Each Receipt this Period
25.00

Memo Item
CONTRIBUTION

C. SPOUSTA, LES, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address P.O. BOX 2668

City HOBBS	State NM	Zip Code 88241-2668
---------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) THE SALVATION ARMY	Occupation (for Individual) MINISTER
---	---

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
377.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		31		2016

Transaction ID : SA11A.457855

Amount of Each Receipt this Period
25.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	75.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3522 OF 4311
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. SPOUSTA, LES, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address P.O. BOX 2668

City HOBBS	State NM	Zip Code 88241-2668
---------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) THE SALVATION ARMY	Occupation (for Individual) MINISTER
---	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
377.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		31		2016

Transaction ID : SA11A.457873

Amount of Each Receipt this Period
25.00

Memo Item
CONTRIBUTION

B. SPOUSTA, LES, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address P.O. BOX 2668

City HOBBS	State NM	Zip Code 88241-2668
---------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) THE SALVATION ARMY	Occupation (for Individual) MINISTER
---	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
377.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11		04		2016

Transaction ID : SA11A.473043

Amount of Each Receipt this Period
25.00

Memo Item
CONTRIBUTION

C. SPOUSTA, LES, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address P.O. BOX 2668

City HOBBS	State NM	Zip Code 88241-2668
---------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) THE SALVATION ARMY	Occupation (for Individual) MINISTER
---	---

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
377.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11		07		2016

Transaction ID : SA11A.480014

Amount of Each Receipt this Period
25.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	75.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3523 OF 4311
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. SPRAGUE, ANTHONY, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 8654 S SPRINGFIELD RD

City GLOBE	State AZ	Zip Code 85501-9614
---------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
225.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	27	/	2016

Transaction ID : SA11A.456680

Amount of Each Receipt this Period
25.00

Memo Item CONTRIBUTION

B. SPRAGUE, ANTHONY, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 8654 S SPRINGFIELD RD

City GLOBE	State AZ	Zip Code 85501-9614
---------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
225.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	03	/	2016

Transaction ID : SA11A.468660

Amount of Each Receipt this Period
25.00

Memo Item CONTRIBUTION

C. SPRAKER, TERRY, , MR.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 7136 ECHO RIDGE DRIVE

City SAN JOSE	State CA	Zip Code 95120-4718
------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
410.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	07	/	2016

Transaction ID : SA11A.467832

Amount of Each Receipt this Period
200.00

Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	250.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3524 OF 4311
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. SPRINGBERG, JERRU, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5045 REVEDRO ST.
 City LAS VEGAS State NV Zip Code 89135-3203
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 325.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 26 / 2016
Transaction ID : SA11A.451057
 Amount of Each Receipt this Period
 50.00
 Memo Item
 CONTRIBUTION

B. SPRINGER, KENNETH, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 226 CIRCLE AVENUE
 City RIDGEWOOD State NJ Zip Code 07450-5207
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) CORPORATE RESOLUTIONS INC Occupation (for Individual) INVESTIGATIVE CONSULTANT
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 350.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 05 / 2016
Transaction ID : SA11A.479117
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION

C. SPROUSE, LAURIE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 11122 LAWNHAVEN
 City DALLAS State TX Zip Code 75230-3550
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) LAURIE L SPROUSE Occupation (for Individual) BIZ OWNER
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 350.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 21 / 2016
Transaction ID : SA11A.444190
 Amount of Each Receipt this Period
 25.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 175.00
TOTAL This Period (last page this line number only)..... ▶

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3525 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. SPROUSE, LAURIE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 11122 LAWNHAVEN
 City DALLAS State TX Zip Code 75230-3550
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) LAURIE L SPROUSE Occupation (for Individual) BIZ OWNER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 350.00

Date of Receipt 10 / 28 / 2016
Transaction ID : SA11A.455846
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

B. SPROUSE, LAURIE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 11122 LAWNHAVEN
 City DALLAS State TX Zip Code 75230-3550
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) LAURIE L SPROUSE Occupation (for Individual) BIZ OWNER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 350.00

Date of Receipt 11 / 04 / 2016
Transaction ID : SA11A.471820
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

C. SPURNY, ROBERT, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3834 N PASEO DEL SOL
 City MESA State AZ Zip Code 85207-1853
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) OPHTHALMOLOGIST
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 475.00

Date of Receipt 10 / 26 / 2016
Transaction ID : SA11A.454411
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶ 100.00
TOTAL This Period (last page this line number only).....▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3526 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
Team Ryan

A. SPURNY, ROBERT, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3834 N PASEO DEL SOL
 City MESA State AZ Zip Code 85207-1853
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) OPHTHALMOLOGIST
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 475.00

Date of Receipt 10 / 31 / 2016
Transaction ID : SA11A.457852
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

B. SPURNY, ROBERT, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3834 N PASEO DEL SOL
 City MESA State AZ Zip Code 85207-1853
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) OPHTHALMOLOGIST
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 475.00

Date of Receipt 10 / 31 / 2016
Transaction ID : SA11A.457853
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

C. SPURNY, ROBERT, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3834 N PASEO DEL SOL
 City MESA State AZ Zip Code 85207-1853
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) OPHTHALMOLOGIST
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 475.00

Date of Receipt 11 / 02 / 2016
Transaction ID : SA11A.470080
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 75.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3527 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. SPURNY, ROBERT, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3834 N PASEO DEL SOL
 City MESA State AZ Zip Code 85207-1853
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) OPHTHALMOLOGIST
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 475.00

Date of Receipt 11 / 02 / 2016
Transaction ID : SA11A.470082
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

B. SPURNY, ROBERT, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3834 N PASEO DEL SOL
 City MESA State AZ Zip Code 85207-1853
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) OPHTHALMOLOGIST
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 475.00

Date of Receipt 11 / 04 / 2016
Transaction ID : SA11A.471895
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

C. SPURNY, ROBERT, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3834 N PASEO DEL SOL
 City MESA State AZ Zip Code 85207-1853
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) OPHTHALMOLOGIST
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 475.00

Date of Receipt 11 / 03 / 2016
Transaction ID : SA11A.474509
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 75.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3528 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
Team Ryan

A. SPURNY, ROBERT, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3834 N PASEO DEL SOL
 City MESA State AZ Zip Code 85207-1853
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) OPHTHALMOLOGIST
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 475.00

Date of Receipt 11 / 03 / 2016
Transaction ID : SA11A.474510
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

B. ST. GERMAIN, ALBERT, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 12705 SYCAMORE AVENUE
 City GRANDVIEW State MO Zip Code 64030-2135
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 10 / 26 / 2016
Transaction ID : SA11A.449772
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

C. ST. GERMAIN, ALBERT, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 12705 SYCAMORE AVENUE
 City GRANDVIEW State MO Zip Code 64030-2135
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 10 / 26 / 2016
Transaction ID : SA11A.449774
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	75.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3529 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. ST. GERMAIN, ALBERT, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 12705 SYCAMORE AVENUE
 City GRANDVIEW State MO Zip Code 64030-2135
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 10 / 26 / 2016
Transaction ID : SA11A.449776
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

B. ST. GERMAIN, ALBERT, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 12705 SYCAMORE AVENUE
 City GRANDVIEW State MO Zip Code 64030-2135
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 10 / 26 / 2016
Transaction ID : SA11A.449815
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

C. ST. GERMAIN, ALBERT, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 12705 SYCAMORE AVENUE
 City GRANDVIEW State MO Zip Code 64030-2135
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 10 / 26 / 2016
Transaction ID : SA11A.449817
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 75.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3530 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. ST. GERMAIN, ALBERT, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 12705 SYCAMORE AVENUE
 City GRANDVIEW State MO Zip Code 64030-2135
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 26 / 2016
Transaction ID : SA11A.449819
 Amount of Each Receipt this Period
 25.00
 Memo Item
 CONTRIBUTION

B. ST. GERMAIN, ALBERT, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 12705 SYCAMORE AVENUE
 City GRANDVIEW State MO Zip Code 64030-2135
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 26 / 2016
Transaction ID : SA11A.449820
 Amount of Each Receipt this Period
 25.00
 Memo Item
 CONTRIBUTION

C. ST. GERMAIN, ALBERT, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 12705 SYCAMORE AVENUE
 City GRANDVIEW State MO Zip Code 64030-2135
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 04 / 2016
Transaction ID : SA11A.470815
 Amount of Each Receipt this Period
 25.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 75.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3531 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. ST. GEORGE, NICHOLAS, J., MR.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 971 GEORGIA AVENUE

City WINTER PARK	State FL	Zip Code 32789-2606
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	03	/	2016

Transaction ID : SA11A.465295

Amount of Each Receipt this Period
500.00

Memo Item
CONTRIBUTION

B. STAAB, ROBERT, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 6655 BOTTLEBRUSH LN

City NAPLES	State FL	Zip Code 34109-3813
----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	24	/	2016

Transaction ID : SA11A.445594

Amount of Each Receipt this Period
50.00

Memo Item
CONTRIBUTION

C. STAAB, ROBERT, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 6655 BOTTLEBRUSH LN

City NAPLES	State FL	Zip Code 34109-3813
----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	02	/	2016

Transaction ID : SA11A.467075

Amount of Each Receipt this Period
25.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	575.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3532 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
Team Ryan

A. STADIN, RICHARD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 969 PARK AVE.
 8F
 City NEW YORK State NY Zip Code 10028-0322
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 430.00

Date of Receipt
 11 / 07 / 2016
Transaction ID : SA11A.475930
 Amount of Each Receipt this Period
 250.00
 Memo Item
 CONTRIBUTION

B. STAFFORD, WILLIAM, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 609 FAIRSTEAD RD
 City MANAKIN SABOT State VA Zip Code 23103-2921
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt
 11 / 01 / 2016
Transaction ID : SA11A.462315
 Amount of Each Receipt this Period
 50.00
 Memo Item
 CONTRIBUTION

C. STAFFORD, WILLIAM, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 609 FAIRSTEAD RD
 City MANAKIN SABOT State VA Zip Code 23103-2921
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt
 11 / 01 / 2016
Transaction ID : SA11A.462316
 Amount of Each Receipt this Period
 50.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	350.00
TOTAL This Period (last page this line number only).....	

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3533 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. STAFFORD, WILLIAM, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 609 FAIRSTEAD RD

City MANAKIN SABOT	State VA	Zip Code 23103-2921
-----------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
300.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	01	/	2016

Transaction ID : SA11A.462321

Amount of Each Receipt this Period
50.00

Memo Item CONTRIBUTION

B. STAFFORD, WILLIAM, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 609 FAIRSTEAD RD

City MANAKIN SABOT	State VA	Zip Code 23103-2921
-----------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
300.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	31	/	2016

Transaction ID : SA11A.464066

Amount of Each Receipt this Period
50.00

Memo Item CONTRIBUTION

C. STAHL, DALE, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 12 DEWBERRY COURT

City FERNANDINA	State FL	Zip Code 32034-6578
--------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) INFORMATION REQUESTED PER BEST EFFORTS	Occupation (for Individual) INFORMATION REQUESTED PER BES
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Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	01	/	2016

Transaction ID : SA11A.461830

Amount of Each Receipt this Period
500.00

Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	600.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3534 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. STAHL, DAVID, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 66 EDGEWOOD RD
 City BEDMINSTER State NJ Zip Code 07921-1624
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 307.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 26 / 2016
Transaction ID : SA11A.450608
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

B. STAHL, DAVID, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 66 EDGEWOOD RD
 City BEDMINSTER State NJ Zip Code 07921-1624
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 307.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 26 / 2016
Transaction ID : SA11A.450612
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

C. STAHL, ROBERT, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 372 ELDER LANE
 City WINNETKA State IL Zip Code 60093-4268
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 509.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 25 / 2016
Transaction ID : SA11A.447998
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	100.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3535 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. STAHL, ROBERT, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 372 ELDER LANE

City WINNETKA	State IL	Zip Code 60093-4268
------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
509.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	02	/	2016

Transaction ID : SA11A.466483

Amount of Each Receipt this Period
50.00

Memo Item CONTRIBUTION

B. STAMATAKIS , NICHOLAS, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address PO BOX 741

City HAYWARD	State CA	Zip Code 94543-0741
-----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) AQUA DUCT	Occupation (for Individual) SENIOR ESTIMATOR
--	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
275.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	04	/	2016

Transaction ID : SA11A.479473

Amount of Each Receipt this Period
50.00

Memo Item CONTRIBUTION

C. STAMATAKIS , NICHOLAS, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address PO BOX 741

City HAYWARD	State CA	Zip Code 94543-0741
-----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) AQUA DUCT	Occupation (for Individual) SENIOR ESTIMATOR
--	---

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
275.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	07	/	2016

Transaction ID : SA11A.480350

Amount of Each Receipt this Period
50.00

Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	150.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3536 OF 4311
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. STAMMBERGER, ERIC, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 8859 MCCRAW DR
 City DALLAS State TX Zip Code 75209-3516
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt **10 / 21 / 2016**
Transaction ID : SA11A.444578
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

B. STAMMBERGER, ERIC, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 8859 MCCRAW DR
 City DALLAS State TX Zip Code 75209-3516
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt **11 / 04 / 2016**
Transaction ID : SA11A.472218
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

C. STAMPER, JOHN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3600 S GILPIN
 City ENGLEWOOD State CO Zip Code 80113-4011
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF-EMPLOYED Occupation (for Individual) REAL ESTATE
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt **10 / 31 / 2016**
Transaction ID : SA11A.458107
 Amount of Each Receipt this Period 1000.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 1100.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3537 OF 4311
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
Team Ryan

A. STANKOVSKY, CAROL, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1917 EMPIRE DRIVE

City WAUKESHA	State WI	Zip Code 53186-2614
------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
207.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		30		2016

Transaction ID : SA11A.459569

Amount of Each Receipt this Period
50.00

Memo Item CONTRIBUTION

B. STANLEY, BRIAN, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 5900 MOSTELLER DRIVE
62

City OKLAHOMA CITY	State OK	Zip Code 73112-4600
-----------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) THE HEFNER COMPANY, INC.	Occupation (for Individual) ATTORNEY
---	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
550.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		24		2016

Transaction ID : SA11A.445600

Amount of Each Receipt this Period
100.00

Memo Item CONTRIBUTION

C. STANLEY, BRIAN, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 5900 MOSTELLER DRIVE
62

City OKLAHOMA CITY	State OK	Zip Code 73112-4600
-----------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) THE HEFNER COMPANY, INC.	Occupation (for Individual) ATTORNEY
---	---

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
550.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11		06		2016

Transaction ID : SA11A.477273

Amount of Each Receipt this Period
25.00

Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	175.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3538 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name A. STANLEY, BRIAN, , ,			Date of Receipt M M M / D D D / Y Y Y Y Y Y 11 / 06 / 2016 Transaction ID : SA11A.477277
Mailing Address 5900 MOSTELLER DRIVE 62			Amount of Each Receipt this Period 25.00
City OKLAHOMA CITY	State OK	Zip Code 73112-4600	<input type="checkbox"/> Memo Item CONTRIBUTION
FEC ID number of contributing federal political committee. C			
Name of Employer (for Individual) THE HEFNER COMPANY, INC.	Occupation (for Individual) ATTORNEY		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 550.00		

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name B. STANLEY, RICHARD, I., ,			Date of Receipt M M M / D D D / Y Y Y Y Y Y 10 / 27 / 2016 Transaction ID : SA11A.453747
Mailing Address 5 SUGAR HILL DRAIVE			Amount of Each Receipt this Period 250.00
City NASHUA	State NH	Zip Code 03063-2819	<input type="checkbox"/> Memo Item CONTRIBUTION
FEC ID number of contributing federal political committee. C			
Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1000.00		

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name C. STANLEY, RICHARD, I., ,			Date of Receipt M M M / D D D / Y Y Y Y Y Y 11 / 04 / 2016 Transaction ID : SA11A.471059
Mailing Address 5 SUGAR HILL DRAIVE			Amount of Each Receipt this Period 250.00
City NASHUA	State NH	Zip Code 03063-2819	<input type="checkbox"/> Memo Item CONTRIBUTION
FEC ID number of contributing federal political committee. C			
Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Aggregate Year-to-Date ▼ 1000.00		

SUBTOTAL of Receipts This Page (optional).....▶	525.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3539 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. STANLEY, ROBERT, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3636 MILLER HILL WAY
 City BIRMINGHAM State AL Zip Code 35243-3701
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt 10 / 31 / 2016
Transaction ID : SA11A.458409
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

B. STANLEY, ROBERT, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3636 MILLER HILL WAY
 City BIRMINGHAM State AL Zip Code 35243-3701
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt 10 / 29 / 2016
Transaction ID : SA11A.460888
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

C. STANLEY, ROBERT, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3636 MILLER HILL WAY
 City BIRMINGHAM State AL Zip Code 35243-3701
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt 10 / 29 / 2016
Transaction ID : SA11A.460897
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	300.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3540 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
Team Ryan

A. STANOWSKI, JOHN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1621 MERION RD
 City SOUTH LAKE TAHOE State CA Zip Code 96150-4918
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt
 11 / 04 / 2016
Transaction ID : SA11A.474100
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

B. STANTON, MARTHA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 22 BURLINGTON ST.
 City LEXINGTON State MA Zip Code 02420-1702
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 350.00

Date of Receipt
 10 / 25 / 2016
Transaction ID : SA11A.448913
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

C. STANTON, MARTHA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 22 BURLINGTON ST.
 City LEXINGTON State MA Zip Code 02420-1702
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 350.00

Date of Receipt
 10 / 31 / 2016
Transaction ID : SA11A.457798
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	125.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3541 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. STANTON-HICKS, MICHAEL, , MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 11405, CLEARFIELD LANE
 City CHARDON State OH Zip Code 44024-9051
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) MICHAEL STANTON-HICKS Occupation (for Individual) CONSULTANT
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1320.00

Date of Receipt 10 / 26 / 2016
Transaction ID : SA11A.447726
 Amount of Each Receipt this Period 75.00
 Memo Item CONTRIBUTION

B. STANTON-HICKS, MICHAEL, , MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 11405, CLEARFIELD LANE
 City CHARDON State OH Zip Code 44024-9051
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) MICHAEL STANTON-HICKS Occupation (for Individual) CONSULTANT
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1320.00

Date of Receipt 10 / 24 / 2016
Transaction ID : SA11A.449299
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

C. STANTON-HICKS, MICHAEL, , MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 11405, CLEARFIELD LANE
 City CHARDON State OH Zip Code 44024-9051
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) MICHAEL STANTON-HICKS Occupation (for Individual) CONSULTANT
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1320.00

Date of Receipt 10 / 25 / 2016
Transaction ID : SA11A.451581
 Amount of Each Receipt this Period 30.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶ 155.00
TOTAL This Period (last page this line number only).....▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3542 OF 4311
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. STANTON-HICKS, MICHAEL, , MR.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 11405, CLEARFIELD LANE

City CHARDON	State OH	Zip Code 44024-9051
-----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) MICHAEL STANTON-HICKS	Occupation (for Individual) CONSULTANT
--	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1320.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		25		2016

Transaction ID : SA11A.451582

Amount of Each Receipt this Period
30.00

Memo Item CONTRIBUTION

B. STANTON-HICKS, MICHAEL, , MR.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 11405, CLEARFIELD LANE

City CHARDON	State OH	Zip Code 44024-9051
-----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) MICHAEL STANTON-HICKS	Occupation (for Individual) CONSULTANT
--	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1320.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11		03		2016

Transaction ID : SA11A.468626

Amount of Each Receipt this Period
100.00

Memo Item CONTRIBUTION

C. STANTON-HICKS, MICHAEL, , MR.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 11405, CLEARFIELD LANE

City CHARDON	State OH	Zip Code 44024-9051
-----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) MICHAEL STANTON-HICKS	Occupation (for Individual) CONSULTANT
--	---

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
1320.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11		02		2016

Transaction ID : SA11A.469907

Amount of Each Receipt this Period
30.00

Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	160.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3543 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. STANTON-HICKS, MICHAEL, , MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 11405, CLEARFIELD LANE
 City CHARDON State OH Zip Code 44024-9051
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) MICHAEL STANTON-HICKS Occupation (for Individual) CONSULTANT
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1320.00

Date of Receipt **11 / 02 / 2016**
Transaction ID : SA11A.469935
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

B. STANTON-HICKS, MICHAEL, , MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 11405, CLEARFIELD LANE
 City CHARDON State OH Zip Code 44024-9051
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) MICHAEL STANTON-HICKS Occupation (for Individual) CONSULTANT
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1320.00

Date of Receipt **11 / 04 / 2016**
Transaction ID : SA11A.471089
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

C. STANTON-HICKS, MICHAEL, , MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 11405, CLEARFIELD LANE
 City CHARDON State OH Zip Code 44024-9051
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) MICHAEL STANTON-HICKS Occupation (for Individual) CONSULTANT
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1320.00

Date of Receipt **11 / 04 / 2016**
Transaction ID : SA11A.473657
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	125.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3544 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
Team Ryan

A. STANTON-HICKS, MICHAEL, , MR.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 11405, CLEARFIELD LANE

City CHARDON	State OH	Zip Code 44024-9051
-----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) MICHAEL STANTON-HICKS	Occupation (for Individual) CONSULTANT
--	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1320.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	04	/	2016

Transaction ID : SA11A.473786

Amount of Each Receipt this Period
25.00

Memo Item
CONTRIBUTION

B. STANTON-HICKS, MICHAEL, , MR.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 11405, CLEARFIELD LANE

City CHARDON	State OH	Zip Code 44024-9051
-----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) MICHAEL STANTON-HICKS	Occupation (for Individual) CONSULTANT
--	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1320.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	04	/	2016

Transaction ID : SA11A.474071

Amount of Each Receipt this Period
50.00

Memo Item
CONTRIBUTION

C. STANTON JR., R, JOHN, ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 5843 INDIAN TRAIL

City HOUSTON	State TX	Zip Code 77057-1306
-----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
2000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	25	/	2016

Transaction ID : SA11A.448599

Amount of Each Receipt this Period
1000.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	1075.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3545 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
Team Ryan

A. STANTON JR., R, JOHN, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5843 INDIAN TRAIL
 City HOUSTON State TX Zip Code 77057-1306
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 2000.00

Date of Receipt 11 / 04 / 2016
Transaction ID : SA11A.471086
 Amount of Each Receipt this Period 1000.00
 Memo Item CONTRIBUTION

B. STAPLETON, BILL, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 421 FOREST OAKS DR
 City FAIRVIEW State TX Zip Code 75069-9442
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) TEXAKOMA OPERATING Occupation (for Individual) PRESIDENT
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 350.00

Date of Receipt 10 / 27 / 2016
Transaction ID : SA11A.454038
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

C. STAPLETON, BILL, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 421 FOREST OAKS DR
 City FAIRVIEW State TX Zip Code 75069-9442
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) TEXAKOMA OPERATING Occupation (for Individual) PRESIDENT
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 350.00

Date of Receipt 10 / 29 / 2016
Transaction ID : SA11A.460795
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	1100.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3546 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. STAPLES, DAVID, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 59-229 KANALOA DR
 City KAMUELA State HI Zip Code 96743-8510
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 407.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 24 / 2016
Transaction ID : SA11A.449482
 Amount of Each Receipt this Period
 25.00
 Memo Item
 CONTRIBUTION

B. STAPLES, DAVID, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 59-229 KANALOA DR
 City KAMUELA State HI Zip Code 96743-8510
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 407.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 31 / 2016
Transaction ID : SA11A.464354
 Amount of Each Receipt this Period
 25.00
 Memo Item
 CONTRIBUTION

C. STAPLES, DAVID, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 59-229 KANALOA DR
 City KAMUELA State HI Zip Code 96743-8510
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 407.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 31 / 2016
Transaction ID : SA11A.464363
 Amount of Each Receipt this Period
 25.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	75.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3547 OF 4311
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. STAPLES, DAVID, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 59-229 KANALOA DR

City KAMUELA	State HI	Zip Code 96743-8510
-----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
407.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	01	/	2016

Transaction ID : SA11A.467383

Amount of Each Receipt this Period
25.00

Memo Item
CONTRIBUTION

B. STAPLES, DAVID, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 59-229 KANALOA DR

City KAMUELA	State HI	Zip Code 96743-8510
-----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
407.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	07	/	2016

Transaction ID : SA11A.475003

Amount of Each Receipt this Period
25.00

Memo Item
CONTRIBUTION

C. STAPLES, DAVID, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 59-229 KANALOA DR

City KAMUELA	State HI	Zip Code 96743-8510
-----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
407.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	07	/	2016

Transaction ID : SA11A.479917

Amount of Each Receipt this Period
25.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	75.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3548 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. STARK, CHARLES, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 285 AVE. C
 7B
 City NEW YORK State NY Zip Code 10009-2301
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NYCT Occupation (for Individual) ANALYST
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 900.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 24 / 2016
Transaction ID : SA11A.445722
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION

B. STARK, CHARLES, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 285 AVE. C
 7B
 City NEW YORK State NY Zip Code 10009-2301
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NYCT Occupation (for Individual) ANALYST
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 900.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 04 / 2016
Transaction ID : SA11A.471213
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION

C. STARK, ROBERT, L., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 6120 W 65TH STREET
 City MISSION State KS Zip Code 66202-4232
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For:
 Primary General
 Other (specify)
 Aggregate Year-to-Date ▼
 250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 31 / 2016
Transaction ID : SA11A.457286
 Amount of Each Receipt this Period
 250.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	450.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3549 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. STARK, THOMAS, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO BOX 78
 City AMELIA COURT HOUSE State VA Zip Code 23002-0078
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) ATTORNEY
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 350.00

Date of Receipt 11 / 08 / 2016
Transaction ID : SA11A.468035
 Amount of Each Receipt this Period 150.00
 Memo Item CONTRIBUTION

B. STARNES, VICTOR, B., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 31492 PASEO CHRISTINA
 City SAN JUAN CAPISTRAN State CA Zip Code 92675-5521
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 10 / 27 / 2016
Transaction ID : SA11A.453398
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

C. STAROSTOVIC, ED, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2620 MARILYN DR.
 City STOUGHTON State WI Zip Code 53589-4147
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 550.00

Date of Receipt 11 / 04 / 2016
Transaction ID : SA11A.474178
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 250.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3550 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
-----------------------------	-----------------------------	-----------------------------

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NAME OF COMMITTEE (In Full)
Team Ryan

A. STARR, RAE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1848 20TH STREET
 B
 City SANTA MONICA State CA Zip Code 90404-3913
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) LOCAL AUTHORITY HEALTH INITIATIVE OF L Occupation (for Individual) STATISTICIAN
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 284.00

Date of Receipt 10 / 22 / 2016
Transaction ID : SA11A.446634
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

B. STASHIK, DAVID, H., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1507 EDITH STREET
 City BERKELEY State CA Zip Code 94703-1123
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) COACH
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 4575.00

Date of Receipt 10 / 20 / 2016
Transaction ID : SA11A.444687
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

C. STASHIK, DAVID, H., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1507 EDITH STREET
 City BERKELEY State CA Zip Code 94703-1123
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) COACH
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 4575.00

Date of Receipt 10 / 26 / 2016
Transaction ID : SA11A.454495
 Amount of Each Receipt this Period 125.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 275.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 3551 OF 4311
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. STASHIK, DAVID, H., MR.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1507 EDITH STREET

City BERKELEY	State CA	Zip Code 94703-1123
------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) SELF EMPLOYED	Occupation (for Individual) COACH
--	--------------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
4575.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		31		2016

Transaction ID : SA11A.457614

Amount of Each Receipt this Period
150.00

Memo Item
CONTRIBUTION

B. STASHIK, DAVID, H., MR.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1507 EDITH STREET

City BERKELEY	State CA	Zip Code 94703-1123
------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) SELF EMPLOYED	Occupation (for Individual) COACH
--	--------------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
4575.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11		01		2016

Transaction ID : SA11A.467309

Amount of Each Receipt this Period
50.00

Memo Item
CONTRIBUTION

C. STASHIK, DAVID, H., MR.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1507 EDITH STREET

City BERKELEY	State CA	Zip Code 94703-1123
------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) SELF EMPLOYED	Occupation (for Individual) COACH
--	--------------------------------------

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
4575.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11		02		2016

Transaction ID : SA11A.469843

Amount of Each Receipt this Period
25.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	225.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3552 OF 4311
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. STASHIK, DAVID, H., MR.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1507 EDITH STREET

City BERKELEY	State CA	Zip Code 94703-1123
------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) SELF EMPLOYED	Occupation (for Individual) COACH
--	--------------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
4575.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11		07		2016

Transaction ID : SA11A.474953

Amount of Each Receipt this Period
100.00

Memo Item
CONTRIBUTION

B. STASHIK, DAVID, H., MR.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1507 EDITH STREET

City BERKELEY	State CA	Zip Code 94703-1123
------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) SELF EMPLOYED	Occupation (for Individual) COACH
--	--------------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
4575.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11		04		2016

Transaction ID : SA11A.479460

Amount of Each Receipt this Period
100.00

Memo Item
CONTRIBUTION

C. STAUFFER, EDGAR, L., MR.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 3026 BOWERS MILL ROAD

City PENNSBURG	State PA	Zip Code 18073-1904
-------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
650.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		24		2016

Transaction ID : SA11A.449312

Amount of Each Receipt this Period
100.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	300.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3553 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name A. STAUFFER, EDGAR, L., MR.,			Date of Receipt M M M / D D D / Y Y Y Y Y Y 10 / 24 / 2016
Mailing Address 3026 BOWERS MILL ROAD			Transaction ID : SA11A.449317
City PENNSBURG	State PA	Zip Code 18073-1904	Amount of Each Receipt this Period 100.00
FEC ID number of contributing federal political committee. C			<input type="checkbox"/> Memo Item CONTRIBUTION
Name of Employer (for Individual) NONE		Occupation (for Individual) RETIRED	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 650.00		

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name B. STAUFFER, EDGAR, L., MR.,			Date of Receipt M M M / D D D / Y Y Y Y Y Y 10 / 24 / 2016
Mailing Address 3026 BOWERS MILL ROAD			Transaction ID : SA11A.449320
City PENNSBURG	State PA	Zip Code 18073-1904	Amount of Each Receipt this Period 100.00
FEC ID number of contributing federal political committee. C			<input type="checkbox"/> Memo Item CONTRIBUTION
Name of Employer (for Individual) NONE		Occupation (for Individual) RETIRED	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 650.00		

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name C. STEAGALL, CRAIG, , ,			Date of Receipt M M M / D D D / Y Y Y Y Y Y 10 / 21 / 2016
Mailing Address 6606 CAPE COVE CIRCLE			Transaction ID : SA11A.443608
City CRYSTAL LAKE	State IL	Zip Code 60012-3143	Amount of Each Receipt this Period 250.00
FEC ID number of contributing federal political committee. C			<input type="checkbox"/> Memo Item CONTRIBUTION
Name of Employer (for Individual) INFORMATION REQUESTED PER BEST EFFORTS		Occupation (for Individual) INFORMATION REQUESTED PER BES	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Aggregate Year-to-Date ▼ 250.00		

SUBTOTAL of Receipts This Page (optional).....	450.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3554 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. STEBBINS, JERRY, A., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 376 LYONS ROAD
 City DECATUR State AL Zip Code 35603-5034
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 940.00

Date of Receipt 11 / 02 / 2016
Transaction ID : SA11A.466673
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

B. STEBBINS, JERRY, A., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 376 LYONS ROAD
 City DECATUR State AL Zip Code 35603-5034
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 940.00

Date of Receipt 11 / 06 / 2016
Transaction ID : SA11A.480892
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

C. STECKEL, ERIC, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 182 WINTHROP LN
 City LAKE FOREST State IL Zip Code 60045-1373
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) HIREGENICS Occupation (for Individual) CHEMIST
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 1631.00

Date of Receipt 10 / 21 / 2016
Transaction ID : SA11A.444538
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	150.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3555 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. STECKEL, ERIC, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 182 WINTHROP LN
 City LAKE FOREST State IL Zip Code 60045-1373
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) HIREGENICS Occupation (for Individual) CHEMIST
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1631.00

Date of Receipt 11 / 04 / 2016
Transaction ID : SA11A.472382
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

B. STECKEL, ERIC, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 182 WINTHROP LN
 City LAKE FOREST State IL Zip Code 60045-1373
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) HIREGENICS Occupation (for Individual) CHEMIST
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1631.00

Date of Receipt 11 / 04 / 2016
Transaction ID : SA11A.472552
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

C. STECKLEY, RICHARD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5300 BREAKERS WAY
 City CARMEL State IN Zip Code 46033-9130
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 10 / 26 / 2016
Transaction ID : SA11A.451247
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	400.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3556 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
Team Ryan

A. STECKLEY, RICHARD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5300 BREAKERS WAY
 City CARMEL State IN Zip Code 46033-9130
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt
 11 / 05 / 2016
Transaction ID : SA11A.479281
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION

B. STECKLEY, RICHARD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5300 BREAKERS WAY
 City CARMEL State IN Zip Code 46033-9130
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt
 11 / 05 / 2016
Transaction ID : SA11A.479282
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION

C. STEELE, GEORGE, W., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 304 INDEPENDENCE CREEK LN.
 City GEORGETOWN State TX Zip Code 78633-5314
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 225.00

Date of Receipt
 10 / 25 / 2016
Transaction ID : SA11A.448964
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	300.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3557 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. STEFFEN, MARK, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 798 ASHFIELD COURT
 City EDGEWOOD State KY Zip Code 41017-9680
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) AVION Occupation (for Individual) SALES
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 925.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 25 / 2016
Transaction ID : SA11A.448895
 Amount of Each Receipt this Period
 100.00
 Memo Item
CONTRIBUTION

B. STEFFEN, MARK, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 798 ASHFIELD COURT
 City EDGEWOOD State KY Zip Code 41017-9680
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) AVION Occupation (for Individual) SALES
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 925.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 04 / 2016
Transaction ID : SA11A.471119
 Amount of Each Receipt this Period
 100.00
 Memo Item
CONTRIBUTION

C. STEFFEN, MARK, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 798 ASHFIELD COURT
 City EDGEWOOD State KY Zip Code 41017-9680
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) AVION Occupation (for Individual) SALES
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 925.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 06 / 2016
Transaction ID : SA11A.477299
 Amount of Each Receipt this Period
 50.00
 Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	250.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3558 OF 4311
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. STEFFEN, MARK, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 798 ASHFIELD COURT

City EDGEWOOD	State KY	Zip Code 41017-9680
------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) AVION	Occupation (for Individual) SALES
--	--------------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
925.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	06	/	2016

Transaction ID : SA11A.477301

Amount of Each Receipt this Period
50.00

Memo Item
CONTRIBUTION

B. STEFFES, RENEE, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 15908 KING ST.

City OVERLAND PARK	State KS	Zip Code 66221-6943
-----------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
332.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	20	/	2016

Transaction ID : SA11A.444708

Amount of Each Receipt this Period
50.00

Memo Item
CONTRIBUTION

C. STEFFES, RENEE, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 15908 KING ST.

City OVERLAND PARK	State KS	Zip Code 66221-6943
-----------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
332.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	07	/	2016

Transaction ID : SA11A.480261

Amount of Each Receipt this Period
50.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	150.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3559 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. STEGMAN, ROBBIE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 875 NICHOLS CIRCLE
 City FOLSOM State CA Zip Code 95630-9551
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 275.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 04 / 2016
Transaction ID : SA11A.473917
 Amount of Each Receipt this Period
 25.00
 Memo Item
 CONTRIBUTION

B. STEIN, HELEN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2937 NW 24TH TER
 City BOCA RATON State FL Zip Code 33431-6203
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 298.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 27 / 2016
Transaction ID : SA11A.456610
 Amount of Each Receipt this Period
 25.00
 Memo Item
 CONTRIBUTION

C. STEIN, HELEN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2937 NW 24TH TER
 City BOCA RATON State FL Zip Code 33431-6203
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 298.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 27 / 2016
Transaction ID : SA11A.456611
 Amount of Each Receipt this Period
 25.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	75.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3560 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. STEIN, HELEN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2937 NW 24TH TER
 City BOCA RATON State FL Zip Code 33431-6203
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 298.00

Date of Receipt
 11 / 02 / 2016
Transaction ID : SA11A.465832
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

B. STEIN, HELEN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2937 NW 24TH TER
 City BOCA RATON State FL Zip Code 33431-6203
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 298.00

Date of Receipt
 11 / 07 / 2016
Transaction ID : SA11A.480405
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

C. STEIN, HELEN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2937 NW 24TH TER
 City BOCA RATON State FL Zip Code 33431-6203
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 298.00

Date of Receipt
 11 / 07 / 2016
Transaction ID : SA11A.480429
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	75.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3561 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. STEIN, HELEN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2937 NW 24TH TER
 City BOCA RATON State FL Zip Code 33431-6203
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 298.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 06 / 2016
Transaction ID : SA11A.480875
 Amount of Each Receipt this Period
 25.00
 Memo Item
 CONTRIBUTION

B. STEINKAMP, JEFFREY, , MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO BOX 98
 City ROCHESTER State VT Zip Code 05767-0098
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1501.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 31 / 2016
Transaction ID : SA11A.457246
 Amount of Each Receipt this Period
 500.00
 Memo Item
 CONTRIBUTION

C. STEINBERGER, NAOMI, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 28 GRANDVIEW TERRACE
 City TENAFLY State NJ Zip Code 07670-1120
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 285.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 04 / 2016
Transaction ID : SA11A.470651
 Amount of Each Receipt this Period
 30.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	555.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3562 OF 4311
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. STEINBERGER, NAOMI, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 28 GRANDVIEW TERRACE

City TENAFLY State NJ Zip Code 07670-1120

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 285.00

Date of Receipt 11 / 04 / 2016
Transaction ID : SA11A.470653

Amount of Each Receipt this Period 30.00

Memo Item CONTRIBUTION

B. STEIN, RICHARD, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 3600 RICHMOND STREET

City JACKSONVILLE State FL Zip Code 32205-9424

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) FLETCHER/STEIN Occupation (for Individual) INSURANCE/CEO

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt 11 / 04 / 2016
Transaction ID : SA11A.467451

Amount of Each Receipt this Period 500.00

Memo Item CONTRIBUTION

C. STEINER, ROBERT, G., MR.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 55 I STREET

City CHULA VISTA State CA Zip Code 91910-4905

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED

Receipt For: Primary General Other (specify)

Aggregate Year-to-Date ▼ 1170.00

Date of Receipt 10 / 26 / 2016
Transaction ID : SA11A.447732

Amount of Each Receipt this Period 35.00

Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 565.00

TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3564 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. STEINER, WILLIAM, , MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 104 SHADOWCREEK CT
 City SIMPSONVILLE State SC Zip Code 29681-4542
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 10 / 25 / 2016
Transaction ID : SA11A.448624
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

B. STELMACH, PATRICIA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 715 W 100TH ST
 City KANSAS CITY State MO Zip Code 64114-4065
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 350.00

Date of Receipt 10 / 29 / 2016
Transaction ID : SA11A.461143
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

C. STELMACH, PATRICIA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 715 W 100TH ST
 City KANSAS CITY State MO Zip Code 64114-4065
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 350.00

Date of Receipt 11 / 04 / 2016
Transaction ID : SA11A.471047
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	200.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3565 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. STEPHEN, JIM, C., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 50 S. DERBYSHIRE LANE
 City ARLINGTON HEIGHTS State IL Zip Code 60004-6302
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) WEBER STEPHEN PRO. LLC Occupation (for Individual) BUSINESSMAN
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 600.00

Date of Receipt 10 / 28 / 2016
Transaction ID : SA11A.455603
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

B. STEPHENS, RICK, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 307 E AVE E
 City ALPINE State TX Zip Code 79830-4729
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt 11 / 06 / 2016
Transaction ID : SA11A.477519
 Amount of Each Receipt this Period 1000.00
 Memo Item CONTRIBUTION

C. STEPHENSON, SCOTT, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 101 WARREN STREET 2260
 City NEW YORK State NY Zip Code 10007-1366
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) VERISK ANALYTICS Occupation (for Individual) EXECUTIVE
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 2700.00

Date of Receipt 10 / 23 / 2016
Transaction ID : SA11A.446332
 Amount of Each Receipt this Period 2700.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	3800.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3566 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
Team Ryan

A. STEPPE, STEPHEN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 54 SERRANO
 City ATHERTON State CA Zip Code 94027-3934
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) STOCKBRIDGE Occupation (for Individual) REAL ESTATE
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 7750.00

Date of Receipt 10 / 20 / 2016
Transaction ID : SA11A.442202
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

B. STEPPE, STEPHEN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 54 SERRANO
 City ATHERTON State CA Zip Code 94027-3934
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) STOCKBRIDGE Occupation (for Individual) REAL ESTATE
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 7750.00

Date of Receipt 10 / 28 / 2016
Transaction ID : SA11A.456056
 Amount of Each Receipt this Period 1000.00
 Memo Item CONTRIBUTION

C. STEPPE, STEPHEN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 54 SERRANO
 City ATHERTON State CA Zip Code 94027-3934
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) STOCKBRIDGE Occupation (for Individual) REAL ESTATE
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 7750.00

Date of Receipt 11 / 04 / 2016
Transaction ID : SA11A.473365
 Amount of Each Receipt this Period 1000.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	2250.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3567 OF 4311
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. STEPPE, STEPHEN, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 54 SERRANO

City ATHERTON	State CA	Zip Code 94027-3934
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) STOCKBRIDGE	Occupation (for Individual) REAL ESTATE
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
7750.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
11		04		2016

Transaction ID : SA11A.473594

Amount of Each Receipt this Period
250.00

Memo Item
CONTRIBUTION

B. STERN, ADAM, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 23611 MALIBU COLONY RD

City MALIBU	State CA	Zip Code 90265-6628
----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) INFORMATION REQUESTED PER BEST EFFORTS	Occupation (for Individual) INFORMATION REQUESTED PER BE
---	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
25000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
11		01		2016

Transaction ID : SA11A.461882

Amount of Each Receipt this Period
25000.00

Memo Item
CONTRIBUTION

C. STERN, EVA, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 23700 MALIBU COLONY RD

City MALIBU	State CA	Zip Code 90265-6629
----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) SELF EMPLOYED	Occupation (for Individual) CLINICAL SOCIAL WORKER
--	---

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
37600.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
11		03		2016

Transaction ID : SA11A.465238

Amount of Each Receipt this Period
18800.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	44050.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3568 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. STETTbacher, LAURA, W., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 14318 APPLE TREE
 City HOUSTON State TX Zip Code 77079-6602
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Occupation (for Individual)
 INFORMATION REQUESTED PER BEST EFFORTS INFORMATION REQUESTED PER BE
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 10 / 25 / 2016
Transaction ID : SA11A.447523
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

B. STETZER, MARYANNE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 767 MOUNT PLEASANT RD.
 City BRYN MAWR State PA Zip Code 19010-1941
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Occupation (for Individual)
 NONE RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 513.00

Date of Receipt 10 / 27 / 2016
Transaction ID : SA11A.457106
 Amount of Each Receipt this Period 165.00
 Memo Item CONTRIBUTION

C. STETZER, MARYANNE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 767 MOUNT PLEASANT RD.
 City BRYN MAWR State PA Zip Code 19010-1941
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Occupation (for Individual)
 NONE RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 513.00

Date of Receipt 10 / 30 / 2016
Transaction ID : SA11A.459613
 Amount of Each Receipt this Period 248.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	513.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3569 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
Team Ryan

A. STETZER, MARYANNE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 767 MOUNT PLEASANT RD.
 City BRYN MAWR State PA Zip Code 19010-1941
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 513.00

Date of Receipt 11 / 07 / 2016
Transaction ID : SA11A.480549
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

B. STEVENS, ANN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO BOX 470425
 City FORT WORTH State TX Zip Code 76147-0425
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) WBW AGENT INC Occupation (for Individual) PRESIDENT
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 750.00

Date of Receipt 10 / 28 / 2016
Transaction ID : SA11A.455887
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

C. STEVENS, ANN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO BOX 470425
 City FORT WORTH State TX Zip Code 76147-0425
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) WBW AGENT INC Occupation (for Individual) PRESIDENT
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 750.00

Date of Receipt 10 / 28 / 2016
Transaction ID : SA11A.455891
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	300.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3570 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. STEVENS, ANN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO BOX 470425

City FORT WORTH	State TX	Zip Code 76147-0425
--------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) WBW AGENT INC	Occupation (for Individual) PRESIDENT
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
750.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 28 / 2016
Transaction ID : SA11A.455892

Amount of Each Receipt this Period
100.00

Memo Item CONTRIBUTION

B. STEVENSON, DAVID, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 415 WESTCLIFFE WAY

City GREENVILLE	State SC	Zip Code 29611-3041
--------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
300.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 30 / 2016
Transaction ID : SA11A.460212

Amount of Each Receipt this Period
100.00

Memo Item CONTRIBUTION

C. STEVENSON, DAVID, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 415 WESTCLIFFE WAY

City GREENVILLE	State SC	Zip Code 29611-3041
--------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
300.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 04 / 2016
Transaction ID : SA11A.470902

Amount of Each Receipt this Period
100.00

Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	300.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3571 OF 4311
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. STEVENS, GLORIA, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 3091 HIGHLANDS BRIDGE ROAD

City SARASOTA	State FL	Zip Code 34235-6842
------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	01	/	2016

Transaction ID : SA11A.461658

Amount of Each Receipt this Period
1000.00

Memo Item CONTRIBUTION

B. STEVENS, JAYSON, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1160 RIVER BEND RD

City RICHMOND	State VA	Zip Code 23231-8047
------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
225.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	28	/	2016

Transaction ID : SA11A.456085

Amount of Each Receipt this Period
45.00

Memo Item CONTRIBUTION

C. STEVENS, JAYSON, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1160 RIVER BEND RD

City RICHMOND	State VA	Zip Code 23231-8047
------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
225.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	04	/	2016

Transaction ID : SA11A.471968

Amount of Each Receipt this Period
45.00

Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	1090.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3572 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. STEVENS, JOANN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1440 TEMPLE STREET
 City CLEARWATER State FL Zip Code 33756-2355
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) INFORMATION REQUESTED PER BEST EFFORTS Occupation (for Individual) INFORMATION REQUESTED PER BE
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 300.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 04 / 2016
Transaction ID : SA11A.467667
 Amount of Each Receipt this Period
 200.00
 Memo Item
 CONTRIBUTION

B. STEVENS, LAURA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 66 DWIGHT ROAD
 City LONGMEADOW State MA Zip Code 01106-1889
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) KELLER WILLIAMS REALTY Occupation (for Individual) BROKER
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 650.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 28 / 2016
Transaction ID : SA11A.455760
 Amount of Each Receipt this Period
 50.00
 Memo Item
 CONTRIBUTION

C. STEVENS, LAURA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 66 DWIGHT ROAD
 City LONGMEADOW State MA Zip Code 01106-1889
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) KELLER WILLIAMS REALTY Occupation (for Individual) BROKER
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 650.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 28 / 2016
Transaction ID : SA11A.455762
 Amount of Each Receipt this Period
 50.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	300.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3573 OF 4311
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. STEVENS, MARC, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 219 CAMP CREEK LN

City STATE ROAD	State NC	Zip Code 28676-9092
--------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) HUGH CHATHAM	Occupation (for Individual) ORTHOPAEDICS
---	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
355.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		25		2016

Transaction ID : SA11A.451655

Amount of Each Receipt this Period
30.00

Memo Item CONTRIBUTION

B. STEVENS, MARC, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 219 CAMP CREEK LN

City STATE ROAD	State NC	Zip Code 28676-9092
--------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) HUGH CHATHAM	Occupation (for Individual) ORTHOPAEDICS
---	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
355.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		27		2016

Transaction ID : SA11A.454097

Amount of Each Receipt this Period
25.00

Memo Item CONTRIBUTION

C. STEVENS, RONALD, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 6157 CARPINTERO AVE

City LAKEWOOD	State CA	Zip Code 90713-1105
------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11		01		2016

Transaction ID : SA11A.462596

Amount of Each Receipt this Period
500.00

Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	555.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3574 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. STEWART, ALFRED, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 145 SHANNON LANE
 City WRIGHTSVILLE State PA Zip Code 17406-8141
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt **10 / 26 / 2016**
Transaction ID : SA11A.450011
 Amount of Each Receipt this Period 500.00
 Memo Item CONTRIBUTION

B. STEWART, DAVID, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address RR 4 BOX 646
 City MARBLE HILL State MO Zip Code 63764-9418
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) WRITER/SPEAKER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1700.00

Date of Receipt **11 / 04 / 2016**
Transaction ID : SA11A.471928
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

C. STEWART, JOE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 11700 OLD GEORGETOWN ROAD 1601
 City NORTH BETHESDA State MD Zip Code 20852-8603
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) AUROTECH, INC. Occupation (for Individual) ENTERPRISE ARCHITECT
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 225.00

Date of Receipt **10 / 25 / 2016**
Transaction ID : SA11A.448946
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	775.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3575 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. STEWART, SCOTT, D., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 53 WHITTIER ROAD
 City WELLESLEY HILLS State MA Zip Code 02481-5235
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) CORNELL Occupation (for Individual) PROFESSOR
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt 10 / 31 / 2016
Transaction ID : SA11A.457244
 Amount of Each Receipt this Period 1000.00
 Memo Item CONTRIBUTION

B. STEWART, VIRGINIA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3201 WESTCREEK CIRCLE
 City COLUMBIA State MO Zip Code 65203-0903
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 225.00

Date of Receipt 10 / 29 / 2016
Transaction ID : SA11A.461050
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

C. STEWART, VIRGINIA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3201 WESTCREEK CIRCLE
 City COLUMBIA State MO Zip Code 65203-0903
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 225.00

Date of Receipt 11 / 04 / 2016
Transaction ID : SA11A.472267
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	1100.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3576 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. STEWART, WILLIAM, M., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 11000 BELL RD.
 City JOHNS CREEK State GA Zip Code 30097-1910
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) STEWART BROS., INC. Occupation (for Individual) PAVING CONTRACTOR
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 255.00

Date of Receipt **10 / 31 / 2016**
Transaction ID : SA11A.458589
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

B. STEWART, WILLIAM, M., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 11000 BELL RD.
 City JOHNS CREEK State GA Zip Code 30097-1910
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) STEWART BROS., INC. Occupation (for Individual) PAVING CONTRACTOR
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 255.00

Date of Receipt **11 / 07 / 2016**
Transaction ID : SA11A.475313
 Amount of Each Receipt this Period 10.00
 Memo Item CONTRIBUTION

C. STICKLER, DAVID, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 32 BOWLING GREEN LANE
 City BELFAST State ME Zip Code 04915-7439
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 650.00

Date of Receipt **10 / 21 / 2016**
Transaction ID : SA11A.444411
 Amount of Each Receipt this Period 200.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 235.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3577 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
Team Ryan

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name A. STICKLER, DAVID, , ,		Date of Receipt M M M / D D D / Y Y Y Y Y Y 10 / 26 / 2016
Mailing Address 32 BOWLING GREEN LANE		Transaction ID : SA11A.450448
City BELFAST	State ME	Zip Code 04915-7439
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 200.00
Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED	<input type="checkbox"/> Memo Item CONTRIBUTION
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 650.00	

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name B. STICKLER, DAVID, , ,		Date of Receipt M M M / D D D / Y Y Y Y Y Y 11 / 02 / 2016
Mailing Address 32 BOWLING GREEN LANE		Transaction ID : SA11A.466485
City BELFAST	State ME	Zip Code 04915-7439
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 100.00
Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED	<input type="checkbox"/> Memo Item CONTRIBUTION
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 650.00	

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name C. STICKLER, DAVID, , ,		Date of Receipt M M M / D D D / Y Y Y Y Y Y 11 / 06 / 2016
Mailing Address 32 BOWLING GREEN LANE		Transaction ID : SA11A.477122
City BELFAST	State ME	Zip Code 04915-7439
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 100.00
Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED	<input type="checkbox"/> Memo Item CONTRIBUTION
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Aggregate Year-to-Date ▼ 650.00	

SUBTOTAL of Receipts This Page (optional).....▶	400.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3578 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
Team Ryan

A. STICKLER, DAVID, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 32 BOWLING GREEN LANE
 City BELFAST State ME Zip Code 04915-7439
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 650.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 07 / 2016
Transaction ID : SA11A.480366
 Amount of Each Receipt this Period
 50.00
 Memo Item
 CONTRIBUTION

B. STIER, CHARLES, H., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1051 EARLMONT DR
 City AIKEN State SC Zip Code 29803-8701
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 26 / 2016
Transaction ID : SA11A.454666
 Amount of Each Receipt this Period
 50.00
 Memo Item
 CONTRIBUTION

C. STIER, CHARLES, H., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1051 EARLMONT DR
 City AIKEN State SC Zip Code 29803-8701
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 28 / 2016
Transaction ID : SA11A.456125
 Amount of Each Receipt this Period
 50.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	150.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3579 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. STIER, CHARLES, H., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1051 EARLMONT DR
 City AIKEN State SC Zip Code 29803-8701
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt 11 / 04 / 2016
Transaction ID : SA11A.473878
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

B. STILLI, MARCO, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1435 CHAPIN ST NW 301
 City WASHINGTON State DC Zip Code 20009-8540
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) REAL ESTATE
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 2000.00

Date of Receipt 10 / 28 / 2016
Transaction ID : SA11A.456148
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

C. STILLI, MARCO, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1435 CHAPIN ST NW 301
 City WASHINGTON State DC Zip Code 20009-8540
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) REAL ESTATE
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 2000.00

Date of Receipt 11 / 04 / 2016
Transaction ID : SA11A.473721
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	550.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3580 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. STILWELL, DAN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 14 OXFORD STREET
 City WINCHESTER State MA Zip Code 01890-3537
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 21 / 2016
Transaction ID : SA11A.444640
 Amount of Each Receipt this Period
 250.00
 Memo Item
 CONTRIBUTION

B. STINSON, DOUGLAS, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1775 KELLY MILL ROAD
 City CUMMING State GA Zip Code 30040-7199
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) AS-TECH ENGINEERING CO. Occupation (for Individual) ENGINEER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 600.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 04 / 2016
Transaction ID : SA11A.473559
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION

C. STIRNAMAN, BENTO, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 588 GABRIEL AVE
 City YUBA CITY State CA Zip Code 95993-8625
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) STIRNAMAN INSURANCE Occupation (for Individual) BROKER
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 29 / 2016
Transaction ID : SA11A.461166
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	450.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3581 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. STIRNAMAN, BENTO, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 588 GABRIEL AVE

City YUBA CITY	State CA	Zip Code 95993-8625
-------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) STIRNAMAN INSURANCE	Occupation (for Individual) BROKER
--	---------------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
400.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	04	/	2016

Transaction ID : SA11A.470675

Amount of Each Receipt this Period
100.00

Memo Item
CONTRIBUTION

B. STITZER, MARK, , MR.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 290 ROUND HILL RD

City GREENWICH	State CT	Zip Code 06831-3360
-------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) HAMLIN CAPITAL MANAGEMENT	Occupation (for Individual) CEO
--	------------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
50000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	28	/	2016

Transaction ID : SA11A.452489

Amount of Each Receipt this Period
50000.00

Memo Item
CONTRIBUTION

C. STOCKING, CLAIRE, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 4951 GULF SHORE BOULEVARD N, PH 30

City NAPLES	State FL	Zip Code 34103-2696
----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
350.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	02	/	2016

Transaction ID : SA11A.465142

Amount of Each Receipt this Period
250.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	50350.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3582 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13 <input type="checkbox"/> 11b <input type="checkbox"/> 14 <input type="checkbox"/> 11c <input type="checkbox"/> 15 <input type="checkbox"/> 12 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. STOCK, GERALD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4870 SNOW HILL RD
 City SALISBURY State MD Zip Code 21804-1944
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 270.00

Date of Receipt 10 / 29 / 2016
Transaction ID : SA11A.460486
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

B. STOCK, GERALD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4870 SNOW HILL RD
 City SALISBURY State MD Zip Code 21804-1944
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 270.00

Date of Receipt 10 / 29 / 2016
Transaction ID : SA11A.460487
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

C. STOCKWELL, STEPHEN, E., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 717 HEATHER CT
 City GRAFTON State WI Zip Code 53024-2710
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 375.00

Date of Receipt 10 / 20 / 2016
Transaction ID : SA11A.442022
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	75.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3583 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. STOCKWELL, STEPHEN, E., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 717 HEATHER CT
 City GRAFTON State WI Zip Code 53024-2710
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 375.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 21 / 2016
Transaction ID : SA11A.444090
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

B. STOCKWELL, STEPHEN, E., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 717 HEATHER CT
 City GRAFTON State WI Zip Code 53024-2710
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 375.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 04 / 2016
Transaction ID : SA11A.472736
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

C. STOCKWELL, STEPHEN, E., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 717 HEATHER CT
 City GRAFTON State WI Zip Code 53024-2710
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 375.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 04 / 2016
Transaction ID : SA11A.473006
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	100.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3584 OF 4311
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. STOCKWELL, WILLIAM, B., MR.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 892 LAFAYETTE DRIVE

City MOUNT LAUREL	State NJ	Zip Code 08054-3241
----------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) STOCKWELL ELASTOMERICS, INC	Occupation (for Individual) STOCKWELL ELASTOMERICS, INC
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
800.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	24	/	2016

Transaction ID : SA11A.443693

Amount of Each Receipt this Period
500.00

Memo Item
CONTRIBUTION

B. STOCKWELL, WILLIAM, B., MR.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 892 LAFAYETTE DRIVE

City MOUNT LAUREL	State NJ	Zip Code 08054-3241
----------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) STOCKWELL ELASTOMERICS, INC	Occupation (for Individual) STOCKWELL ELASTOMERICS, INC
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
800.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	06	/	2016

Transaction ID : SA11A.478271

Amount of Each Receipt this Period
250.00

Memo Item
CONTRIBUTION

C. STOFFEL, PAUL, T., ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 5949 SHERRY LANE STE 1465

City DALLAS	State TX	Zip Code 75225-8010
----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) SELF EMPLOYED	Occupation (for Individual) INVESTMENTS
--	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
40000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	24	/	2016

Transaction ID : SA11A.443497

Amount of Each Receipt this Period
30000.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	30750.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3585 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. STOKES, ANNE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4014 DUPLIN DR
 City GREENSBORO State NC Zip Code 27407-7763
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) NONE
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 350.00

Date of Receipt 11 / 04 / 2016
Transaction ID : SA11A.472751
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

B. STOLLER, HERBERT, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 100 HARBOR POINTE DRIVE
 City EAST PEORIA State IL Zip Code 61611-5800
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 10 / 21 / 2016
Transaction ID : SA11A.444266
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

C. STOLTZ, JOHN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2310 GREENWOOD AVE
 City WILMETTE State IL Zip Code 60091-1317
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NI Occupation (for Individual) SALES
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 10 / 28 / 2016
Transaction ID : SA11A.455796
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	250.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3586 OF 4311
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. STOLTZ, JOHN, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 2310 GREENWOOD AVE

City WILMETTE State IL Zip Code 60091-1317

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NI Occupation (for Individual) SALES

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt 10 / 28 / 2016

Transaction ID : SA11A.455809

Amount of Each Receipt this Period 100.00

Memo Item CONTRIBUTION

B. STONE, ARTHUR, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 15473 NW BODIFORD RD.

City ALTHA State FL Zip Code 32421-2801

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) ANESTHESIOLOGIST

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 370.00

Date of Receipt 10 / 24 / 2016

Transaction ID : SA11A.449518

Amount of Each Receipt this Period 250.00

Memo Item CONTRIBUTION

C. STONE, BENNETT, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 7610 MICHELLE WAY

City COTTONWOOD HEIGHTS State UT Zip Code 84093-6116

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 305.00

Date of Receipt 11 / 07 / 2016

Transaction ID : SA11A.476069

Amount of Each Receipt this Period 50.00

Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	400.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3587 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. STONE, BENNETT, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 7610 MICHELLE WAY
 City COTTONWOOD HEIGHTS State UT Zip Code 84093-6116
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 305.00

Date of Receipt 11 / 07 / 2016
Transaction ID : SA11A.476103
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

B. STONE, BENNETT, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 7610 MICHELLE WAY
 City COTTONWOOD HEIGHTS State UT Zip Code 84093-6116
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 305.00

Date of Receipt 11 / 07 / 2016
Transaction ID : SA11A.476108
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

C. STONE, BENNETT, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 7610 MICHELLE WAY
 City COTTONWOOD HEIGHTS State UT Zip Code 84093-6116
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 305.00

Date of Receipt 11 / 05 / 2016
Transaction ID : SA11A.478555
 Amount of Each Receipt this Period 30.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶ 130.00
TOTAL This Period (last page this line number only).....▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3588 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. STONE , CHARLES, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3215 FERNBROOK LANE N
 City PLYMOUTH State MN Zip Code 55447-5325
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) ESCO Occupation (for Individual) AUDIOLOGIST
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 10 / 31 / 2016
Transaction ID : SA11A.459071
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

B. STONE, LLOYD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 897 SPYGLASS COVE
 City COPPELL State TX Zip Code 75019-5426
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) LLOYD STONE Occupation (for Individual) COMMERCIAL BANKING
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 11 / 01 / 2016
Transaction ID : SA11A.462327
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

C. STONE, LLOYD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 897 SPYGLASS COVE
 City COPPELL State TX Zip Code 75019-5426
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) LLOYD STONE Occupation (for Individual) COMMERCIAL BANKING
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 11 / 04 / 2016
Transaction ID : SA11A.479623
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	200.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3589 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. STONE, LLOYD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 897 SPYGLASS COVE
 City COPPELL State TX Zip Code 75019-5426
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) LLOYD STONE Occupation (for Individual) COMMERCIAL BANKING
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 11 / 04 / 2016
Transaction ID : SA11A.479624
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

B. STONE, LLOYD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 897 SPYGLASS COVE
 City COPPELL State TX Zip Code 75019-5426
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) LLOYD STONE Occupation (for Individual) COMMERCIAL BANKING
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 11 / 07 / 2016
Transaction ID : SA11A.480312
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

C. STONE, LLOYD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 897 SPYGLASS COVE
 City COPPELL State TX Zip Code 75019-5426
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) LLOYD STONE Occupation (for Individual) COMMERCIAL BANKING
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 11 / 07 / 2016
Transaction ID : SA11A.480314
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	150.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3590 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name A. STONE, MARTHA, , ,		Date of Receipt M M M / D D D / Y Y Y Y Y Y 10 / 22 / 2016
Mailing Address 307 BRIDGE STREET		Transaction ID : SA11A.447036
City CHATHAM	State MA	Zip Code 02633-2509
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 25.00
Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED	<input type="checkbox"/> Memo Item CONTRIBUTION
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 865.00	

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name B. STONE, MARTHA, , ,		Date of Receipt M M M / D D D / Y Y Y Y Y Y 10 / 27 / 2016
Mailing Address 307 BRIDGE STREET		Transaction ID : SA11A.453569
City CHATHAM	State MA	Zip Code 02633-2509
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 50.00
Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED	<input type="checkbox"/> Memo Item CONTRIBUTION
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 865.00	

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name C. STONE, MARTHA, , ,		Date of Receipt M M M / D D D / Y Y Y Y Y Y 10 / 27 / 2016
Mailing Address 307 BRIDGE STREET		Transaction ID : SA11A.453608
City CHATHAM	State MA	Zip Code 02633-2509
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 50.00
Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED	<input type="checkbox"/> Memo Item CONTRIBUTION
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Aggregate Year-to-Date ▼ 865.00	

SUBTOTAL of Receipts This Page (optional).....▶	125.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3591 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. STONE, MARTHA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 307 BRIDGE STREET
 City CHATHAM State MA Zip Code 02633-2509
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 865.00

Date of Receipt 10 / 31 / 2016
Transaction ID : SA11A.459213
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

B. STONE, MARTHA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 307 BRIDGE STREET
 City CHATHAM State MA Zip Code 02633-2509
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 865.00

Date of Receipt 11 / 04 / 2016
Transaction ID : SA11A.471026
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

C. STONE, MARTHA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 307 BRIDGE STREET
 City CHATHAM State MA Zip Code 02633-2509
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 865.00

Date of Receipt 11 / 04 / 2016
Transaction ID : SA11A.473560
 Amount of Each Receipt this Period 30.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	180.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3592 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. STONE, MARTHA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 307 BRIDGE STREET
 City CHATHAM State MA Zip Code 02633-2509
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 865.00

Date of Receipt
 11 / 05 / 2016
Transaction ID : SA11A.478642
 Amount of Each Receipt this Period 30.00
 Memo Item CONTRIBUTION

B. STONE, MARTHA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 307 BRIDGE STREET
 City CHATHAM State MA Zip Code 02633-2509
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 865.00

Date of Receipt
 11 / 05 / 2016
Transaction ID : SA11A.478653
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

C. STONE, MARTHA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 307 BRIDGE STREET
 City CHATHAM State MA Zip Code 02633-2509
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 865.00

Date of Receipt
 11 / 05 / 2016
Transaction ID : SA11A.478654
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	130.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3593 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. STONER, SHIRLEY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO BOX 357
 City WALSH State CO Zip Code 81090-0357
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 205.00

Date of Receipt 10 / 22 / 2016
Transaction ID : SA11A.446700
 Amount of Each Receipt this Period 30.00
 Memo Item CONTRIBUTION

B. STONE, WILLIAM, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4619 WYCKOFF RD.
 City AUBURN State NY Zip Code 13021-9724
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) DIAMOND V Occupation (for Individual) TECHNICAL SUPPORT
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 11 / 02 / 2016
Transaction ID : SA11A.467151
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

C. STONE, WILLIAM, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4619 WYCKOFF RD.
 City AUBURN State NY Zip Code 13021-9724
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) DIAMOND V Occupation (for Individual) TECHNICAL SUPPORT
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 11 / 02 / 2016
Transaction ID : SA11A.467152
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶ 80.00
TOTAL This Period (last page this line number only).....▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3594 OF 4311
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. STOOPS, STEVEN, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 11805 MEADOWGLEN LANE APT.2111

City HOUSTON	State TX	Zip Code 77082-3150
-----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1692.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
11		02		2016

Transaction ID : SA11A.465928

Amount of Each Receipt this Period
25.00

Memo Item CONTRIBUTION

B. STOOPS, STEVEN, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 11805 MEADOWGLEN LANE APT.2111

City HOUSTON	State TX	Zip Code 77082-3150
-----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1692.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
11		02		2016

Transaction ID : SA11A.465931

Amount of Each Receipt this Period
25.00

Memo Item CONTRIBUTION

C. STORMS, JOHN, W., ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1202A DAIRY ASHFORD

City HOUSTON	State TX	Zip Code 77079-3004
-----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) STORMS & CRITZ	Occupation (for Individual) CPA
---	------------------------------------

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
470.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
10		28		2016

Transaction ID : SA11A.454685

Amount of Each Receipt this Period
220.00

Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	270.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3595 OF 4311
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. STORMS, JOHN, W., ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1202A DAIRY ASHFORD

City HOUSTON	State TX	Zip Code 77079-3004
-----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) STORMS & CRITZ	Occupation (for Individual) CPA
---	------------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
470.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		31		2016

Transaction ID : SA11A.459266

Amount of Each Receipt this Period
250.00

Memo Item
CONTRIBUTION

B. STORMES, MARC, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 226 OLD EAGLE SCHOOL ROAD

City STRAFFORD	State PA	Zip Code 19087-2454
-------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) COMMUNITY ASSOCIATION UNDERWRITERS OF	Occupation (for Individual) CONTROLLER
--	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
900.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		24		2016

Transaction ID : SA11A.449484

Amount of Each Receipt this Period
100.00

Memo Item
CONTRIBUTION

C. STORMES, MARC, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 226 OLD EAGLE SCHOOL ROAD

City STRAFFORD	State PA	Zip Code 19087-2454
-------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) COMMUNITY ASSOCIATION UNDERWRITERS OF	Occupation (for Individual) CONTROLLER
--	---

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
900.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		26		2016

Transaction ID : SA11A.451172

Amount of Each Receipt this Period
100.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	450.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3596 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. STORMES, MARC, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 226 OLD EAGLE SCHOOL ROAD
 City STRAFFORD State PA Zip Code 19087-2454
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) COMMUNITY ASSOCIATION UNDERWRITERS OF Occupation (for Individual) CONTROLLER
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 900.00

Date of Receipt **10 / 26 / 2016**
Transaction ID : SA11A.451173
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

B. STORMES, MARC, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 226 OLD EAGLE SCHOOL ROAD
 City STRAFFORD State PA Zip Code 19087-2454
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) COMMUNITY ASSOCIATION UNDERWRITERS OF Occupation (for Individual) CONTROLLER
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 900.00

Date of Receipt **11 / 04 / 2016**
Transaction ID : SA11A.471333
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

C. STORMES, MARC, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 226 OLD EAGLE SCHOOL ROAD
 City STRAFFORD State PA Zip Code 19087-2454
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) COMMUNITY ASSOCIATION UNDERWRITERS OF Occupation (for Individual) CONTROLLER
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 900.00

Date of Receipt **11 / 04 / 2016**
Transaction ID : SA11A.473327
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	300.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3597 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. STORMES, MARC, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 226 OLD EAGLE SCHOOL ROAD
 City STRAFFORD State PA Zip Code 19087-2454
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) COMMUNITY ASSOCIATION UNDERWRITERS OF Occupation (for Individual) CONTROLLER
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 900.00

Date of Receipt
 11 / 07 / 2016
Transaction ID : SA11A.475377
 Amount of Each Receipt this Period
 100.00
 Memo Item CONTRIBUTION

B. STORMES, MARC, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 226 OLD EAGLE SCHOOL ROAD
 City STRAFFORD State PA Zip Code 19087-2454
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) COMMUNITY ASSOCIATION UNDERWRITERS OF Occupation (for Individual) CONTROLLER
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 900.00

Date of Receipt
 11 / 07 / 2016
Transaction ID : SA11A.475380
 Amount of Each Receipt this Period
 100.00
 Memo Item CONTRIBUTION

C. STOULIL, RICHARD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3180 CRYSTAL SPRINGS DR NE
 City BAINBRIDGE ISLAND State WA Zip Code 98110-2070
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) AMENITY SERVICES Occupation (for Individual) FOUNDER
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 600.00

Date of Receipt
 10 / 21 / 2016
Transaction ID : SA11A.444577
 Amount of Each Receipt this Period
 100.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	300.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3598 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
Team Ryan

A. STOULIL, RICHARD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3180 CRYSTAL SPRINGS DR NE
 City BAINBRIDGE ISLAND State WA Zip Code 98110-2070
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) AMENITY SERVICES Occupation (for Individual) FOUNDER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 600.00

Date of Receipt
 11 / 04 / 2016
Transaction ID : SA11A.472307
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION

B. STOUT, RICHARD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1353 AWATUKEE TRAIL
 City HUDSON State WI Zip Code 54016-6936
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) RENTALS
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt
 10 / 21 / 2016
Transaction ID : SA11A.444612
 Amount of Each Receipt this Period
 150.00
 Memo Item
 CONTRIBUTION

C. STOUT, RICHARD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1353 AWATUKEE TRAIL
 City HUDSON State WI Zip Code 54016-6936
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) RENTALS
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt
 11 / 03 / 2016
Transaction ID : SA11A.469167
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	350.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3599 OF 4311
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. STOVER, CAROL, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 3701 N. ROAD 92

City PASCO	State WA	Zip Code 99301-1579
---------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	27	/	2016

Transaction ID : SA11A.453554

Amount of Each Receipt this Period
100.00

Memo Item CONTRIBUTION

B. STOVER, CAROL, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 3701 N. ROAD 92

City PASCO	State WA	Zip Code 99301-1579
---------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	30	/	2016

Transaction ID : SA11A.460182

Amount of Each Receipt this Period
100.00

Memo Item CONTRIBUTION

C. STOVER, CAROL, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 3701 N. ROAD 92

City PASCO	State WA	Zip Code 99301-1579
---------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	07	/	2016

Transaction ID : SA11A.475462

Amount of Each Receipt this Period
100.00

Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	300.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3600 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. STOVER, CORNELIUS, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 6867 ROUTE 208
 City KNOX State PA Zip Code 16232-5927
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 240.00

Date of Receipt 10 / 25 / 2016
Transaction ID : SA11A.448046
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

B. STOVER, CORNELIUS, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 6867 ROUTE 208
 City KNOX State PA Zip Code 16232-5927
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 240.00

Date of Receipt 10 / 27 / 2016
Transaction ID : SA11A.453120
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

C. STOVER, CORNELIUS, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 6867 ROUTE 208
 City KNOX State PA Zip Code 16232-5927
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 240.00

Date of Receipt 11 / 01 / 2016
Transaction ID : SA11A.462309
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶ 100.00
TOTAL This Period (last page this line number only).....▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3601 OF 4311
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. STOWELL, DIBRELL, C., COL.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 5419 WILLOW LANE

City NAMPA	State ID	Zip Code 83687-8425
---------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
225.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	30	/	2016

Transaction ID : SA11A.460166

Amount of Each Receipt this Period
50.00

Memo Item
CONTRIBUTION

B. STOWELL, DIBRELL, C., COL.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 5419 WILLOW LANE

City NAMPA	State ID	Zip Code 83687-8425
---------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
225.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	04	/	2016

Transaction ID : SA11A.473774

Amount of Each Receipt this Period
50.00

Memo Item
CONTRIBUTION

C. STRAATSMA, BRADLEY, R., DR,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 3031 ELVIDO DRIVE

City LOS ANGELES	State CA	Zip Code 90049-1107
---------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
600.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	03	/	2016

Transaction ID : SA11A.465365

Amount of Each Receipt this Period
200.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	300.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3602 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. STRAHLENDORF, PATTIE, S., MRS.

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 150 CORTONA WAY
355

City BRENTWOOD	State CA	Zip Code 94513-7162
-------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
400.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 27 / 2016

Transaction ID : SA11A.453118

Amount of Each Receipt this Period
50.00

Memo Item
CONTRIBUTION

B. STRAHLENDORF, PATTIE, S., MRS.

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 150 CORTONA WAY
355

City BRENTWOOD	State CA	Zip Code 94513-7162
-------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
400.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 27 / 2016

Transaction ID : SA11A.453119

Amount of Each Receipt this Period
50.00

Memo Item
CONTRIBUTION

C. STRANG, DAVID, A., MR.,

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 7297 VILLAGE DR.

City MASON	State OH	Zip Code 45040-1409
---------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
280.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 26 / 2016

Transaction ID : SA11A.450518

Amount of Each Receipt this Period
15.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	115.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3603 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. STRANG, DAVID, A., MR.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 7297 VILLAGE DR.
City MASON State OH Zip Code 45040-1409
FEC ID number of contributing federal political committee. **C**
Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 280.00

Date of Receipt 11 / 06 / 2016
Transaction ID : SA11A.477873
Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

B. STRANAHAN, DUANE, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 26249 W RIVER ROAD
City PERRYSBURG State OH Zip Code 43551-6201
FEC ID number of contributing federal political committee. **C**
Name of Employer (for Individual) INFORMATION REQUESTED PER BEST EFFORTS Occupation (for Individual) INFORMATION REQUESTED PER BE
Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 440.00

Date of Receipt 10 / 26 / 2016
Transaction ID : SA11A.447753
Amount of Each Receipt this Period 200.00
 Memo Item CONTRIBUTION

C. STRANAHAN, DUANE, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 26249 W RIVER ROAD
City PERRYSBURG State OH Zip Code 43551-6201
FEC ID number of contributing federal political committee. **C**
Name of Employer (for Individual) INFORMATION REQUESTED PER BEST EFFORTS Occupation (for Individual) INFORMATION REQUESTED PER BE
Receipt For: Primary General Other (specify) Aggregate Year-to-Date ▼ 440.00

Date of Receipt 11 / 01 / 2016
Transaction ID : SA11A.457158
Amount of Each Receipt this Period 40.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶ 265.00
TOTAL This Period (last page this line number only).....▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3604 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. STRATTON, DAVID, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4971 AUBURN FORD
 City GREENWOOD State IN Zip Code 46142-9429
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 275.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 31 / 2016
Transaction ID : SA11A.463518
 Amount of Each Receipt this Period
 50.00
 Memo Item
 CONTRIBUTION

B. STRATTON, DAVID, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4971 AUBURN FORD
 City GREENWOOD State IN Zip Code 46142-9429
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 275.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 04 / 2016
Transaction ID : SA11A.472602
 Amount of Each Receipt this Period
 25.00
 Memo Item
 CONTRIBUTION

C. STREET, DAN, H., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO BOX 290
 City SOUTH FORK State CO Zip Code 81154-0290
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 225.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 26 / 2016
Transaction ID : SA11A.454512
 Amount of Each Receipt this Period
 25.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	100.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3605 OF 4311
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Team Ryan

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
A. STREET, DAN, H., ,

Mailing Address **PO BOX 290**

City **SOUTH FORK** State **CO** Zip Code **81154-0290**

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) **NONE** Occupation (for Individual) **RETIRED**

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **225.00**

Date of Receipt
11 / 07 / 2016

Transaction ID : SA11A.475349

Amount of Each Receipt this Period
25.00

Memo Item
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
B. STRETCHER, OLYNDA, , ,

Mailing Address **108 CINDER CREEK RD.**

City **SPARTANBURG** State **SC** Zip Code **29307-2704**

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) **NONE** Occupation (for Individual) **RETIRED**

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **375.00**

Date of Receipt
10 / 27 / 2016

Transaction ID : SA11A.456673

Amount of Each Receipt this Period
25.00

Memo Item
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
C. STRICKLIN, ELIZABETH, , ,

Mailing Address **231 E DUNOON PLACE**

City **SHELTON** State **WA** Zip Code **98584-7505**

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) **NONE** Occupation (for Individual) **RETIRED**

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼ **625.00**

Date of Receipt
10 / 25 / 2016

Transaction ID : SA11A.452009

Amount of Each Receipt this Period
50.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... **100.00**

TOTAL This Period (last page this line number only).....

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3606 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. STRICKLIN, ELIZABETH, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 231 E DUNOON PLACE
 City SHELTON State WA Zip Code 98584-7505
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 625.00

Date of Receipt 10 / 25 / 2016
Transaction ID : SA11A.452010
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

B. STRICKLIN, ELIZABETH, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 231 E DUNOON PLACE
 City SHELTON State WA Zip Code 98584-7505
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 625.00

Date of Receipt 11 / 02 / 2016
Transaction ID : SA11A.465870
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

C. STRICKLIN, ELIZABETH, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 231 E DUNOON PLACE
 City SHELTON State WA Zip Code 98584-7505
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 625.00

Date of Receipt 11 / 02 / 2016
Transaction ID : SA11A.465872
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	100.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3607 OF 4311
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. STRICKLAND, JERRY, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address PO BOX 19307

City JONESBORO State AR Zip Code 72403-2307

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) SALESMAN

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 950.00

Date of Receipt 10 / 25 / 2016
Transaction ID : SA11A.451583

Amount of Each Receipt this Period 50.00

Memo Item CONTRIBUTION

B. STRICKLAND, JERRY, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address PO BOX 19307

City JONESBORO State AR Zip Code 72403-2307

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) SALESMAN

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 950.00

Date of Receipt 10 / 25 / 2016
Transaction ID : SA11A.451584

Amount of Each Receipt this Period 50.00

Memo Item CONTRIBUTION

C. STRICKLAND, JERRY, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address PO BOX 19307

City JONESBORO State AR Zip Code 72403-2307

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) SALESMAN

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 950.00

Date of Receipt 10 / 31 / 2016
Transaction ID : SA11A.459257

Amount of Each Receipt this Period 100.00

Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 200.00

TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3608 OF 4311
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. STRICKLER, RICHARD, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 8037 CALLE DE LA PLATA

City LA JOLLA	State CA	Zip Code 92037-3222
------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
300.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	01	/	2016

Transaction ID : SA11A.467324

Amount of Each Receipt this Period
100.00

Memo Item
CONTRIBUTION

B. STRICKLER, ROBERT, H., MR.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1882 KEEZLETOWN ROAD

City HARRISONBURG	State VA	Zip Code 22802-2707
----------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
300.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	24	/	2016

Transaction ID : SA11A.443806

Amount of Each Receipt this Period
200.00

Memo Item
CONTRIBUTION

C. STRICKLAND, SETH, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 14 STANWICH LANE

City GREENWICH	State CT	Zip Code 06830-4839
-------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) MONITOR CAPITAL INVESTMENTS	Occupation (for Individual) INVESTOR
--	---

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	04	/	2016

Transaction ID : SA11A.467543

Amount of Each Receipt this Period
250.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	550.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3609 OF 4311
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. STRIEDINGER, THERESIA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 169 UPHILL LANE
 City FRANKLINTON State NC Zip Code 27525-
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) EUROPEAN WOODWORKING Occupation (for Individual) VP FINANCE
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 10 / 21 / 2016
Transaction ID : SA11A.447249
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

B. STRINDEN, SANDI, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2657 MEADOW CREEK CIRCLE S
 City FARGO State ND Zip Code 58104-7112
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) STRINDEN CONSULTING LLC Occupation (for Individual) REAL ESTATE
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt 11 / 04 / 2016
Transaction ID : SA11A.467459
 Amount of Each Receipt this Period 1000.00
 Memo Item CONTRIBUTION

C. STROBRIDGE, JAMES, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 60 LOCK ST. UNIT - C
 City NASHUA State NH Zip Code 03064-2476
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) PFIZER Occupation (for Individual) BIO-PHARMA MECHANIC
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 475.00

Date of Receipt 10 / 31 / 2016
Transaction ID : SA11A.458462
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶ 1275.00
TOTAL This Period (last page this line number only).....▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3610 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. STROBRIDGE, JAMES, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 60 LOCK ST. UNIT - C
 City NASHUA State NH Zip Code 03064-2476
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) PFIZER Occupation (for Individual) BIO-PHARMA MECHANIC
 Receipt For: Primary General Other (specify) Aggregate Year-to-Date 475.00

Date of Receipt 11 / 07 / 2016
Transaction ID : SA11A.480059
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

B. STROEMER, JEFFERY, D., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 40W003 RUSSELL ROAD
 City ELGIN State IL Zip Code 60124-8127
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) Aggregate Year-to-Date 300.00

Date of Receipt 10 / 24 / 2016
Transaction ID : SA11A.444065
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

C. STROEMER, JEFFERY, D., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 40W003 RUSSELL ROAD
 City ELGIN State IL Zip Code 60124-8127
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) Aggregate Year-to-Date 300.00

Date of Receipt 11 / 02 / 2016
Transaction ID : SA11A.464997
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... 250.00
TOTAL This Period (last page this line number only).....

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3611 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
Team Ryan

A. STROH, JOHN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5066 EAST HARBOR RD
 City FREELAND State WA Zip Code 98249-9505
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt 10 / 27 / 2016
Transaction ID : SA11A.452503
 Amount of Each Receipt this Period 1000.00
 Memo Item CONTRIBUTION

B. STROMBERG, FRANK, R., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2811 PEBBLEBROOK LANE
 City ROLLING MEADOWS State IL Zip Code 60008-2169
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) COMMUNITY SAVINGS BANK Occupation (for Individual) CFO
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 10 / 24 / 2016
Transaction ID : SA11A.443696
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

C. STRONG, GEORGE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5455 CASTLE KNOLL ROAD
 City LA CANADA State CA Zip Code 91011-1319
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) CORNERSTONE RESEARCH Occupation (for Individual) CONSULTANT
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 750.00

Date of Receipt 10 / 24 / 2016
Transaction ID : SA11A.446174
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	1500.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3612 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. STRONG, JAMES, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4 BECKER RD
 City NORTH FORK State ID Zip Code 83466-
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 10 / 22 / 2016
Transaction ID : SA11A.446941
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

B. STRUMBOS, CHRISTINE, K., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 257 PINE RIDGE DRIVE
 City BLOOMFIELD State MI Zip Code 48304-2138
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 235.00

Date of Receipt 10 / 28 / 2016
Transaction ID : SA11A.454777
 Amount of Each Receipt this Period 70.00
 Memo Item CONTRIBUTION

C. STRUMBOS, CHRISTINE, K., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 257 PINE RIDGE DRIVE
 City BLOOMFIELD State MI Zip Code 48304-2138
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 235.00

Date of Receipt 11 / 03 / 2016
Transaction ID : SA11A.465430
 Amount of Each Receipt this Period 40.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	210.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3613 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. STUCKI, H, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2190 NORTH CASCADE CANYON DRIVE
 City SAINT GEORGE State UT Zip Code 84770-6262
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 10 / 30 / 2016
Transaction ID : SA11A.459341
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

B. STUCKI, H, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2190 NORTH CASCADE CANYON DRIVE
 City SAINT GEORGE State UT Zip Code 84770-6262
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 11 / 04 / 2016
Transaction ID : SA11A.473964
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

C. STUCKY, JAY, R., DR., D.D.S.
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3005 SIERRA PKWY
 City HUTCHINSON State KS Zip Code 67502-2972
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) DDS
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 1800.00

Date of Receipt 11 / 01 / 2016
Transaction ID : SA11A.462255
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	200.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3614 OF 4311
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. STUDER, HORTENSIA, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 3362 W. CRESTONE CT.

City TUCSON	State AZ	Zip Code 85742-5103
----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) SELF EMPLOYED	Occupation (for Individual) INTERPRETER
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
325.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		28		2016

Transaction ID : SA11A.456438

Amount of Each Receipt this Period
100.00

Memo Item CONTRIBUTION

B. STUDER, HORTENSIA, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 3362 W. CRESTONE CT.

City TUCSON	State AZ	Zip Code 85742-5103
----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) SELF EMPLOYED	Occupation (for Individual) INTERPRETER
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
325.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		28		2016

Transaction ID : SA11A.456440

Amount of Each Receipt this Period
100.00

Memo Item CONTRIBUTION

C. STUDER, HORTENSIA, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 3362 W. CRESTONE CT.

City TUCSON	State AZ	Zip Code 85742-5103
----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) SELF EMPLOYED	Occupation (for Individual) INTERPRETER
--	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
325.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		31		2016

Transaction ID : SA11A.458430

Amount of Each Receipt this Period
25.00

Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	225.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3615 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. STUHR, DENNIS, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3015 N TONTO RIDGE RD
 City PRESCOTT State AZ Zip Code 86305-3941
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 675.00

Date of Receipt
 11 / 02 / 2016
Transaction ID : SA11A.466066
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

B. STUHR, DENNIS, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3015 N TONTO RIDGE RD
 City PRESCOTT State AZ Zip Code 86305-3941
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 675.00

Date of Receipt
 11 / 02 / 2016
Transaction ID : SA11A.466067
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

C. STUHR, DENNIS, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3015 N TONTO RIDGE RD
 City PRESCOTT State AZ Zip Code 86305-3941
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 675.00

Date of Receipt
 11 / 02 / 2016
Transaction ID : SA11A.466077
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	150.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3616 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. STUHR, DENNIS, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3015 N TONTO RIDGE RD
 City PRESCOTT State AZ Zip Code 86305-3941
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 675.00

Date of Receipt
 11 / 02 / 2016
Transaction ID : SA11A.466078
 Amount of Each Receipt this Period
 50.00
 Memo Item
 CONTRIBUTION

B. STUHR, DENNIS, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3015 N TONTO RIDGE RD
 City PRESCOTT State AZ Zip Code 86305-3941
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 675.00

Date of Receipt
 11 / 04 / 2016
Transaction ID : SA11A.473044
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION

C. STUMBERG, ERIC, , MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3911 AVENUE G
 City AUSTIN State TX Zip Code 78751-4705
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) TENGOINTERNET, INC. Occupation (for Individual) CEO
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 25000.00

Date of Receipt
 10 / 28 / 2016
Transaction ID : SA11A.455563
 Amount of Each Receipt this Period
 25000.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	25150.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3617 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. STUMBAUGH, GARY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 8 RUFFIAN RD.
 City AIKEN State SC Zip Code 29803-5660
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 350.00

Date of Receipt 10 / 24 / 2016
Transaction ID : SA11A.445764
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

B. STUMBAUGH, GARY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 8 RUFFIAN RD.
 City AIKEN State SC Zip Code 29803-5660
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 350.00

Date of Receipt 10 / 28 / 2016
Transaction ID : SA11A.455640
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

C. STUMP, JOHN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 21145 CARDINAL POND TER
 City ASHBURN State VA Zip Code 20147-6129
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 11 / 03 / 2016
Transaction ID : SA11A.465329
 Amount of Each Receipt this Period 200.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	300.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3618 OF 4311
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. STUMP, LARRY, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 4822 25TH ST N

City ARLINGTON	State VA	Zip Code 22207-2619
-------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
5048.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		31		2016

Transaction ID : SA11A.458657

Amount of Each Receipt this Period
5000.00

Memo Item
CONTRIBUTION

B. STURDIVANT, JAMES, M., ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 100 W. 5TH ST. STE. 1100
STE 1100

City TULSA	State OK	Zip Code 74103-4217
---------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) GABLEGOTWALS	Occupation (for Individual) ATTORNEY
---	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
400.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		21		2016

Transaction ID : SA11A.444360

Amount of Each Receipt this Period
100.00

Memo Item
CONTRIBUTION

C. STURGEON, JACK, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1901 MOUNT VERNON AVENUE

City POINT PLEASANT	State WV	Zip Code 25550-1910
------------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		28		2016

Transaction ID : SA11A.456023

Amount of Each Receipt this Period
50.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	5150.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3619 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. STURGEON, JACK, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1901 MOUNT VERNON AVENUE
 City POINT PLEASANT State WV Zip Code 25550-1910
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 11 / 04 / 2016
Transaction ID : SA11A.473179
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

B. STURZ, PAUL, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 6 AUTUMN RIDGE ROAD
 6 AUTUMN RIDGE ROAD
 City POUND RIDGE State NY Zip Code 10576-1400
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) LINDENS Occupation (for Individual) EXECUTIVE
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 365.00

Date of Receipt 11 / 04 / 2016
Transaction ID : SA11A.473296
 Amount of Each Receipt this Period 20.00
 Memo Item CONTRIBUTION

C. STYRON, NANCY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2800 GREENWAY RD
 City SUFFOLK State VA Zip Code 23438-9422
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 350.00

Date of Receipt 11 / 07 / 2016
Transaction ID : SA11A.475872
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	120.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3620 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. SUBKO, JEFFREY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1203 BLUEGRASS LANE
 City SHENANDOAH State IA Zip Code 51601-2511
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 26 / 2016
Transaction ID : SA11A.450992
 Amount of Each Receipt this Period
 50.00
 Memo Item
 CONTRIBUTION

B. SUBKO, JEFFREY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1203 BLUEGRASS LANE
 City SHENANDOAH State IA Zip Code 51601-2511
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 04 / 2016
Transaction ID : SA11A.472045
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION

C. SUBKO, JEFFREY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1203 BLUEGRASS LANE
 City SHENANDOAH State IA Zip Code 51601-2511
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 07 / 2016
Transaction ID : SA11A.476004
 Amount of Each Receipt this Period
 50.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	200.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3621 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. SUBOTIC, PREDRAG, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 8662 MIDLAND PKWY
 City JAMAICA State NY Zip Code 11432-3042
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 575.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 21 / 2016
Transaction ID : SA11A.444510
 Amount of Each Receipt this Period
 50.00
 Memo Item
 CONTRIBUTION

B. SUBOTIC, PREDRAG, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 8662 MIDLAND PKWY
 City JAMAICA State NY Zip Code 11432-3042
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 575.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 30 / 2016
Transaction ID : SA11A.459438
 Amount of Each Receipt this Period
 30.00
 Memo Item
 CONTRIBUTION

C. SUBOTIC, PREDRAG, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 8662 MIDLAND PKWY
 City JAMAICA State NY Zip Code 11432-3042
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 575.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 30 / 2016
Transaction ID : SA11A.459439
 Amount of Each Receipt this Period
 30.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	110.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3622 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. SUBOTIC, PREDRAG, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 8662 MIDLAND PKWY
 City JAMAICA State NY Zip Code 11432-3042
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 575.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 01 / 2016
Transaction ID : SA11A.467275
 Amount of Each Receipt this Period
 50.00
 Memo Item
 CONTRIBUTION

B. SUBOTIC, PREDRAG, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 8662 MIDLAND PKWY
 City JAMAICA State NY Zip Code 11432-3042
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 575.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 01 / 2016
Transaction ID : SA11A.467276
 Amount of Each Receipt this Period
 50.00
 Memo Item
 CONTRIBUTION

C. SUBOTIC, PREDRAG, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 8662 MIDLAND PKWY
 City JAMAICA State NY Zip Code 11432-3042
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 575.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 01 / 2016
Transaction ID : SA11A.467278
 Amount of Each Receipt this Period
 50.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	150.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3623 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. SUBOTIC, PREDRAG, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 8662 MIDLAND PKWY
 City JAMAICA State NY Zip Code 11432-3042
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 575.00

Date of Receipt
 11 / 01 / 2016
Transaction ID : SA11A.467279
 Amount of Each Receipt this Period
 50.00
 Memo Item
 CONTRIBUTION

B. SUBOTIC, PREDRAG, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 8662 MIDLAND PKWY
 City JAMAICA State NY Zip Code 11432-3042
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 575.00

Date of Receipt
 11 / 04 / 2016
Transaction ID : SA11A.471725
 Amount of Each Receipt this Period
 50.00
 Memo Item
 CONTRIBUTION

C. SUBOTIC, PREDRAG, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 8662 MIDLAND PKWY
 City JAMAICA State NY Zip Code 11432-3042
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 575.00

Date of Receipt
 11 / 04 / 2016
Transaction ID : SA11A.473995
 Amount of Each Receipt this Period
 30.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	130.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3624 OF 4311
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. SUEHNHOLZ, KEITH, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 336 SARAH WELLS TRAIL

City GOSHEN	State NY	Zip Code 10924-5107
----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) GRANITE ASSOCIATES L.P.	Occupation (for Individual) FINANCE
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
750.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		25		2016

Transaction ID : SA11A.448195

Amount of Each Receipt this Period
250.00

Memo Item
CONTRIBUTION

B. SULLIVAN, JAMES, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 7000 FOX CIRCLE

City LARKSPUR	State CO	Zip Code 80118-9106
------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		24		2016

Transaction ID : SA11A.449579

Amount of Each Receipt this Period
25.00

Memo Item
CONTRIBUTION

C. SULLIVAN, JAMES, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 7000 FOX CIRCLE

City LARKSPUR	State CO	Zip Code 80118-9106
------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		24		2016

Transaction ID : SA11A.449580

Amount of Each Receipt this Period
25.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	300.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3625 OF 4311
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. SULLIVAN, JOHN, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 303 WYMAN STREET SUITE 285
STE 285

City WALTHAM State MA Zip Code 02451-1259

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) SULLIVAN RISK MANAGEMENT GROUP Occupation (for Individual) CHAIRMAN

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 375.00

Date of Receipt 10 / 25 / 2016
Transaction ID : SA11A.448445

Amount of Each Receipt this Period 100.00

Memo Item CONTRIBUTION

B. SULLIVAN, JOHN, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 303 WYMAN STREET SUITE 285
STE 285

City WALTHAM State MA Zip Code 02451-1259

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) SULLIVAN RISK MANAGEMENT GROUP Occupation (for Individual) CHAIRMAN

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 375.00

Date of Receipt 10 / 25 / 2016
Transaction ID : SA11A.448463

Amount of Each Receipt this Period 100.00

Memo Item CONTRIBUTION

C. SULLIVAN, JOHN, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 303 WYMAN STREET SUITE 285
STE 285

City WALTHAM State MA Zip Code 02451-1259

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) SULLIVAN RISK MANAGEMENT GROUP Occupation (for Individual) CHAIRMAN

Receipt For: Primary General Other (specify)

Aggregate Year-to-Date ▼ 375.00

Date of Receipt 11 / 02 / 2016
Transaction ID : SA11A.466436

Amount of Each Receipt this Period 25.00

Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 225.00

TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3626 OF 4311
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. SULLIVAN, MARSHALL, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2861 BIRCHWOOD CIRCLE
 City EMMAUS State PA Zip Code 18049-1203
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 10 / 31 / 2016
Transaction ID : SA11A.457979
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

B. SULLIVAN, SHIRLEY, D., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address W180N6029 MARCY RD
 City MENOMONEE FALLS State WI Zip Code 53051-5511
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 10 / 26 / 2016
Transaction ID : SA11A.449951
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

C. SULLIVAN, SHIRLEY, D., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address W180N6029 MARCY RD
 City MENOMONEE FALLS State WI Zip Code 53051-5511
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 10 / 26 / 2016
Transaction ID : SA11A.449953
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶ 300.00
TOTAL This Period (last page this line number only).....▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3627 OF 4311
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. SULLIVAN, SHIRLEY, D., ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address W180N6029 MARCY RD

City MENOMONEE FALLS	State WI	Zip Code 53051-5511
-------------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		26		2016

Transaction ID : SA11A.449954

Amount of Each Receipt this Period
25.00

Memo Item
CONTRIBUTION

B. SULLIVAN, SHIRLEY, D., ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address W180N6029 MARCY RD

City MENOMONEE FALLS	State WI	Zip Code 53051-5511
-------------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		31		2016

Transaction ID : SA11A.458193

Amount of Each Receipt this Period
25.00

Memo Item
CONTRIBUTION

C. SULLIVAN, SHIRLEY, D., ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address W180N6029 MARCY RD

City MENOMONEE FALLS	State WI	Zip Code 53051-5511
-------------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		29		2016

Transaction ID : SA11A.460754

Amount of Each Receipt this Period
25.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	75.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3628 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. SULLIVAN, SHIRLEY, D., ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address W180N6029 MARCY RD

City MENOMONEE FALLS	State WI	Zip Code 53051-5511
-------------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11		03		2016

Transaction ID : SA11A.469002

Amount of Each Receipt this Period
25.00

Memo Item CONTRIBUTION

B. SULLIVAN, STEPHANIA, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 23705 VANOWEN STREET
119

City WEST HILLS	State CA	Zip Code 91307-3030
--------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11		02		2016

Transaction ID : SA11A.466731

Amount of Each Receipt this Period
250.00

Memo Item CONTRIBUTION

C. SUMMERS, PAUL, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 4781 MALI CT.
SPRING CREEK VILLAGE

City BONITA SPRINGS	State FL	Zip Code 34134-7102
------------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) PUBLIX	Occupation (for Individual) FRONT END CLERK
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
271.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11		02		2016

Transaction ID : SA11A.466891

Amount of Each Receipt this Period
3.00

Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	278.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3629 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. SUMNER, WESTON, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 10110 SPAIN RD. NE
 City ALBUQUERQUE State NM Zip Code 87111-1965
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) PHSPC Occupation (for Individual) PEDIATRICIAN
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 10 / 26 / 2016
Transaction ID : SA11A.450331
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

B. SUNDERLAND, FRANCES, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 7102 OSKRIDGE DR
 City SAN ANTONIO State TX Zip Code 78229-3612
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 277.00

Date of Receipt 11 / 04 / 2016
Transaction ID : SA11A.474342
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

C. SUNDERLAND, FRANCES, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 7102 OSKRIDGE DR
 City SAN ANTONIO State TX Zip Code 78229-3612
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 277.00

Date of Receipt 11 / 04 / 2016
Transaction ID : SA11A.474344
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	100.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3630 OF 4311
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. SUNDEEN, STEVE, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address **222 OAK MEADOW DR**
A

City **LOS GATOS** State **CA** Zip Code **95032-4458**

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) **SELF EMPLOYED** Occupation (for Individual) **RE ESTATE**

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **650.00**

Date of Receipt **10 / 25 / 2016**

Transaction ID : SA11A.448048

Amount of Each Receipt this Period **100.00**

Memo Item CONTRIBUTION

B. SUNDEEN, STEVE, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address **222 OAK MEADOW DR**
A

City **LOS GATOS** State **CA** Zip Code **95032-4458**

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) **SELF EMPLOYED** Occupation (for Individual) **RE ESTATE**

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **650.00**

Date of Receipt **10 / 31 / 2016**

Transaction ID : SA11A.458319

Amount of Each Receipt this Period **50.00**

Memo Item CONTRIBUTION

C. SURBER, KENNETH, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address **3281 PRESTON SHORE DR**

City **HARRISONBURG** State **VA** Zip Code **22801-4918**

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) **EDWARD JONES** Occupation (for Individual) **STOCKBROKER**

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼ **1000.00**

Date of Receipt **11 / 04 / 2016**

Transaction ID : SA11A.473557

Amount of Each Receipt this Period **250.00**

Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ **400.00**

TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3631 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. SURLAS, JEFFREY, R., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2004 10TH STREET
 City MONROE State WI Zip Code 53566-1834
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) COLONY BRANDS Occupation (for Individual) ATTORNEY
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt 10 / 31 / 2016
Transaction ID : SA11A.457553
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

B. SURO, ROGER, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 983 OAK PARK
 City SCHERTZ State TX Zip Code 78154-1836
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) USAF Occupation (for Individual) PILOT
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 225.00

Date of Receipt 10 / 27 / 2016
Transaction ID : SA11A.456526
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

C. SURO, ROGER, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 983 OAK PARK
 City SCHERTZ State TX Zip Code 78154-1836
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) USAF Occupation (for Individual) PILOT
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 225.00

Date of Receipt 11 / 07 / 2016
Transaction ID : SA11A.480124
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	325.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3632 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. SUTPHIN, BETTY, B., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 187 HORSEPEN BR
 City MINERAL State VA Zip Code 23117-3625
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 09 / 2016
Transaction ID : SA11A.468182
 Amount of Each Receipt this Period
 200.00
 Memo Item
 CONTRIBUTION

B. SUTTON, GRACE, S., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1185 PARK AVENUE 15G
 City NEW YORK State NY Zip Code 10128-1312
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 425.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 31 / 2016
Transaction ID : SA11A.463953
 Amount of Each Receipt this Period
 50.00
 Memo Item
 CONTRIBUTION

C. SUTTON, J., , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 360 AZALEA DR
 City GADSDEN State AL Zip Code 35901-5675
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) DONALD W SUTTON DMD PA Occupation (for Individual) BOOKKEEPER
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 28 / 2016
Transaction ID : SA11A.456293
 Amount of Each Receipt this Period
 50.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	300.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3633 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
Team Ryan

A. SUTTON, J, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 360 AZALEA DR
 City GADSDEN State AL Zip Code 35901-5675
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) DONALD W SUTTON DMD PA Occupation (for Individual) BOOKKEEPER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 11 / 04 / 2016
Transaction ID : SA11A.473309
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

B. SUTTON, JOAN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 16100 PINEWOOD DRIVE
 City PIONEER State CA Zip Code 95666-9664
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 225.00

Date of Receipt 10 / 30 / 2016
Transaction ID : SA11A.460296
 Amount of Each Receipt this Period 75.00
 Memo Item CONTRIBUTION

C. SUTTON, JOAN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 16100 PINEWOOD DRIVE
 City PIONEER State CA Zip Code 95666-9664
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 225.00

Date of Receipt 11 / 04 / 2016
Transaction ID : SA11A.471157
 Amount of Each Receipt this Period 75.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	200.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3634 OF 4311
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. SWAGGERTY, KYLE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 369 GRANDVIEW DRIVE
 City KODAK State TN Zip Code 37764-2117
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 700.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 04 / 2016
Transaction ID : SA11A.470515
 Amount of Each Receipt this Period
 700.00
 Memo Item
 CONTRIBUTION

B. SWAN, DAVID, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2115 6TH AVE 34
 City CLARKSTON State WA Zip Code 99403-1563
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 375.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 01 / 2016
Transaction ID : SA11A.462867
 Amount of Each Receipt this Period
 25.00
 Memo Item
 CONTRIBUTION

C. SWAN, DAVID, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2115 6TH AVE 34
 City CLARKSTON State WA Zip Code 99403-1563
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 375.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 01 / 2016
Transaction ID : SA11A.462876
 Amount of Each Receipt this Period
 25.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	750.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3635 OF 4311
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. SWAN, DAVID, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 2115 6TH AVE
34

City CLARKSTON State WA Zip Code 99403-1563

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
375.00

Date of Receipt
MM / DD / YYYY
11 / 01 / 2016

Transaction ID : SA11A.462878

Amount of Each Receipt this Period
25.00

Memo Item CONTRIBUTION

B. SWAN, DAVID, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 2115 6TH AVE
34

City CLARKSTON State WA Zip Code 99403-1563

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
375.00

Date of Receipt
MM / DD / YYYY
11 / 04 / 2016

Transaction ID : SA11A.471048

Amount of Each Receipt this Period
25.00

Memo Item CONTRIBUTION

C. SWANK, LINDA, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 4166 TRAVIS COUNTRY CIRCLE

City AUSTIN State TX Zip Code 78735-6337

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) SWANK INSTITUTE, INC. Occupation (for Individual) SPEECH-LANGUAGE PATHOLOGIST

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
525.00

Date of Receipt
MM / DD / YYYY
10 / 27 / 2016

Transaction ID : SA11A.453941

Amount of Each Receipt this Period
25.00

Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 75.00

TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3636 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. SWANK, LINDA, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 4166 TRAVIS COUNTRY CIRCLE

City AUSTIN	State TX	Zip Code 78735-6337
----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) SWANK INSTITUTE, INC.	Occupation (for Individual) SPEECH-LANGUAGE PATHOLOGIST
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
525.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	04	/	2016

Transaction ID : SA11A.471122

Amount of Each Receipt this Period
25.00

Memo Item
CONTRIBUTION

B. SWANSON, D, A., ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 7984 CARUTH COURT

City DALLAS	State TX	Zip Code 75225-8135
----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) JORDAN CRESSNELL MONKROHER	Occupation (for Individual) ATTORNEY
---	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
350.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	04	/	2016

Transaction ID : SA11A.467454

Amount of Each Receipt this Period
100.00

Memo Item
CONTRIBUTION

C. SWANSON, KENT, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 28 PARRISH HILL DRIVE

City NASHUA	State NH	Zip Code 03063-2717
----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) GROUP 9 GCC STRATEGIES LLC	Occupation (for Individual) INTERNATIONAL DEFENSE CONSULT
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
300.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	27	/	2016

Transaction ID : SA11A.452889

Amount of Each Receipt this Period
25.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	150.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3637 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
-----------------------------	-----------------------------	-----------------------------

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NAME OF COMMITTEE (In Full)
Team Ryan

A. SWANSON, LEONARD, G., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3572 ESSEX RD
 City CHEYENNE State WY Zip Code 82001-1638
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 280.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 21 / 2016
Transaction ID : SA11A.444419
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION

B. SWARTLEY, RICHARD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 9952 SILVER MAPLE ROAD
 City LITTLETON State CO Zip Code 80129-5461
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 07 / 2016
Transaction ID : SA11A.467834
 Amount of Each Receipt this Period
 250.00
 Memo Item
 CONTRIBUTION

C. SWEATT, NANCY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address P O BOX 3087
 City SANTA CRUZ State CA Zip Code 95063-3087
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 20 / 2016
Transaction ID : SA11A.442576
 Amount of Each Receipt this Period
 75.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	425.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3638 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. SWEATT, NANCY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address P O BOX 3087
 City SANTA CRUZ State CA Zip Code 95063-3087
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 20 / 2016
Transaction ID : SA11A.442578
 Amount of Each Receipt this Period
 25.00
 Memo Item
 CONTRIBUTION

B. SWEATT, NANCY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address P O BOX 3087
 City SANTA CRUZ State CA Zip Code 95063-3087
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 20 / 2016
Transaction ID : SA11A.444811
 Amount of Each Receipt this Period
 25.00
 Memo Item
 CONTRIBUTION

C. SWEATT, NANCY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address P O BOX 3087
 City SANTA CRUZ State CA Zip Code 95063-3087
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 26 / 2016
Transaction ID : SA11A.450770
 Amount of Each Receipt this Period
 50.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	100.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3639 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. SWEATT, NANCY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address P O BOX 3087
 City SANTA CRUZ State CA Zip Code 95063-3087
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt 10 / 26 / 2016
Transaction ID : SA11A.450773
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

B. SWEATT, NANCY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address P O BOX 3087
 City SANTA CRUZ State CA Zip Code 95063-3087
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt 10 / 26 / 2016
Transaction ID : SA11A.450838
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

C. SWEATT, NANCY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address P O BOX 3087
 City SANTA CRUZ State CA Zip Code 95063-3087
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt 10 / 28 / 2016
Transaction ID : SA11A.455135
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶ 150.00
TOTAL This Period (last page this line number only).....▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3640 OF 4311
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. SWEATT, NANCY, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address P O BOX 3087

City SANTA CRUZ	State CA	Zip Code 95063-3087
--------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
400.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	02	/	2016

Transaction ID : SA11A.465998

Amount of Each Receipt this Period
50.00

Memo Item
CONTRIBUTION

B. SWEATT, NANCY, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address P O BOX 3087

City SANTA CRUZ	State CA	Zip Code 95063-3087
--------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
400.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	03	/	2016

Transaction ID : SA11A.468728

Amount of Each Receipt this Period
25.00

Memo Item
CONTRIBUTION

C. SWEENEY, CHARLES, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 810 CORONADO AVE

City CORONADO	State CA	Zip Code 92118-2435
------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
300.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	03	/	2016

Transaction ID : SA11A.468958

Amount of Each Receipt this Period
100.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	175.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3641 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. SWEENEY, CHARLES, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 810 CORONADO AVE
 City CORONADO State CA Zip Code 92118-2435
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt
 11 / 03 / 2016
Transaction ID : SA11A.468974
 Amount of Each Receipt this Period
 100.00
 Memo Item CONTRIBUTION

B. SWEENEY, CHARLES, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 810 CORONADO AVE
 City CORONADO State CA Zip Code 92118-2435
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt
 11 / 07 / 2016
Transaction ID : SA11A.475722
 Amount of Each Receipt this Period
 50.00
 Memo Item CONTRIBUTION

C. SWEENEY, CHARLES, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 810 CORONADO AVE
 City CORONADO State CA Zip Code 92118-2435
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt
 11 / 07 / 2016
Transaction ID : SA11A.475723
 Amount of Each Receipt this Period
 50.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	200.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3642 OF 4311
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. SWEENEY, WILLIAM, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 4711 BAYSHORE BLVD NE

City ST PETERSBURG State FL Zip Code 33703-5559

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) BILL SWEENEY Occupation (for Individual) RETIRED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 400.00

Date of Receipt 10 / 20 / 2016
Transaction ID : SA11A.442221

Amount of Each Receipt this Period 100.00

Memo Item CONTRIBUTION

B. SWEENEY, WILLIAM, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 4711 BAYSHORE BLVD NE

City ST PETERSBURG State FL Zip Code 33703-5559

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) BILL SWEENEY Occupation (for Individual) RETIRED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 400.00

Date of Receipt 10 / 20 / 2016
Transaction ID : SA11A.442222

Amount of Each Receipt this Period 100.00

Memo Item CONTRIBUTION

C. SWEENEY, WILLIAM, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address D8 BRISTOL WOODS DRIVE D8

City BRISTOL State RI Zip Code 02809-2744

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED

Receipt For: Primary General Other (specify)

Aggregate Year-to-Date ▼ 350.00

Date of Receipt 11 / 04 / 2016
Transaction ID : SA11A.472069

Amount of Each Receipt this Period 100.00

Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶ 300.00

TOTAL This Period (last page this line number only).....▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3643 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. SWEENEY, WILLIAM, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4711 BAYSHORE BLVD NE
 City ST PETERSBURG State FL Zip Code 33703-5559
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) BILL SWEENEY Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt 11 / 04 / 2016
Transaction ID : SA11A.472916
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

B. SWEET, JASON, D., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 226 PETER PAN ROAD
 City CARMEL State CA Zip Code 93923-9746
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt 11 / 03 / 2016
Transaction ID : SA11A.465385
 Amount of Each Receipt this Period 1000.00
 Memo Item CONTRIBUTION

C. SWEEZY, DALLAS, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5535 SULLY LAKE DRIVE
 City CENTREVILLE State VA Zip Code 20120-2919
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) PUBLIC AFFAIRS STRATEGIES / HEALTHCARE Occupation (for Individual) CONSULTANT STRATEGIC COMMUN
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt 11 / 03 / 2016
Transaction ID : SA11A.469125
 Amount of Each Receipt this Period 200.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	1300.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3644 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. SWEEZY, DALLAS, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5535 SULLY LAKE DRIVE
 City CENTREVILLE State VA Zip Code 20120-2919
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) PUBLIC AFFAIRS STRATEGIES / HEALTHCARE Occupation (for Individual) CONSULTANT STRATEGIC COMMUN
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 1000.00

Date of Receipt
 11 / 03 / 2016
Transaction ID : SA11A.469135
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION

B. SWEEZY, DALLAS, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5535 SULLY LAKE DRIVE
 City CENTREVILLE State VA Zip Code 20120-2919
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) PUBLIC AFFAIRS STRATEGIES / HEALTHCARE Occupation (for Individual) CONSULTANT STRATEGIC COMMUN
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 1000.00

Date of Receipt
 11 / 03 / 2016
Transaction ID : SA11A.469140
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION

C. SWEEZY, DALLAS, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5535 SULLY LAKE DRIVE
 City CENTREVILLE State VA Zip Code 20120-2919
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) PUBLIC AFFAIRS STRATEGIES / HEALTHCARE Occupation (for Individual) CONSULTANT STRATEGIC COMMUN
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 1000.00

Date of Receipt
 11 / 03 / 2016
Transaction ID : SA11A.469143
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	300.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3645 OF 4311
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. SWEEZEY, JON, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 32 DEER LN
 City MANORVILLE State NY Zip Code 11949-2944
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) CAMPSITE Occupation (for Individual) SALES
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 750.00

Date of Receipt 10 / 25 / 2016
Transaction ID : SA11A.451916
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

B. SWEN, WEN, PEI, REV.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 14720 35TH AVENUE, APT 9A APT 9A
 City FLUSHING State NY Zip Code 11354-3706
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NY LING LIANG CHURCH Occupation (for Individual) PASTOR
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 435.00

Date of Receipt 11 / 21 / 2016
Transaction ID : SA11A.481000
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

C. SWIDER, JAMES, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 150 RIVER LANE
 City MADISONVILLE State LA Zip Code 70447-4200
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) SHIP PILOT
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt 11 / 06 / 2016
Transaction ID : SA11A.478163
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 450.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3646 OF 4311
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. SWIFT, CHARLOTTE, G., MRS.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 30 CARA DRIVE

City NANUET	State NY	Zip Code 10954-3701
----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) MONTALBANO, CONDON & FRANK, P.C.	Occupation (for Individual) ATTORNEY
---	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
350.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		26		2016

Transaction ID : SA11A.451006

Amount of Each Receipt this Period
50.00

Memo Item
CONTRIBUTION

B. SWIFT, CHARLOTTE, G., MRS.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 30 CARA DRIVE

City NANUET	State NY	Zip Code 10954-3701
----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) MONTALBANO, CONDON & FRANK, P.C.	Occupation (for Individual) ATTORNEY
---	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
350.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11		04		2016

Transaction ID : SA11A.472111

Amount of Each Receipt this Period
50.00

Memo Item
CONTRIBUTION

C. SWINEHART, JAMES, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 1010 NORTH PERRY PARKWAY

City OREGON	State WI	Zip Code 53575-3324
----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) METALCRAFT IND. INC.	Occupation (for Individual) OWNER
---	--------------------------------------

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11		01		2016

Transaction ID : SA11A.462268

Amount of Each Receipt this Period
250.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	350.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3647 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. SWING, WILLIAM, T., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 110 GRANITE RIDGE ROAD
 City CHAPEL HILL State NC Zip Code 27516-8617
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 240.00

Date of Receipt 10 / 31 / 2016
Transaction ID : SA11A.458110
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

B. SWIRE, JAMES, B., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4 MILL POND LANE
 City NEW ROCHELLE State NY Zip Code 10805-2128
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1925.00

Date of Receipt 10 / 26 / 2016
Transaction ID : SA11A.447670
 Amount of Each Receipt this Period 35.00
 Memo Item CONTRIBUTION

C. SYKES, GENE, T., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1827 WESTRIDGE RD
 City LOS ANGELES State CA Zip Code 90049-2215
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) GOLDMAN SACHS Occupation (for Individual) INVESTMENT BANKING
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 62500.00

Date of Receipt 10 / 28 / 2016
Transaction ID : SA11A.452488
 Amount of Each Receipt this Period 50000.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	50060.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3648 OF 4311
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
Team Ryan

A. SZABO, BARNA, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 13769 GINGER LOOP

City PENN VALLEY	State CA	Zip Code 95946-9514
---------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) B SZABO INC	Occupation (for Individual) CONSULTANT
--	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		26		2016

Transaction ID : SA11A.454494

Amount of Each Receipt this Period
50.00

Memo Item
CONTRIBUTION

B. SZABO, BARNA, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 13769 GINGER LOOP

City PENN VALLEY	State CA	Zip Code 95946-9514
---------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) B SZABO INC	Occupation (for Individual) CONSULTANT
--	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11		03		2016

Transaction ID : SA11A.474463

Amount of Each Receipt this Period
50.00

Memo Item
CONTRIBUTION

C. SZEGLIN, CHARLES, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 73 PARK AVENUE

City BLUE POINT	State NY	Zip Code 11715-1040
--------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) KC	Occupation (for Individual) MANAGER
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
600.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11		04		2016

Transaction ID : SA11A.472084

Amount of Each Receipt this Period
100.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	200.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3649 OF 4311
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. SZEGLIN, CHARLES, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 73 PARK AVENUE

City BLUE POINT	State NY	Zip Code 11715-1040
--------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) KC	Occupation (for Individual) MANAGER
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
600.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	04	/	2016

Transaction ID : SA11A.473820

Amount of Each Receipt this Period
50.00

Memo Item
CONTRIBUTION

B. SZUCS, DANIEL, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 105 MANDALAY RD

City GAINESVILLE	State GA	Zip Code 30501-1445
---------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	25	/	2016

Transaction ID : SA11A.452003

Amount of Each Receipt this Period
250.00

Memo Item
CONTRIBUTION

C. SZYDLIK, BERNADINE, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 2414 BROOKTREE DR

City HOUSTON	State TX	Zip Code 77008-1112
-----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) SO TX EXTERM	Occupation (for Individual) OFFICE MGR
---	---

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
320.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	26	/	2016

Transaction ID : SA11A.450176

Amount of Each Receipt this Period
50.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	350.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3650 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. SZYDLIK, BERNADINE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2414 BROOKTREE DR
 City HOUSTON State TX Zip Code 77008-1112
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SO TX EXTERM Occupation (for Individual) OFFICE MGR
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 320.00

Date of Receipt 11 / 02 / 2016
Transaction ID : SA11A.466628
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

B. SZYDLIK, BERNADINE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2414 BROOKTREE DR
 City HOUSTON State TX Zip Code 77008-1112
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SO TX EXTERM Occupation (for Individual) OFFICE MGR
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 320.00

Date of Receipt 11 / 02 / 2016
Transaction ID : SA11A.466630
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

C. SZYDLIK, BERNADINE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2414 BROOKTREE DR
 City HOUSTON State TX Zip Code 77008-1112
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SO TX EXTERM Occupation (for Individual) OFFICE MGR
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 320.00

Date of Receipt 11 / 06 / 2016
Transaction ID : SA11A.477525
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶ 100.00
TOTAL This Period (last page this line number only).....▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3651 OF 4311
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. SZYDLIK, BERNADINE, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 2414 BROOKTREE DR
City HOUSTON State TX Zip Code 77008-1112
FEC ID number of contributing federal political committee. **C**
Name of Employer (for Individual) SO TX EXTERM Occupation (for Individual) OFFICE MGR
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 320.00

Date of Receipt 11 / 05 / 2016
Transaction ID : SA11A.478677
Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

B. TABB, MICHAEL, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address P. O. BOX 4712
City BRECKENRIDGE State CO Zip Code 80424-4712
FEC ID number of contributing federal political committee. **C**
Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 300.00

Date of Receipt 10 / 31 / 2016
Transaction ID : SA11A.463749
Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

C. TABB, MICHAEL, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address P. O. BOX 4712
City BRECKENRIDGE State CO Zip Code 80424-4712
FEC ID number of contributing federal political committee. **C**
Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
Receipt For: Primary General Other (specify)
Aggregate Year-to-Date ▼ 300.00

Date of Receipt 10 / 31 / 2016
Transaction ID : SA11A.463772
Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 250.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3652 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. TABB, MICHAEL, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address P. O. BOX 4712
 City BRECKENRIDGE State CO Zip Code 80424-4712
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 07 / 2016
Transaction ID : SA11A.479949
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION

B. TABER, JUDITH, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1421 BRIGHTON ST.
 City LA HABRA State CA Zip Code 90631-3201
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 03 / 2016
Transaction ID : SA11A.465380
 Amount of Each Receipt this Period
 200.00
 Memo Item
 CONTRIBUTION

C. TABER, JUDITH, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1421 BRIGHTON ST.
 City LA HABRA State CA Zip Code 90631-3201
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 04 / 2016
Transaction ID : SA11A.473781
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	400.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3653 OF 4311
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. TACCAD, GLORIA, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 307 E. 44TH ST.
211

City NEW YORK	State NY	Zip Code 10017-4400
------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
245.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	06	/	2016

Transaction ID : SA11A.476841

Amount of Each Receipt this Period
25.00

Memo Item
CONTRIBUTION

B. TADLOCK, BETTY, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 407 CLEAR CREEK MDWS. DR.

City LEAGUE CITY	State TX	Zip Code 77573-9067
---------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
375.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	26	/	2016

Transaction ID : SA11A.451210

Amount of Each Receipt this Period
100.00

Memo Item
CONTRIBUTION

C. TADLOCK, BETTY, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 407 CLEAR CREEK MDWS. DR.

City LEAGUE CITY	State TX	Zip Code 77573-9067
---------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
375.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	07	/	2016

Transaction ID : SA11A.475175

Amount of Each Receipt this Period
25.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	150.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3654 OF 4311
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. TAFEL, BROOK, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 2117 STARMONT RD

City LOUISVILLE	State KY	Zip Code 40207-1140
--------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) BROOK TAFEL	Occupation (for Individual) MANAGER
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
400.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		28		2016

Transaction ID : SA11A.455620

Amount of Each Receipt this Period
100.00

Memo Item CONTRIBUTION

B. TAFEL, BROOK, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 2117 STARMONT RD

City LOUISVILLE	State KY	Zip Code 40207-1140
--------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) BROOK TAFEL	Occupation (for Individual) MANAGER
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
400.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11		04		2016

Transaction ID : SA11A.470355

Amount of Each Receipt this Period
100.00

Memo Item CONTRIBUTION

C. TAFF, TOM, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 10446 LENNOX LN

City DALLAS	State TX	Zip Code 75229-6512
----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11		06		2016

Transaction ID : SA11A.476902

Amount of Each Receipt this Period
250.00

Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	450.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3655 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. TAGGART, MARC, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 831 CANYON AVENUE
 City CODY State WY Zip Code 82414-4108
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) CUSTOM WESTERN FURNITURE
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 700.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 06 / 2016
Transaction ID : SA11A.476793
 Amount of Each Receipt this Period
 250.00
 Memo Item CONTRIBUTION

B. TAGGART, MARC, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 831 CANYON AVENUE
 City CODY State WY Zip Code 82414-4108
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) CUSTOM WESTERN FURNITURE
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 700.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 06 / 2016
Transaction ID : SA11A.476804
 Amount of Each Receipt this Period
 250.00
 Memo Item CONTRIBUTION

C. TAGGART, MARC, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 831 CANYON AVENUE
 City CODY State WY Zip Code 82414-4108
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) CUSTOM WESTERN FURNITURE
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 700.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 28 / 2016
Transaction ID : SA11A.481105
 Amount of Each Receipt this Period
 200.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	700.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3656 OF 4311
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. TAGHER, CHARBEL, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 210 EVANS WAY

City SOMERVILLE	State NJ	Zip Code 08876-3767
--------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) STI	Occupation (for Individual) EXECUTIVE
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		27		2016

Transaction ID : SA11A.456702

Amount of Each Receipt this Period
250.00

Memo Item
CONTRIBUTION

B. TAGHER, CHARBEL, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 210 EVANS WAY

City SOMERVILLE	State NJ	Zip Code 08876-3767
--------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) STI	Occupation (for Individual) EXECUTIVE
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		31		2016

Transaction ID : SA11A.458977

Amount of Each Receipt this Period
250.00

Memo Item
CONTRIBUTION

C. TAGHER, CHARBEL, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 210 EVANS WAY

City SOMERVILLE	State NJ	Zip Code 08876-3767
--------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) STI	Occupation (for Individual) EXECUTIVE
--	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
1500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		30		2016

Transaction ID : SA11A.459357

Amount of Each Receipt this Period
250.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	750.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3657 OF 4311
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. TAGHER, CHARBEL, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 210 EVANS WAY
 City SOMERVILLE State NJ Zip Code 08876-3767
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) STI Occupation (for Individual) EXECUTIVE
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1500.00

Date of Receipt 10 / 30 / 2016
Transaction ID : SA11A.459360
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

B. TAGHER, CHARBEL, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 210 EVANS WAY
 City SOMERVILLE State NJ Zip Code 08876-3767
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) STI Occupation (for Individual) EXECUTIVE
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1500.00

Date of Receipt 10 / 30 / 2016
Transaction ID : SA11A.459361
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

C. TAGHER, CHARBEL, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 210 EVANS WAY
 City SOMERVILLE State NJ Zip Code 08876-3767
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) STI Occupation (for Individual) EXECUTIVE
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1500.00

Date of Receipt 11 / 02 / 2016
Transaction ID : SA11A.467105
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 750.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3658 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. TALBERT, LARRY, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 104 CAMPUS DRIVE
SWEET 100

City DESTREHAN State LA Zip Code 70047-

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) TALSON, INC Occupation (for Individual) ENGINEER

Receipt For: Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 235.00

Date of Receipt 11 / 03 / 2016
Transaction ID : SA11A.469082

Amount of Each Receipt this Period 50.00

Memo Item CONTRIBUTION

B. TALBERT, LARRY, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 104 CAMPUS DRIVE
SWEET 100

City DESTREHAN State LA Zip Code 70047-

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) TALSON, INC Occupation (for Individual) ENGINEER

Receipt For: Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 235.00

Date of Receipt 11 / 04 / 2016
Transaction ID : SA11A.471648

Amount of Each Receipt this Period 30.00

Memo Item CONTRIBUTION

C. TALBOT, CLAY, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 222 DECKBAR AVE.
APT 139

City JEFFERSON State LA Zip Code 70121-3906

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED

Receipt For: Primary General
 Other (specify)

Aggregate Year-to-Date ▼ 305.00

Date of Receipt 10 / 29 / 2016
Transaction ID : SA11A.461131

Amount of Each Receipt this Period 50.00

Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶ 130.00

TOTAL This Period (last page this line number only).....▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3659 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
Team Ryan

A. TALBOT, CLAY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 222 DECKBAR AVE.
 APT 139
 City JEFFERSON State LA Zip Code 70121-3906
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 305.00

Date of Receipt
 11 / 07 / 2016
Transaction ID : SA11A.476222
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

B. TALBOT, RICHARD, J., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 65 BERKELEY ST
 City PORTLAND State ME Zip Code 04103-3137
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 259.00

Date of Receipt
 10 / 21 / 2016
Transaction ID : SA11A.444444
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

C. TALLEY, BARRY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 7475 E GAINEY RANCH RD. #29
 City SCOTTSDALE State AZ Zip Code 85258-1523
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 450.00

Date of Receipt
 11 / 02 / 2016
Transaction ID : SA11A.466585
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	175.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3660 OF 4311
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
Team Ryan

A. TAMBAKERAS, MARKOA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 8485 E MCDONALD DR
 PMB 369
 City SCOTTSDALE State AZ Zip Code 85250-6335
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 10 / 20 / 2016
Transaction ID : SA11A.444778
 Amount of Each Receipt this Period 500.00
 Memo Item CONTRIBUTION

B. TAN, REBECCA, , MRS.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3304 CANOE BROOK PARKWAY
 City RALEIGH State NC Zip Code 27614-8686
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 10 / 20 / 2016
Transaction ID : SA11A.442121
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

C. TAN, REBECCA, , MRS.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3304 CANOE BROOK PARKWAY
 City RALEIGH State NC Zip Code 27614-8686
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 11 / 02 / 2016
Transaction ID : SA11A.466800
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶ 650.00
TOTAL This Period (last page this line number only).....▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3661 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. TANAKA, GEORGE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 867 FINCH WAY
 City FAIRFIELD State CA Zip Code 94533-2309
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 297.00

Date of Receipt 10 / 29 / 2016
Transaction ID : SA11A.461052
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

B. TANDY, A., , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 6910 EAST 109TH PLACE
 City TULSA State OK Zip Code 74133-7117
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 10 / 26 / 2016
Transaction ID : SA11A.449969
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

C. TANDY, A., , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 6910 EAST 109TH PLACE
 City TULSA State OK Zip Code 74133-7117
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 10 / 26 / 2016
Transaction ID : SA11A.449970
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	525.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3662 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. TANEYHILL, JAMES, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5323 PATTERSON RD
 City BALDWIN State MD Zip Code 21013-9363
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 22 / 2016
Transaction ID : SA11A.446877
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION

B. TANEYHILL, JAMES, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5323 PATTERSON RD
 City BALDWIN State MD Zip Code 21013-9363
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 04 / 2016
Transaction ID : SA11A.472173
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION

C. TANGALAKIS, HARRY, G., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5571 BAYVIEW DRIVE
 City FORT LAUDERDALE State FL Zip Code 33308-3441
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) HARRY TANGALAKIS Occupation (for Individual) REAL ESTATE SALESMAN
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 725.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 25 / 2016
Transaction ID : SA11A.449009
 Amount of Each Receipt this Period
 250.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	450.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3663 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. TANGALAKIS, HARRY, G., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5571 BAYVIEW DRIVE
 City FORT LAUDERDALE State FL Zip Code 33308-3441
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) HARRY TANGALAKIS Occupation (for Individual) REAL ESTATE SALESMAN
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 725.00

Date of Receipt 10 / 25 / 2016
Transaction ID : SA11A.451742
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

B. TANNER, DAVID, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 9363 WILLOW POND CIRCLE
 City ELK GROVE State CA Zip Code 95624-1266
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SACRAMENTO ASSN OF REALTORS Occupation (for Individual) CEO
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 600.00

Date of Receipt 11 / 04 / 2016
Transaction ID : SA11A.473109
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

C. TANNER, RALPH, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 209 COLLEGE STREET
 City OXFORD State NC Zip Code 27565-2911
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 10 / 26 / 2016
Transaction ID : SA11A.449760
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	450.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3664 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. TANNER, RICHARD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1583 W. ALPINE AVE
 City HEBER CITY State UT Zip Code 84032-4336
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 350.00

Date of Receipt 10 / 30 / 2016
Transaction ID : SA11A.459333
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

B. TANNER, ROBERT, B., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO BOX 4485
 City CHARLOTTESVILLE State VA Zip Code 22905-4485
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 10 / 31 / 2016
Transaction ID : SA11A.457352
 Amount of Each Receipt this Period 500.00
 Memo Item CONTRIBUTION

C. TAPP, F, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 209 FRENCH PARK PL 103
 City EDMOND State OK Zip Code 73034-7201
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 825.00

Date of Receipt 10 / 26 / 2016
Transaction ID : SA11A.450879
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 650.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3665 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name A. TAPP, F, , ,		Date of Receipt MM / DD / YYYY 11 / 07 / 2016
Mailing Address 209 FRENCH PARK PL 103		Transaction ID : SA11A.476358
City EDMOND	State OK	Zip Code 73034-7201
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 50.00
Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED	<input type="checkbox"/> Memo Item CONTRIBUTION
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 825.00	

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name B. TARAFDER, ABU, Y., ,		Date of Receipt MM / DD / YYYY 11 / 01 / 2016
Mailing Address 48 CLARKE STREET		Transaction ID : SA11A.461669
City BRENTWOOD	State NY	Zip Code 11717-2024
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 35.00
Name of Employer (for Individual) LNK INTERNATIONAL, INC	Occupation (for Individual) SUPERVISOR	<input type="checkbox"/> Memo Item CONTRIBUTION
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 320.00	

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name C. TARLTON, MARVIN, R., MR.,		Date of Receipt MM / DD / YYYY 11 / 05 / 2016
Mailing Address 6102 LAWYERS ROAD EAST		Transaction ID : SA11A.479070
City MARSHVILLE	State NC	Zip Code 28103-9049
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 100.00
Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED	<input type="checkbox"/> Memo Item CONTRIBUTION
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Aggregate Year-to-Date ▼ 400.00	

SUBTOTAL of Receipts This Page (optional).....▶	185.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3666 OF 4311
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. TARLTON, MARVIN, R., MR.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 6102 LAWYERS ROAD EAST
City MARSHVILLE State NC Zip Code 28103-9049
FEC ID number of contributing federal political committee. **C**
Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 400.00

Date of Receipt 11 / 05 / 2016
Transaction ID : SA11A.479073
Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

B. TASHJIAN, CHARLES, A., , JR.
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 56 DARTMOUTH STREET
City MEDFORD State MA Zip Code 02155-5950
FEC ID number of contributing federal political committee. **C**
Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 250.00

Date of Receipt 11 / 04 / 2016
Transaction ID : SA11A.467495
Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

C. TATE, STANLEY, G., MR.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 1175 NE 125 STREET, SUITE 102 102
City NORTH MIAMI State FL Zip Code 33161-5009
FEC ID number of contributing federal political committee. **C**
Name of Employer (for Individual) TATE ENTERPRISES Occupation (for Individual) OWNER
Receipt For: Primary General Other (specify)
Aggregate Year-to-Date ▼ 16000.00

Date of Receipt 10 / 21 / 2016
Transaction ID : SA11A.444425
Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 250.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3667 OF 4311
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. TATE, STANLEY, G., MR.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1175 NE 125 STREET, SUITE 102
102

City NORTH MIAMI State FL Zip Code 33161-5009

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) TATE ENTERPRISES Occupation (for Individual) OWNER

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
16000.00

Date of Receipt
M M M / D D D / Y Y Y Y Y Y
10 / 28 / 2016

Transaction ID : SA11A.449667

Amount of Each Receipt this Period
15000.00

Memo Item
CONTRIBUTION

B. TATE, STANLEY, G., MR.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1175 NE 125 STREET, SUITE 102
102

City NORTH MIAMI State FL Zip Code 33161-5009

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) TATE ENTERPRISES Occupation (for Individual) OWNER

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
16000.00

Date of Receipt
M M M / D D D / Y Y Y Y Y Y
11 / 01 / 2016

Transaction ID : SA11A.462393

Amount of Each Receipt this Period
150.00

Memo Item
CONTRIBUTION

C. TAUBER, KEN, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 94 DWIGHT PL.

City ENGLEWOOD State NJ Zip Code 07631-3606

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
350.00

Date of Receipt
M M M / D D D / Y Y Y Y Y Y
10 / 20 / 2016

Transaction ID : SA11A.444676

Amount of Each Receipt this Period
150.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 15300.00

TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3668 OF 4311
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
Team Ryan

A. TAUBER, KEN, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 94 DWIGHT PL.

City ENGLEWOOD	State NJ	Zip Code 07631-3606
-------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
350.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	01	/	2016

Transaction ID : SA11A.462227

Amount of Each Receipt this Period
100.00

Memo Item CONTRIBUTION

B. TAUBER, KEN, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 94 DWIGHT PL.

City ENGLEWOOD	State NJ	Zip Code 07631-3606
-------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
350.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	01	/	2016

Transaction ID : SA11A.462228

Amount of Each Receipt this Period
100.00

Memo Item CONTRIBUTION

C. TAULBEE, JOHN, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 2434 MOUNT VERNON DR.

City FAIRFIELD	State OH	Zip Code 45014-3906
-------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
232.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	30	/	2016

Transaction ID : SA11A.460046

Amount of Each Receipt this Period
50.00

Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	250.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3669 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
Team Ryan

A. TAYLOR, ALLEN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 8030 FRANKFORD RD
 429
 City DALLAS State TX Zip Code 75252-6835
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 900.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 26 / 2016
Transaction ID : SA11A.450202
 Amount of Each Receipt this Period
 250.00
 Memo Item CONTRIBUTION

B. TAYLOR, ALLEN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 8030 FRANKFORD RD
 429
 City DALLAS State TX Zip Code 75252-6835
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 900.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 26 / 2016
Transaction ID : SA11A.450213
 Amount of Each Receipt this Period
 250.00
 Memo Item CONTRIBUTION

C. TAYLOR, CALVIN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2681 W. HWY. 5
 City WHITESBURG State GA Zip Code 30185-3318
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 29 / 2016
Transaction ID : SA11A.461087
 Amount of Each Receipt this Period
 100.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	600.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3670 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. TAYLOR, CALVIN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2681 W. HWY. 5
 City WHITESBURG State GA Zip Code 30185-3318
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 04 / 2016
Transaction ID : SA11A.472428
 Amount of Each Receipt this Period
 100.00
 Memo Item
CONTRIBUTION

B. TAYLOR, CHRISTOPHER, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 313 SADDLE RIDGE DR.
 City KNOXVILLE State TN Zip Code 37934-7405
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) PHYSICIAN
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 750.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 25 / 2016
Transaction ID : SA11A.448439
 Amount of Each Receipt this Period
 250.00
 Memo Item
CONTRIBUTION

C. TAYLOR, CHRISTOPHER, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 313 SADDLE RIDGE DR.
 City KNOXVILLE State TN Zip Code 37934-7405
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) PHYSICIAN
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 750.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 25 / 2016
Transaction ID : SA11A.448441
 Amount of Each Receipt this Period
 250.00
 Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	600.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3671 OF 4311
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. TAYLOR, CHRISTOPHER, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 313 SADDLE RIDGE DR.

City KNOXVILLE	State TN	Zip Code 37934-7405
-------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) SELF EMPLOYED	Occupation (for Individual) PHYSICIAN
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
750.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
10		27		2016

Transaction ID : SA11A.453474

Amount of Each Receipt this Period
250.00

Memo Item
CONTRIBUTION

B. TAYLOR, CHRISTINE, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 12220 PEBBLEPOINTE PASS

City CARMEL	State IN	Zip Code 46033-9681
----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1200.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
11		04		2016

Transaction ID : SA11A.473933

Amount of Each Receipt this Period
600.00

Memo Item
CONTRIBUTION

C. TAYLOR, HARRY, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1953 S. VIEW DR.

City FORT COLLINS	State CO	Zip Code 80524-5012
----------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
1305.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
10		20		2016

Transaction ID : SA11A.444829

Amount of Each Receipt this Period
100.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	950.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3672 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. TAYLOR, HARRY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1953 S. VIEW DR.
 City FORT COLLINS State CO Zip Code 80524-5012
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1305.00

Date of Receipt 10 / 20 / 2016
Transaction ID : SA11A.444830
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

B. TAYLOR, HARRY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1953 S. VIEW DR.
 City FORT COLLINS State CO Zip Code 80524-5012
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1305.00

Date of Receipt 10 / 31 / 2016
Transaction ID : SA11A.458949
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

C. TAYLOR, HARRY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1953 S. VIEW DR.
 City FORT COLLINS State CO Zip Code 80524-5012
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1305.00

Date of Receipt 11 / 04 / 2016
Transaction ID : SA11A.472272
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	300.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3673 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. TAYLOR, HATSY, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 60 LOCUST HILL ROAD

City EAST CANAAN	State CT	Zip Code 06024-2621
---------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	08	/	2016

Transaction ID : SA11A.468157

Amount of Each Receipt this Period
200.00

Memo Item CONTRIBUTION

B. TAYLOR, JEFFREY, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 7870 MARKET ST

City YOUNGSTOWN	State OH	Zip Code 44512-5963
--------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) TAYLOR OF BOAR	Occupation (for Individual) SALES
---	--------------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	04	/	2016

Transaction ID : SA11A.470337

Amount of Each Receipt this Period
250.00

Memo Item CONTRIBUTION

C. TAYLOR, JUDITH, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 3103 BROOKSHIRE WAY

City DULUTH	State GA	Zip Code 30096-3601
----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
325.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	05	/	2016

Transaction ID : SA11A.478626

Amount of Each Receipt this Period
100.00

Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	550.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3674 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. TAYLOR, JUDITH, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3103 BROOKSHIRE WAY
 City DULUTH State GA Zip Code 30096-3601
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 325.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 11 / 05 / 2016
Transaction ID : SA11A.478628
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION

B. TAYLOR, JUDITH, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3103 BROOKSHIRE WAY
 City DULUTH State GA Zip Code 30096-3601
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 325.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 11 / 05 / 2016
Transaction ID : SA11A.478629
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION

C. TAYLOR, NANCY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 227 PIPING TO K RD
 City LOCUST VALLEY State NY Zip Code 11560-2504
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 1350.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 10 / 21 / 2016
Transaction ID : SA11A.447227
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	300.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3675 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. TAYLOR, NANCY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 227 PIPING TO K RD
 City LOCUST VALLEY State NY Zip Code 11560-2504
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1350.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 21 / 2016
Transaction ID : SA11A.447228
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION

B. TAYLOR, NANCY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 227 PIPING TO K RD
 City LOCUST VALLEY State NY Zip Code 11560-2504
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1350.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 21 / 2016
Transaction ID : SA11A.447229
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION

C. TAYLOR, NANCY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 227 PIPING TO K RD
 City LOCUST VALLEY State NY Zip Code 11560-2504
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1350.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 05 / 2016
Transaction ID : SA11A.480957
 Amount of Each Receipt this Period
 250.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	450.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3676 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. TAYLOR, NANCY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 227 PIPING TO K RD
 City LOCUST VALLEY State NY Zip Code 11560-2504
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1350.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 11 / 05 / 2016
Transaction ID : SA11A.480958
 Amount of Each Receipt this Period
 250.00
 Memo Item
 CONTRIBUTION

B. TAYLOR, PATRICK, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1017 N. PEPPERTREE DRIVE
 City DRAPER State AZ Zip Code 85234-4953
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 10 / 29 / 2016
Transaction ID : SA11A.461049
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION

C. TAYLOR, PETER, J., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 301 MONROE STREET
 City DENVER State CO Zip Code 80206-4444
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) DECON LABS Occupation (for Individual) CEO
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 650.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 10 / 22 / 2016
Transaction ID : SA11A.446682
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	450.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3677 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. TAYLOR, PETER, J., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 301 MONROE STREET
 City DENVER State CO Zip Code 80206-4444
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) DECON LABS Occupation (for Individual) CEO
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 650.00

Date of Receipt 10 / 22 / 2016
Transaction ID : SA11A.446683
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

B. TAYLOR, RICHARD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1718 TIN CUP
 City MAHOMET State IL Zip Code 61853-9296
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) REAL ESTATE
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 205.00

Date of Receipt 10 / 30 / 2016
Transaction ID : SA11A.460180
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

C. TAYLOR, RICHARD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2550 N ADRIAN HWY
 City ADRIAN State MI Zip Code 49221-1754
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt 11 / 04 / 2016
Transaction ID : SA11A.472711
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	250.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 3678 OF 4311
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. TAYLOR, ROBERT, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 9925 HUNTCLIFF TRACE

City ATLANTA	State GA	Zip Code 30350-2717
-----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) BENNETT THRASHER LLP	Occupation (for Individual) CPA/CONSULTANT
---	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	20	/	2016

Transaction ID : SA11A.442415

Amount of Each Receipt this Period
250.00

Memo Item
CONTRIBUTION

B. TAYLOR, ROBERT, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 9925 HUNTCLIFF TRACE

City ATLANTA	State GA	Zip Code 30350-2717
-----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) BENNETT THRASHER LLP	Occupation (for Individual) CPA/CONSULTANT
---	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	04	/	2016

Transaction ID : SA11A.472995

Amount of Each Receipt this Period
250.00

Memo Item
CONTRIBUTION

C. TAYLOR, SUSAN, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 6248 FOREST PRESERVE ROAD

City ROCKTON	State IL	Zip Code 61072-9589
-----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) TAYLORBUILT FARM	Occupation (for Individual) SELF EMPLOYED
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
750.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	24	/	2016

Transaction ID : SA11A.446185

Amount of Each Receipt this Period
250.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	750.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3679 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. TAYLOR, VICTOR, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address POB 2071

City MCKINLEYVILLE	State CA	Zip Code 95519-2071
-----------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
300.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 31 / 2016

Transaction ID : SA11A.463250

Amount of Each Receipt this Period
100.00

Memo Item
CONTRIBUTION

B. TEAGUE, RANDY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 11115 HERMITAGE RD

City LITTLE ROCK	State AR	Zip Code 72211-3807
---------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) RANDALL TEAGUE O.D.	Occupation (for Individual) OPTOMETRIST
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 25 / 2016

Transaction ID : SA11A.448184

Amount of Each Receipt this Period
250.00

Memo Item
CONTRIBUTION

C. TEAGUE, RICHARD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4600 COTTONWOOD LANE

City VERNON	State TX	Zip Code 76384-5702
----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) TEXAS A&M AGRILIFE RESEARCH	Occupation (for Individual) RESEARCH SCIENTIST
--	---

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
1500.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 21 / 2016

Transaction ID : SA11A.444583

Amount of Each Receipt this Period
250.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	600.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3680 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. TEAGUE, RICHARD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4600 COTTONWOOD LANE
 City VERNON State TX Zip Code 76384-5702
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) TEXAS A&M AGRILIFE RESEARCH Occupation (for Individual) RESEARCH SCIENTIST
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1500.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 04 / 2016
Transaction ID : SA11A.472663
 Amount of Each Receipt this Period
 250.00
 Memo Item
 CONTRIBUTION

B. TEAL, MARY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2671 BEDFORD ROAD
 City ANN ARBOR State MI Zip Code 48104-4009
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 04 / 2016
Transaction ID : SA11A.473311
 Amount of Each Receipt this Period
 50.00
 Memo Item
 CONTRIBUTION

C. TECHENTIN, ELAYNE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 640 MAGNOLIA AVENUE
 City PASADENA State CA Zip Code 91106-3622
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) INFORMATION REQUESTED PER BEST EFFORTS Occupation (for Individual) INFORMATION REQUESTED PER BEST EFFORTS
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 17 / 2016
Transaction ID : SA11A.468405
 Amount of Each Receipt this Period
 500.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	800.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3681 OF 4311
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. TEDESCHI, KEVIN, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 20 HERON WAY

City DUXBURY	State MA	Zip Code 02332-4536
-----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) INFORMATION REQUESTED PER BEST EFFORTS	Occupation (for Individual) INFORMATION REQUESTED PER BE
---	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
2000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		27		2016

Transaction ID : SA11A.452415

Amount of Each Receipt this Period
2000.00

Memo Item
CONTRIBUTION

B. TEDESCHI, RONALD, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 333 GARFIELD AVE.

City WEST HEMPSTEAD	State NY	Zip Code 11552-1903
------------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
210.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		21		2016

Transaction ID : SA11A.444596

Amount of Each Receipt this Period
25.00

Memo Item
CONTRIBUTION

C. TEDESCHI, RONALD, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 333 GARFIELD AVE.

City WEST HEMPSTEAD	State NY	Zip Code 11552-1903
------------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
210.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11		01		2016

Transaction ID : SA11A.462743

Amount of Each Receipt this Period
50.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	2075.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3682 OF 4311
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. TELL, KAREN, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 100 ROYAL PALM WAY
3G

City PALM BEACH State FL Zip Code 33480-4213

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1000.00

Date of Receipt
11 / 01 / 2016
Transaction ID : SA11A.462780

Amount of Each Receipt this Period
250.00

Memo Item CONTRIBUTION

B. TEMPLE, G., , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address P. O. BOX 5 / 1644 US 3 NORTH

City TWIN MOUNTAIN State NH Zip Code 03595-0005

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
339.00

Date of Receipt
10 / 27 / 2016
Transaction ID : SA11A.453903

Amount of Each Receipt this Period
40.00

Memo Item CONTRIBUTION

C. TEMPLE, G., , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address P. O. BOX 5 / 1644 US 3 NORTH

City TWIN MOUNTAIN State NH Zip Code 03595-0005

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
339.00

Date of Receipt
11 / 04 / 2016
Transaction ID : SA11A.474115

Amount of Each Receipt this Period
40.00

Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 330.00

TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3683 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. TENG, CHENG, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 909 HOLLY COURT
 City NORTHBROOK State IL Zip Code 60062-4720
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 10 / 27 / 2016
Transaction ID : SA11A.456749
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

B. TENG, CHENG, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 909 HOLLY COURT
 City NORTHBROOK State IL Zip Code 60062-4720
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 10 / 27 / 2016
Transaction ID : SA11A.456758
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

C. TERLEP, TIMOTHY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4530 GOLF CLUB LANE
 City SPRING HILL State FL Zip Code 34609-0303
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) CHIROPRACTIC PHYSICIAN
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 325.00

Date of Receipt 11 / 05 / 2016
Transaction ID : SA11A.478750
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 225.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3684 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. TERRANOVA, PATRICK, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 6845 N HIGHLANDS DRIVE
 City PARADISE VALLEY State AZ Zip Code 85253-3228
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) INTEL CORPORATION Occupation (for Individual) ATTORNEY
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 275.00

Date of Receipt 11 / 01 / 2016
Transaction ID : SA11A.467337
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

B. TERRELL, CLIFFORD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2717 S 400 E
 City KOKOMO State IN Zip Code 46902-9348
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 11 / 04 / 2016
Transaction ID : SA11A.479399
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

C. TERRELL, CLIFFORD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2717 S 400 E
 City KOKOMO State IN Zip Code 46902-9348
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 11 / 04 / 2016
Transaction ID : SA11A.479400
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	200.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3685 OF 4311
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. TERRY, TOM, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address **5813 WINTERHAVEN DRIVE**

City **WINDCREST** State **TX** Zip Code **78239-2019**

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) **ARCHDIOCESE OF SA** Occupation (for Individual) **INTERVENTIONIST**

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **243.00**

Date of Receipt **10 / 28 / 2016**

Transaction ID : SA11A.456103

Amount of Each Receipt this Period **27.00**

Memo Item CONTRIBUTION

B. TERRY, TOM, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address **5813 WINTERHAVEN DRIVE**

City **WINDCREST** State **TX** Zip Code **78239-2019**

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) **ARCHDIOCESE OF SA** Occupation (for Individual) **INTERVENTIONIST**

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **243.00**

Date of Receipt **11 / 02 / 2016**

Transaction ID : SA11A.469720

Amount of Each Receipt this Period **54.00**

Memo Item CONTRIBUTION

C. TERRY, TOM, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address **5813 WINTERHAVEN DRIVE**

City **WINDCREST** State **TX** Zip Code **78239-2019**

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) **ARCHDIOCESE OF SA** Occupation (for Individual) **INTERVENTIONIST**

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼ **243.00**

Date of Receipt **11 / 04 / 2016**

Transaction ID : SA11A.471065

Amount of Each Receipt this Period **27.00**

Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... **108.00**

TOTAL This Period (last page this line number only).....

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3686 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
Team Ryan

A. TERRY, TOM, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5813 WINTERHAVEN DRIVE
 City WINDCREST State TX Zip Code 78239-2019
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) ARCHDIOCESE OF SA Occupation (for Individual) INTERVENTIONIST
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 243.00

Date of Receipt 11 / 07 / 2016
Transaction ID : SA11A.475509
 Amount of Each Receipt this Period 27.00
 Memo Item CONTRIBUTION

B. TESTA, ROBERT, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 118 EMERSON AVE
 City NOVATO State CA Zip Code 94949-6161
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) WELLS FARGO BANK Occupation (for Individual) PROJECT MGR
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt 10 / 24 / 2016
Transaction ID : SA11A.445590
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

C. TESTA, ROBERT, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 118 EMERSON AVE
 City NOVATO State CA Zip Code 94949-6161
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) WELLS FARGO BANK Occupation (for Individual) PROJECT MGR
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt 10 / 29 / 2016
Transaction ID : SA11A.460667
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	177.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3687 OF 4311
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. TESTA, ROBERT, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 118 EMERSON AVE
City NOVATO State CA Zip Code 94949-6161
FEC ID number of contributing federal political committee. **C**
Name of Employer (for Individual) WELLS FARGO BANK Occupation (for Individual) PROJECT MGR
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 400.00

Date of Receipt 10 / 29 / 2016
Transaction ID : SA11A.460669
Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

B. TETRICK, DAVID, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 1533 HASTINGS MILL ROAD
City PITTSBURGH State PA Zip Code 15241-2856
FEC ID number of contributing federal political committee. **C**
Name of Employer (for Individual) HUNTINGTON BANK Occupation (for Individual) BANKER
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 275.00

Date of Receipt 11 / 01 / 2016
Transaction ID : SA11A.462320
Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

C. TETRICK, DAVID, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 1533 HASTINGS MILL ROAD
City PITTSBURGH State PA Zip Code 15241-2856
FEC ID number of contributing federal political committee. **C**
Name of Employer (for Individual) HUNTINGTON BANK Occupation (for Individual) BANKER
Receipt For: Primary General Other (specify)
Aggregate Year-to-Date ▼ 275.00

Date of Receipt 11 / 07 / 2016
Transaction ID : SA11A.474596
Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶ 125.00
TOTAL This Period (last page this line number only).....▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3688 OF 4311
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. TETRICK, DAVID, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 1533 HASTINGS MILL ROAD
City PITTSBURGH State PA Zip Code 15241-2856
FEC ID number of contributing federal political committee. **C**
Name of Employer (for Individual) HUNTINGTON BANK Occupation (for Individual) BANKER
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 275.00

Date of Receipt 11 / 05 / 2016
Transaction ID : SA11A.478372
Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

B. TEUSCHER, DUANE, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 7 NORTHCASTLE CT
City THE WOODLANDS State TX Zip Code 77384-4722
FEC ID number of contributing federal political committee. **C**
Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 300.00

Date of Receipt 10 / 31 / 2016
Transaction ID : SA11A.458038
Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

C. TEUSCHER, DUANE, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 7 NORTHCASTLE CT
City THE WOODLANDS State TX Zip Code 77384-4722
FEC ID number of contributing federal political committee. **C**
Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
Receipt For: Primary General Other (specify)
Aggregate Year-to-Date ▼ 300.00

Date of Receipt 10 / 30 / 2016
Transaction ID : SA11A.459545
Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶ 125.00
TOTAL This Period (last page this line number only).....▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3689 OF 4311
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. TEUSCHER, DUANE, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 7 NORTHCASTLE CT

City THE WOODLANDS	State TX	Zip Code 77384-4722
-----------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
300.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	04	/	2016

Transaction ID : SA11A.474262

Amount of Each Receipt this Period
50.00

Memo Item CONTRIBUTION

B. TEUSCHER, DUANE, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 7 NORTHCASTLE CT

City THE WOODLANDS	State TX	Zip Code 77384-4722
-----------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
300.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	07	/	2016

Transaction ID : SA11A.475533

Amount of Each Receipt this Period
25.00

Memo Item CONTRIBUTION

C. TEXIER-BARISH, MARGUERITE, , MS.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 245 E 54TH STREET
APT 20N

City NEW YORK	State NY	Zip Code 10022-4722
------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
800.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	25	/	2016

Transaction ID : SA11A.447524

Amount of Each Receipt this Period
100.00

Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	175.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3690 OF 4311
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. THACKSTON, JR., G., , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 6100 LAKE FORREST DRIVE
 104
 City SANDY SPRINGS State GA Zip Code 30328-3822
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) ATTORNEY
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 375.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 26 / 2016
Transaction ID : SA11A.451107
 Amount of Each Receipt this Period
 50.00
 Memo Item
 CONTRIBUTION

B. THACKSTON, JR., G., , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 6100 LAKE FORREST DRIVE
 104
 City SANDY SPRINGS State GA Zip Code 30328-3822
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) ATTORNEY
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 375.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 02 / 2016
Transaction ID : SA11A.466916
 Amount of Each Receipt this Period
 50.00
 Memo Item
 CONTRIBUTION

C. THACKSTON, JR., G., , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 6100 LAKE FORREST DRIVE
 104
 City SANDY SPRINGS State GA Zip Code 30328-3822
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) ATTORNEY
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 375.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 02 / 2016
Transaction ID : SA11A.466935
 Amount of Each Receipt this Period
 50.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶ 150.00
TOTAL This Period (last page this line number only).....▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3691 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. THACKSTON, JR., G., , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 6100 LAKE FORREST DRIVE
 104
 City SANDY SPRINGS State GA Zip Code 30328-3822
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) ATTORNEY
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 375.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 04 / 2016
Transaction ID : SA11A.472458
 Amount of Each Receipt this Period
 50.00
 Memo Item
 CONTRIBUTION

B. THACKSTON, JR., G., , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 6100 LAKE FORREST DRIVE
 104
 City SANDY SPRINGS State GA Zip Code 30328-3822
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) ATTORNEY
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 375.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 04 / 2016
Transaction ID : SA11A.473751
 Amount of Each Receipt this Period
 25.00
 Memo Item
 CONTRIBUTION

C. THACKER, JAMES, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 15101 CARRIE DR
 City GRASS VALLEY State CA Zip Code 95949-6406
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 225.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 04 / 2016
Transaction ID : SA11A.471694
 Amount of Each Receipt this Period
 50.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 125.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3692 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. THACKER, JAMES, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 15101 CARRIE DR
 City GRASS VALLEY State CA Zip Code 95949-6406
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 225.00

Date of Receipt **11 / 08 / 2016**
Transaction ID : SA11A.479692
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

B. THACKARA, JOHN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5 AZALEA LN
 City SAN CARLOS State CA Zip Code 94070-1517
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) INVENTOR
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt **10 / 21 / 2016**
Transaction ID : SA11A.444415
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

C. THAYER, E., J., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2307 STAGECOACH ROAD
 City GRAND ISLAND State NE Zip Code 68801-7347
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) THE AGRICULTURAL LAB, CO Occupation (for Individual) SALES
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt **11 / 01 / 2016**
Transaction ID : SA11A.461860
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	525.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3693 OF 4311
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. THEISEN, JUDITH, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 150 SPRING MEADOWS DRIVE

City SUMMERVILLE State SC Zip Code 29485-8792

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 248.00

Date of Receipt 10 / 29 / 2016

Transaction ID : SA11A.461009

Amount of Each Receipt this Period 50.00

Memo Item CONTRIBUTION

B. THEISEN, JUDITH, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 150 SPRING MEADOWS DRIVE

City SUMMERVILLE State SC Zip Code 29485-8792

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 248.00

Date of Receipt 10 / 28 / 2016

Transaction ID : SA11A.461519

Amount of Each Receipt this Period 50.00

Memo Item CONTRIBUTION

C. THEIS, MARY, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 6130 MISSION DR

City MISSION HILLS State KS Zip Code 66208-1249

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED

Receipt For: Primary General Other (specify)

Aggregate Year-to-Date ▼ 2900.00

Date of Receipt 10 / 20 / 2016

Transaction ID : SA11A.442193

Amount of Each Receipt this Period 1000.00

Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 1100.00

TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3694 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. THEIS, MARY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 6130 MISSION DR
 City MISSION HILLS State KS Zip Code 66208-1249
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 2900.00

Date of Receipt 10 / 20 / 2016
Transaction ID : SA11A.442196
 Amount of Each Receipt this Period 1000.00
 Memo Item CONTRIBUTION

B. THEIS, MARY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 6130 MISSION DR
 City MISSION HILLS State KS Zip Code 66208-1249
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 2900.00

Date of Receipt 11 / 03 / 2016
Transaction ID : SA11A.468966
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

C. THEIS, MARY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 6130 MISSION DR
 City MISSION HILLS State KS Zip Code 66208-1249
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 2900.00

Date of Receipt 11 / 03 / 2016
Transaction ID : SA11A.468969
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 1200.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3696 OF 4311
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. THEUER, JAMES, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 608 REDGATE AVE

City NORFOLK State VA Zip Code 23507-1702

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) ATTORNEY

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt
10 / 31 / 2016
Transaction ID : SA11A.464720

Amount of Each Receipt this Period
250.00

Memo Item CONTRIBUTION

B. THEURER, MARGARET, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 152 TREEHAVEN STREET

City GAITHERSBURG State MD Zip Code 20878-5747

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt
10 / 27 / 2016
Transaction ID : SA11A.452282

Amount of Each Receipt this Period
50.00

Memo Item CONTRIBUTION

C. THIEMAN, TOM, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 100 GILBERG ST

City NEW BREMEN State OH Zip Code 45869-1286

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼ 997.00

Date of Receipt
10 / 25 / 2016
Transaction ID : SA11A.448462

Amount of Each Receipt this Period
250.00

Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 550.00

TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3697 OF 4311
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. THODE, RICHARD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 9704 EAST 84TH STREET
 City RAYTOWN State MO Zip Code 64138-3395
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 20 / 2016
Transaction ID : SA11A.444757
 Amount of Each Receipt this Period
 250.00
 Memo Item
 CONTRIBUTION

B. THOMAS, DAVID, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 508 MOSE DRIVE 527
 City SPARTA State TN Zip Code 38583-1211
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 26 / 2016
Transaction ID : SA11A.450400
 Amount of Each Receipt this Period
 50.00
 Memo Item
 CONTRIBUTION

C. THOMAS, DAVID, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 508 MOSE DRIVE 527
 City SPARTA State TN Zip Code 38583-1211
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 02 / 2016
Transaction ID : SA11A.466101
 Amount of Each Receipt this Period
 25.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	325.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3698 OF 4311
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. THOMAS, DAVID, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 508 MOSE DRIVE
527

City SPARTA State TN Zip Code 38583-1211

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt
11 / 02 / 2016
Transaction ID : SA11A.466103

Amount of Each Receipt this Period
25.00

Memo Item CONTRIBUTION

B. THOMAS, GEORGE, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 934 BRIAR RIDGE

City HOUSTON State TX Zip Code 77057-1118

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) HIGMAN BARGELINE Occupation (for Individual) EXEC

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1000.00

Date of Receipt
11 / 04 / 2016
Transaction ID : SA11A.467443

Amount of Each Receipt this Period
1000.00

Memo Item CONTRIBUTION

C. THOMAS, GWENDOLYN, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 4935 WINDSONG PARK DR.

City COLLIERVILLE State TN Zip Code 38017-9380

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
375.00

Date of Receipt
11 / 04 / 2016
Transaction ID : SA11A.471737

Amount of Each Receipt this Period
50.00

Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 1075.00

TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3699 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. THOMAS, JOHN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 6140 HIGHWAY 6, PMB 283
 City MISSOURI CITY State TX Zip Code 77459-3802
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) CPA
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt
 10 / 27 / 2016
Transaction ID : SA11A.454003
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION

B. THOMAS, JOHN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 6140 HIGHWAY 6, PMB 283
 City MISSOURI CITY State TX Zip Code 77459-3802
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) CPA
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt
 10 / 27 / 2016
Transaction ID : SA11A.454010
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION

C. THOMAS, JOHN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 6140 HIGHWAY 6, PMB 283
 City MISSOURI CITY State TX Zip Code 77459-3802
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) CPA
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt
 10 / 28 / 2016
Transaction ID : SA11A.455285
 Amount of Each Receipt this Period
 50.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	250.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3700 OF 4311
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
Team Ryan

A. THOMAS, JOHN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 6140 HIGHWAY 6, PMB 283
 City MISSOURI CITY State TX Zip Code 77459-3802
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) CPA
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 07 / 2016
Transaction ID : SA11A.474773
 Amount of Each Receipt this Period
 50.00
 Memo Item
CONTRIBUTION

B. THOMAS, ROBERT, C., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 54 PATTI LYNN LANE
 City HOUSTON State TX Zip Code 77024-7120
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1300.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 24 / 2016
Transaction ID : SA11A.445710
 Amount of Each Receipt this Period
 100.00
 Memo Item
CONTRIBUTION

C. THOMAS, ROBERT, C., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 54 PATTI LYNN LANE
 City HOUSTON State TX Zip Code 77024-7120
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1300.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 31 / 2016
Transaction ID : SA11A.457834
 Amount of Each Receipt this Period
 100.00
 Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	250.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3701 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. THOMAS, ROBERT, C., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 54 PATTI LYNN LANE
 City HOUSTON State TX Zip Code 77024-7120
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1300.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 02 / 2016
Transaction ID : SA11A.465892
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION

B. THOMAS, ROBERT, C., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 54 PATTI LYNN LANE
 City HOUSTON State TX Zip Code 77024-7120
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1300.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 07 / 2016
Transaction ID : SA11A.475191
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION

C. THOMAS, ROBERT, H., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 128 CHURCH AVENUE
 City SEYMOUR State IN Zip Code 47274-3622
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) INFORMATION REQUESTED PER BEST EFFORTS Occupation (for Individual) INFORMATION REQUESTED PER BEST EFFORTS
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 03 / 2016
Transaction ID : SA11A.465472
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	300.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3702 OF 4311
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. THOMPSON, ALAN, W., MR.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 9147 RUNNYMEADE RD

City JACKSONVILLE	State FL	Zip Code 32257-5243
----------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
407.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		21		2016

Transaction ID : SA11A.444194

Amount of Each Receipt this Period

15.00

Memo Item
CONTRIBUTION

B. THOMPSON, ALAN, W., MR.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 9147 RUNNYMEADE RD

City JACKSONVILLE	State FL	Zip Code 32257-5243
----------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
407.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		28		2016

Transaction ID : SA11A.455028

Amount of Each Receipt this Period

25.00

Memo Item
CONTRIBUTION

C. THOMPSON, ALAN, W., MR.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 9147 RUNNYMEADE RD

City JACKSONVILLE	State FL	Zip Code 32257-5243
----------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
407.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		28		2016

Transaction ID : SA11A.455032

Amount of Each Receipt this Period

25.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	65.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3703 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. THOMPSON, ALAN, W., MR.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 9147 RUNNYMEADE RD

City JACKSONVILLE	State FL	Zip Code 32257-5243
----------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
407.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	04	/	2016

Transaction ID : SA11A.471211

Amount of Each Receipt this Period

50.00

Memo Item
CONTRIBUTION

B. THOMPSON, DAN, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 107 BOOTH ST

City FARMVILLE	State VA	Zip Code 23901-2845
-------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	25	/	2016

Transaction ID : SA11A.447973

Amount of Each Receipt this Period

50.00

Memo Item
CONTRIBUTION

C. THOMPSON, DAN, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 107 BOOTH ST

City FARMVILLE	State VA	Zip Code 23901-2845
-------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	02	/	2016

Transaction ID : SA11A.466922

Amount of Each Receipt this Period

50.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	115.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3704 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. THOMPSON, DAN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 107 BOOTH ST
 City FARMVILLE State VA Zip Code 23901-2845
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 11 / 03 / 2016
Transaction ID : SA11A.468934
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

B. THOMPSON, DOUGLAS, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO BOX 1529
 City UPLAND State CA Zip Code 91785-1529
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) TPS PLUMBING SUPPLY Occupation (for Individual) PLUMBING
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 450.00

Date of Receipt 10 / 25 / 2016
Transaction ID : SA11A.447444
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

C. THOMPSON, ERLINDA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 257 WHIPPOORWILL RD
 City CRANBERRY State PA Zip Code 16319-3221
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 202.00

Date of Receipt 10 / 20 / 2016
Transaction ID : SA11A.442288
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	350.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3705 OF 4311
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. THOMPSON, ERLINDA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 257 WHIPPOORWILL RD
 City CRANBERRY State PA Zip Code 16319-3221
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 202.00

Date of Receipt 10 / 20 / 2016
Transaction ID : SA11A.442289
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

B. THOMPSON, GARY, J., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 19874 FESTIVAL LOOP
 City PRINCETON State MO Zip Code 64673-9827
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1200.00

Date of Receipt 10 / 26 / 2016
Transaction ID : SA11A.450727
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

C. THOMPSON, GARY, J., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 19874 FESTIVAL LOOP
 City PRINCETON State MO Zip Code 64673-9827
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1200.00

Date of Receipt 10 / 26 / 2016
Transaction ID : SA11A.450735
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 250.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3706 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. THOMPSON, GREGORY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2662 ORCHARD RUN SE
 City ATLANTA State GA Zip Code 30339-4651
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) MANKEL Occupation (for Individual) INSURANCE
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 5000.00

Date of Receipt 11 / 02 / 2016
Transaction ID : SA11A.465146
 Amount of Each Receipt this Period 2500.00
 Memo Item CONTRIBUTION

B. THOMPSON, JACK, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 728 LEFT FORK RD.
 City BOULDER State CO Zip Code 80302-9252
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SATINWOOD CONSTRUCTION INC, Occupation (for Individual) GENERAL CONTRACTOR
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 550.00

Date of Receipt 10 / 25 / 2016
Transaction ID : SA11A.451830
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

C. THOMPSON, JACK, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 728 LEFT FORK RD.
 City BOULDER State CO Zip Code 80302-9252
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SATINWOOD CONSTRUCTION INC, Occupation (for Individual) GENERAL CONTRACTOR
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 550.00

Date of Receipt 10 / 25 / 2016
Transaction ID : SA11A.451832
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	2700.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3707 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. THOMPSON, JAMES, D., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4685 POLO LN SE
 City ATLANTA State GA Zip Code 30339-5345
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 450.00

Date of Receipt 10 / 24 / 2016
Transaction ID : SA11A.446147
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

B. THOMPSON, JAMES, D., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4685 POLO LN SE
 City ATLANTA State GA Zip Code 30339-5345
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 450.00

Date of Receipt 10 / 30 / 2016
Transaction ID : SA11A.459445
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

C. THOMPSON, JAMES, D., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4685 POLO LN SE
 City ATLANTA State GA Zip Code 30339-5345
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 450.00

Date of Receipt 10 / 30 / 2016
Transaction ID : SA11A.459446
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	450.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3708 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. THOMPSON, JOHN, R., DR., JR.
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3476 HILL CIR
 City COLORADO SPRINGS State CO Zip Code 80904-1005
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1075.00

Date of Receipt 10 / 22 / 2016
Transaction ID : SA11A.446663
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

B. THOMPSON, KAREN, R., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1158 WALKER RD
 City MCCORMICK State SC Zip Code 29835-3612
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 525.00

Date of Receipt 10 / 24 / 2016
Transaction ID : SA11A.446239
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

C. THOMPSON, KAREN, R., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1158 WALKER RD
 City MCCORMICK State SC Zip Code 29835-3612
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 525.00

Date of Receipt 10 / 25 / 2016
Transaction ID : SA11A.448811
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	175.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3709 OF 4311
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. THOMPSON, MARK, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 7175 FOX LAKE DRIVE
 City BLACKLICK State OH Zip Code 43004-8559
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) OHO ONCOLOGY HEMATOLOGY. LLC Occupation (for Individual) PHYSICIAN
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1050.00

Date of Receipt 11 / 04 / 2016
Transaction ID : SA11A.472308
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

B. THOMPSON, RODNEY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1324 SW 8 ST
 City ROCHESTER State MN Zip Code 55902-2062
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) MAYO CLINIC Occupation (for Individual) PHYSICIAN
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 700.00

Date of Receipt 10 / 26 / 2016
Transaction ID : SA11A.450274
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

C. THOMPSON, RODNEY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1324 SW 8 ST
 City ROCHESTER State MN Zip Code 55902-2062
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) MAYO CLINIC Occupation (for Individual) PHYSICIAN
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 700.00

Date of Receipt 10 / 31 / 2016
Transaction ID : SA11A.459076
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 750.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3710 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. THOMPSON, SYLVIA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 840 WESTRIDGE DRIVE
 City PORTOLA VALLEY State CA Zip Code 94028-7335
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 10 / 25 / 2016
Transaction ID : SA11A.447782
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

B. THOMPSON, THOMAS, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 18 BAY VIEW AVENUE
 City BEVERLY State MA Zip Code 01915-4720
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) TANNIN CORPORATION Occupation (for Individual) MANAGER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 10 / 31 / 2016
Transaction ID : SA11A.464372
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

C. THOMPSON, THOMAS, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 18 BAY VIEW AVENUE
 City BEVERLY State MA Zip Code 01915-4720
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) TANNIN CORPORATION Occupation (for Individual) MANAGER
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 10 / 31 / 2016
Transaction ID : SA11A.464461
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 750.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3711 OF 4311
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. THOMPSON, VERLA, D., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 301 NE 3RD AVENUE
 City ALEDO State IL Zip Code 61231-1347
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 350.00

Date of Receipt **10 / 26 / 2016**
Transaction ID : SA11A.447603
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

B. THOMPSON, VERLA, D., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 301 NE 3RD AVENUE
 City ALEDO State IL Zip Code 61231-1347
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 350.00

Date of Receipt **11 / 01 / 2016**
Transaction ID : SA11A.461580
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

C. THOMPSON, VERLA, D., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 301 NE 3RD AVENUE
 City ALEDO State IL Zip Code 61231-1347
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 350.00

Date of Receipt **11 / 08 / 2016**
Transaction ID : SA11A.467945
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	200.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3712 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
Team Ryan

A. THOMPSON, WILLIAM, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 204 MANDALAY
 City SAN MARCOS State TX Zip Code 78666-3631
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) CONSULTANT
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 900.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 22 / 2016
Transaction ID : SA11A.446874
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION

B. THOMPSON, WILLIAM, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 204 MANDALAY
 City SAN MARCOS State TX Zip Code 78666-3631
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) CONSULTANT
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 900.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 31 / 2016
Transaction ID : SA11A.464135
 Amount of Each Receipt this Period
 250.00
 Memo Item
 CONTRIBUTION

C. THOMPSON, WILLIAM, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 204 MANDALAY
 City SAN MARCOS State TX Zip Code 78666-3631
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) CONSULTANT
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 900.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 31 / 2016
Transaction ID : SA11A.464138
 Amount of Each Receipt this Period
 250.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	600.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3713 OF 4311
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. THOMPSON, WILLIAM, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 204 MANDALAY

City SAN MARCOS	State TX	Zip Code 78666-3631
--------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) SELF EMPLOYED	Occupation (for Individual) CONSULTANT
--	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
900.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	04	/	2016

Transaction ID : SA11A.471478

Amount of Each Receipt this Period
100.00

Memo Item
CONTRIBUTION

B. THOMSON, CLIFFORD, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 11700 PRESTON RD STE 660-206
STE 660-206

City DALLAS	State TX	Zip Code 75230-6112
----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1900.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	20	/	2016

Transaction ID : SA11A.442365

Amount of Each Receipt this Period
250.00

Memo Item
CONTRIBUTION

C. THOMSON, CLIFFORD, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 11700 PRESTON RD STE 660-206
STE 660-206

City DALLAS	State TX	Zip Code 75230-6112
----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
1900.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	20	/	2016

Transaction ID : SA11A.442372

Amount of Each Receipt this Period
100.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	450.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 3714 OF 4311
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. THOMSON, JOHN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 260 CRANDON BLVD
 25
 City KEY BISCAWAYNE State FL Zip Code 33149-1536
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 10 / 29 / 2016
Transaction ID : SA11A.461235
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

B. THOMS, NORMAN, W., DR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5420 SE 37TH STREET
 City TECUMSEH State KS Zip Code 66542-9161
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 11 / 03 / 2016
Transaction ID : SA11A.465394
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

C. THOMSON, TRACY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3073 JOHNSON AVE
 City COSTA MESA State CA Zip Code 92626-2818
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) MANAGEMENT
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 203.00

Date of Receipt 10 / 27 / 2016
Transaction ID : SA11A.453549
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	250.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3715 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. THOMSON, TRACY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3073 JOHNSON AVE
 City COSTA MESA State CA Zip Code 92626-2818
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) MANAGEMENT
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 203.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 02 / 2016
Transaction ID : SA11A.466052
 Amount of Each Receipt this Period
 50.00
 Memo Item
 CONTRIBUTION

B. THORBURN, REID, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1448 LONG CREEK BLVD
 City NEW BRAUNFELS State TX Zip Code 78130-8291
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 225.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 02 / 2016
Transaction ID : SA11A.466862
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION

C. THORBURN, REID, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1448 LONG CREEK BLVD
 City NEW BRAUNFELS State TX Zip Code 78130-8291
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 225.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 02 / 2016
Transaction ID : SA11A.466874
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	250.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3716 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. THORESEN, JOE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2287 MORROW ROAD
 City PITTSBURGH State PA Zip Code 15241-2724
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 750.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 26 / 2016
Transaction ID : SA11A.451062
 Amount of Each Receipt this Period
 250.00
 Memo Item
 CONTRIBUTION

B. THORESON, RON, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 306 GREEN TRAILS COURT
 City CAMDENTON State MO Zip Code 65020-4047
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 600.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 28 / 2016
Transaction ID : SA11A.454742
 Amount of Each Receipt this Period
 500.00
 Memo Item
 CONTRIBUTION

C. THORNEWILL, MARK, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 116 EAST CAMPBELL STREET
 City FRANKFORT State KY Zip Code 40601-3508
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 232.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 27 / 2016
Transaction ID : SA11A.452987
 Amount of Each Receipt this Period
 50.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	800.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3717 OF 4311
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. THORNEWILL, MARK, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 116 EAST CAMPBELL STREET
 City FRANKFORT State KY Zip Code 40601-3508
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 232.00

Date of Receipt 10 / 27 / 2016
Transaction ID : SA11A.452989
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

B. THORNTON, PATRICK, J., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 624 N ARLINGTON HTS RD
 City ARLINGTON HTS State IL Zip Code 60004-5662
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) PAT MOONEY INC Occupation (for Individual) EXECUTIVE
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 750.00

Date of Receipt 10 / 26 / 2016
Transaction ID : SA11A.451110
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

C. THORNTON, PATRICK, J., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 624 N ARLINGTON HTS RD
 City ARLINGTON HTS State IL Zip Code 60004-5662
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) PAT MOONEY INC Occupation (for Individual) EXECUTIVE
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 750.00

Date of Receipt 11 / 04 / 2016
Transaction ID : SA11A.472483
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 550.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3718 OF 4311
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. THORNOCK, ROY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 20111 GABLEPOINT DRIVE
 City KATY State TX Zip Code 77450-5255
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 11 / 04 / 2016
Transaction ID : SA11A.471769
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

B. THUESEN, JAMES, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 633 GULFWOOD ROAD
 City KNOXVILLE State TN Zip Code 37923-2213
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 11 / 03 / 2016
Transaction ID : SA11A.465392
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

C. THUL, MARY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 166 ASBURY ROAD
 City CINCINNATI State OH Zip Code 45255-4602
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 10 / 28 / 2016
Transaction ID : SA11A.455002
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 550.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3719 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
Team Ryan

A. THURIN, WILLIAM, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1565 SAVANNAH CREEK
 City BEAUMONT State CA Zip Code 92223-7488
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) ONE DIGITAL Occupation (for Individual) BENEFITS CONSULTANT/PRINCIPAL
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 550.00

Date of Receipt 10 / 30 / 2016
Transaction ID : SA11A.460147
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

B. THUSS, RICHARD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2342 WICKLIFFE RD
 City BERRYVILLE State VA Zip Code 22611-2972
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 225.00

Date of Receipt 10 / 22 / 2016
Transaction ID : SA11A.446785
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

C. THUSS, RICHARD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2342 WICKLIFFE RD
 City BERRYVILLE State VA Zip Code 22611-2972
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 225.00

Date of Receipt 10 / 24 / 2016
Transaction ID : SA11A.449517
 Amount of Each Receipt this Period 75.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	225.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3720 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. TIBBALS, J, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 8150 N CENTRAL
 1800
 City DALLAS State TX Zip Code 75206-1815
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SWT Occupation (for Individual) ATTY
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 300.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 25 / 2016
Transaction ID : SA11A.451996
 Amount of Each Receipt this Period
 100.00
 Memo Item
CONTRIBUTION

B. TIBERIUS, DENNIS, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 772 CHIPPENHAM COURT
 City ST. GEORGE State UT Zip Code 84770-6106
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 750.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 24 / 2016
Transaction ID : SA11A.449140
 Amount of Each Receipt this Period
 250.00
 Memo Item
CONTRIBUTION

C. TIERNEY, CARL, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 203 SPRUCE RD
 City FLOURTOWN State PA Zip Code 19031-2234
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For:
 Primary General
 Other (specify)
 Aggregate Year-to-Date ▼
 275.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 31 / 2016
Transaction ID : SA11A.457912
 Amount of Each Receipt this Period
 50.00
 Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	400.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3721 OF 4311
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. TIERNEY, CARL, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 203 SPRUCE RD

City FLOURTOWN State PA Zip Code 19031-2234

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 275.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 05 / 2016

Transaction ID : SA11A.478490

Amount of Each Receipt this Period
 25.00

Memo Item CONTRIBUTION

B. TILLEY, WILLIAM, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 2600 CROASDAILE FARM PWY. A=326 A-326

City DURHAM State NC Zip Code 27705-1338

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 325.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 31 / 2016

Transaction ID : SA11A.459269

Amount of Each Receipt this Period
 100.00

Memo Item CONTRIBUTION

C. TIMBERS, VIOLA, M., MS.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 2300 5TH AVENUE APT. 16P

City NEW YORK State NY Zip Code 10037-1620

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼ 225.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 07 / 2016

Transaction ID : SA11A.467870

Amount of Each Receipt this Period
 50.00

Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶ 175.00

TOTAL This Period (last page this line number only).....▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3722 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
Team Ryan

A. TIMM, LOIS, M., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 139 GROSSE PINES DRIVE
 City ROCHESTER HILLS State MI Zip Code 48309-1829
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 2000.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 26 / 2016
Transaction ID : SA11A.447668
 Amount of Each Receipt this Period
 1000.00
 Memo Item
 CONTRIBUTION

B. TIMMERMEISTER, WILLIAM, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 10044 TOWNSHIP ROAD 253
 City LAKEVIEW State OH Zip Code 43331-9333
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 27 / 2016
Transaction ID : SA11A.452860
 Amount of Each Receipt this Period
 250.00
 Memo Item
 CONTRIBUTION

C. TIMMERMEISTER, WILLIAM, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 10044 TOWNSHIP ROAD 253
 City LAKEVIEW State OH Zip Code 43331-9333
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 04 / 2016
Transaction ID : SA11A.470807
 Amount of Each Receipt this Period
 250.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	1500.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3723 OF 4311
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
A. TIMMONS, DANIEL, , ,

Mailing Address **18810 JAMESTOWN CIRCLE**
240

City **NORTHVILLE** State **MI** Zip Code **48168-1839**

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) **TIMMONS ASSOCIATES, INC.** Occupation (for Individual) **PRESIDENT**

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **400.00**

Date of Receipt
11 / 04 / 2016

Transaction ID : SA11A.471767

Amount of Each Receipt this Period
100.00

Memo Item
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
B. TIMMONS, LARRY, , ,

Mailing Address **2611 N FARRIS AVE**

City **FRESNO** State **CA** Zip Code **93704-5305**

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) **NONE** Occupation (for Individual) **RETIRED**

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **270.00**

Date of Receipt
10 / 21 / 2016

Transaction ID : SA11A.447124

Amount of Each Receipt this Period
50.00

Memo Item
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
C. TIMMONS, LARRY, , ,

Mailing Address **2611 N FARRIS AVE**

City **FRESNO** State **CA** Zip Code **93704-5305**

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) **NONE** Occupation (for Individual) **RETIRED**

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼ **270.00**

Date of Receipt
11 / 02 / 2016

Transaction ID : SA11A.467039

Amount of Each Receipt this Period
50.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... **200.00**

TOTAL This Period (last page this line number only).....

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3724 OF 4311
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name A. TIPPENS, JEFF, , ,		Date of Receipt M M M / D D D / Y Y Y Y Y Y 10 / 24 / 2016
Mailing Address 313 N. OHIO AVE		Transaction ID : SA11A.446042
City LIVE OAK	State FL	Zip Code 32064-2456
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 25.00
Name of Employer (for Individual) JEFF TIPPENS INSURANCE AGENCY, INC	Occupation (for Individual) SALES	<input type="checkbox"/> Memo Item CONTRIBUTION
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 325.00	

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name B. TIPPENS, JEFF, , ,		Date of Receipt M M M / D D D / Y Y Y Y Y Y 10 / 24 / 2016
Mailing Address 313 N. OHIO AVE		Transaction ID : SA11A.446043
City LIVE OAK	State FL	Zip Code 32064-2456
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 25.00
Name of Employer (for Individual) JEFF TIPPENS INSURANCE AGENCY, INC	Occupation (for Individual) SALES	<input type="checkbox"/> Memo Item CONTRIBUTION
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 325.00	

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name C. TIPPENS, JEFF, , ,		Date of Receipt M M M / D D D / Y Y Y Y Y Y 10 / 24 / 2016
Mailing Address 313 N. OHIO AVE		Transaction ID : SA11A.446047
City LIVE OAK	State FL	Zip Code 32064-2456
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 25.00
Name of Employer (for Individual) JEFF TIPPENS INSURANCE AGENCY, INC	Occupation (for Individual) SALES	<input type="checkbox"/> Memo Item CONTRIBUTION
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Aggregate Year-to-Date ▼ 325.00	

SUBTOTAL of Receipts This Page (optional).....▶	75.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3725 OF 4311
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. TIPPENS, JEFF, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 313 N. OHIO AVE

City LIVE OAK	State FL	Zip Code 32064-2456
------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) JEFF TIPPENS INSURANCE AGENCY, INC	Occupation (for Individual) SALES
---	--------------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
325.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		24		2016

Transaction ID : SA11A.446048

Amount of Each Receipt this Period
25.00

Memo Item
CONTRIBUTION

B. TIPPENS, JEFF, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 313 N. OHIO AVE

City LIVE OAK	State FL	Zip Code 32064-2456
------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) JEFF TIPPENS INSURANCE AGENCY, INC	Occupation (for Individual) SALES
---	--------------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
325.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		22		2016

Transaction ID : SA11A.446839

Amount of Each Receipt this Period
50.00

Memo Item
CONTRIBUTION

C. TIPPENS, JEFF, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 313 N. OHIO AVE

City LIVE OAK	State FL	Zip Code 32064-2456
------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) JEFF TIPPENS INSURANCE AGENCY, INC	Occupation (for Individual) SALES
---	--------------------------------------

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
325.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		26		2016

Transaction ID : SA11A.451213

Amount of Each Receipt this Period
50.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	125.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3726 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. TIPPENS, JEFF, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 313 N. OHIO AVE
 City LIVE OAK State FL Zip Code 32064-2456
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) JEFF TIPPENS INSURANCE AGENCY, INC Occupation (for Individual) SALES
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 325.00

Date of Receipt 11 / 04 / 2016
Transaction ID : SA11A.471266
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

B. TIPPENS, JEFF, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 313 N. OHIO AVE
 City LIVE OAK State FL Zip Code 32064-2456
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) JEFF TIPPENS INSURANCE AGENCY, INC Occupation (for Individual) SALES
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 325.00

Date of Receipt 11 / 04 / 2016
Transaction ID : SA11A.471937
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

C. TIPPMANN, STEVE, , MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3204 MCCOMB WOODS WAY
 City HUNTERTOWN State IN Zip Code 46748-9413
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) TIPPMANN GROUP Occupation (for Individual) EVP
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 10 / 26 / 2016
Transaction ID : SA11A.451175
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	325.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 3727 OF 4311
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. TIPTON, LARRY, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 1525 E WINDSOR DR

City DENTON	State TX	Zip Code 76209-1214
----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	26	/	2016

Transaction ID : SA11A.451063

Amount of Each Receipt this Period
25.00

Memo Item
CONTRIBUTION

B. TIPTON, LARRY, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 1525 E WINDSOR DR

City DENTON	State TX	Zip Code 76209-1214
----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	04	/	2016

Transaction ID : SA11A.472300

Amount of Each Receipt this Period
25.00

Memo Item
CONTRIBUTION

C. TIPTON, STEVEN, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 5411 TORTUGA TRAIL

City AUSTIN	State TX	Zip Code 78731-4535
----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) FLAHIVE, OGDEN & LATSON	Occupation (for Individual) ATTORNEY
--	---

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
225.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	27	/	2016

Transaction ID : SA11A.452526

Amount of Each Receipt this Period
100.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	150.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3728 OF 4311
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. TOBERTS, CHRISS, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1306 SW 3RD ST
 City WAGONER State OK Zip Code 74467-5518
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) ROBERTS FAMILY CLINIC Occupation (for Individual) OSTEOPATHIC PHYSICIAN
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 550.00

Date of Receipt **10 / 26 / 2016**
Transaction ID : SA11A.450250
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

B. TOBEY, CARA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 14051 BELLE CHASSE BLVD 316
 City LAUREL State MD Zip Code 20707-8433
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 226.00

Date of Receipt **11 / 05 / 2016**
Transaction ID : SA11A.479201
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

C. TOBIN, PHIL, J., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 38763 N. OAKCREST LANE
 City WADSWORTH State IL Zip Code 60083-9557
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 450.00

Date of Receipt **10 / 21 / 2016**
Transaction ID : SA11A.444208
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	125.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3729 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. TOBIN, PHIL, J., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 38763 N. OAKCREST LANE
 City WADSWORTH State IL Zip Code 60083-9557
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 450.00

Date of Receipt 10 / 24 / 2016
Transaction ID : SA11A.449315
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

B. TOBIN, PHIL, J., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 38763 N. OAKCREST LANE
 City WADSWORTH State IL Zip Code 60083-9557
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 450.00

Date of Receipt 10 / 27 / 2016
Transaction ID : SA11A.456841
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

C. TOLBERT, FRANK, E., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2600 E BROADWAY
 City LOGANSPORT State IN Zip Code 46947-2004
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) ATTORNEY
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 485.00

Date of Receipt 10 / 26 / 2016
Transaction ID : SA11A.447619
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	200.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3730 OF 4311
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. TOLBERT, FRANK, E., MR.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 2600 E BROADWAY

City LOGANSPORT State IN Zip Code 46947-2004

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) ATTORNEY

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 485.00

Date of Receipt 11 / 03 / 2016
Transaction ID : SA11A.465464

Amount of Each Receipt this Period 50.00

Memo Item CONTRIBUTION

B. TOLLETTE, HENRY, , MR.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 940 45TH ST

City SACRAMENTO State CA Zip Code 95819-3410

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt 10 / 24 / 2016
Transaction ID : SA11A.446213

Amount of Each Receipt this Period 100.00

Memo Item CONTRIBUTION

C. TOLLETTE, HENRY, , MR.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 940 45TH ST

City SACRAMENTO State CA Zip Code 95819-3410

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt 11 / 04 / 2016
Transaction ID : SA11A.471173

Amount of Each Receipt this Period 100.00

Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 250.00

TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3731 OF 4311
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. TOM, DONALD, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 2609 NELSON AVE.
UNIT C

City REDONDO BEACH State CA Zip Code 90278-2634

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
235.00

Date of Receipt
M M M / D D D / Y Y Y Y Y Y
10 / 31 / 2016

Transaction ID : SA11A.464453

Amount of Each Receipt this Period
25.00

Memo Item CONTRIBUTION

B. TOM, DONALD, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 2609 NELSON AVE.
UNIT C

City REDONDO BEACH State CA Zip Code 90278-2634

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
235.00

Date of Receipt
M M M / D D D / Y Y Y Y Y Y
11 / 07 / 2016

Transaction ID : SA11A.475160

Amount of Each Receipt this Period
25.00

Memo Item CONTRIBUTION

C. TOMASINO, SHERRILL, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 12301 N. 52ND STREET

City TEMPLE TERRACE State FL Zip Code 33617-1423

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
500.00

Date of Receipt
M M M / D D D / Y Y Y Y Y Y
10 / 28 / 2016

Transaction ID : SA11A.461281

Amount of Each Receipt this Period
500.00

Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 550.00

TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3732 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. TOMCZAK, LAWRENCE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1760 MANLEY ROAD
 City MAUMEE State OH Zip Code 43537-9400
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYEED Occupation (for Individual) FINANCIAL PLANNER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 06 / 2016
Transaction ID : SA11A.477642
 Amount of Each Receipt this Period
 250.00
 Memo Item
 CONTRIBUTION

B. TOMLIN, LINTON, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 208 BALL DRIVE
 City KERRVILLE State TX Zip Code 78028-7027
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 275.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 26 / 2016
Transaction ID : SA11A.450449
 Amount of Each Receipt this Period
 25.00
 Memo Item
 CONTRIBUTION

C. TOMLIN, LINTON, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 208 BALL DRIVE
 City KERRVILLE State TX Zip Code 78028-7027
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 275.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 31 / 2016
Transaction ID : SA11A.464316
 Amount of Each Receipt this Period
 25.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	300.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3733 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
Team Ryan

A. TOMLIN, LINTON, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 208 BALL DRIVE
 City KERRVILLE State TX Zip Code 78028-7027
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 275.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 31 / 2016
Transaction ID : SA11A.464317
 Amount of Each Receipt this Period
 25.00
 Memo Item
 CONTRIBUTION

B. TOMLIN, LINTON, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 208 BALL DRIVE
 City KERRVILLE State TX Zip Code 78028-7027
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 275.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 02 / 2016
Transaction ID : SA11A.466469
 Amount of Each Receipt this Period
 25.00
 Memo Item
 CONTRIBUTION

C. TOMLIN, LINTON, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 208 BALL DRIVE
 City KERRVILLE State TX Zip Code 78028-7027
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 275.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 06 / 2016
Transaction ID : SA11A.477254
 Amount of Each Receipt this Period
 25.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	75.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3734 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. TOMPKINS, JOHN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2327 WILLOW PASS DR
 City KINGWOOD State TX Zip Code 77339-3641
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 10 / 26 / 2016
Transaction ID : SA11A.449932
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

B. TOMPKINS, JOHN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2327 WILLOW PASS DR
 City KINGWOOD State TX Zip Code 77339-3641
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 10 / 27 / 2016
Transaction ID : SA11A.453408
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

C. TOMPKINS, RANDY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1345 VELVET CREEK WAY SW
 City MARIETTA State GA Zip Code 30008-7625
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) CENTENE CORP Occupation (for Individual) PHYSICIAN
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 11 / 04 / 2016
Transaction ID : SA11A.472406
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶ 150.00
TOTAL This Period (last page this line number only).....▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3735 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. TOMPKINS, RICHARD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 200 DOOLING ROAD
 City HOLLISTER State CA Zip Code 95023-9331
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SA PHOTONICS Occupation (for Individual) SYSTEMS ENGINEER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 11 / 07 / 2016
Transaction ID : SA11A.474991
 Amount of Each Receipt this Period 200.00
 Memo Item CONTRIBUTION

B. TOMS, CAROLINE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2350 CHERRY PALM ROAD
 City BOCA RATON State FL Zip Code 33432-7913
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) INTERIOR DESIGN
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 10 / 26 / 2016
Transaction ID : SA11A.449778
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

C. TOMS, CAROLINE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2350 CHERRY PALM ROAD
 City BOCA RATON State FL Zip Code 33432-7913
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) INTERIOR DESIGN
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 10 / 31 / 2016
Transaction ID : SA11A.458628
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	350.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3736 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. TOMS, CAROLINE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2350 CHERRY PALM ROAD
 City BOCA RATON State FL Zip Code 33432-7913
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) INTERIOR DESIGN
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 11 / 04 / 2016
Transaction ID : SA11A.472187
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

B. TONGE, SANDRA, C., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1 E PARKWAY AVENUE
 City CHESTER State PA Zip Code 19013-4606
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 325.00

Date of Receipt 10 / 24 / 2016
Transaction ID : SA11A.443783
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

C. TONGE, SANDRA, C., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1 E PARKWAY AVENUE
 City CHESTER State PA Zip Code 19013-4606
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 325.00

Date of Receipt 11 / 08 / 2016
Transaction ID : SA11A.468036
 Amount of Each Receipt this Period 75.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 225.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3737 OF 4311
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. TONNESEN, ALAN, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 38 CONKLIN ROAD

City WARWICK	State NY	Zip Code 10990-3911
-----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) PASSPORT CORPORATION	Occupation (for Individual) EXECUTIVE
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
350.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		25		2016

Transaction ID : SA11A.452204

Amount of Each Receipt this Period
100.00

Memo Item
CONTRIBUTION

B. TONNESEN, ALAN, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 38 CONKLIN ROAD

City WARWICK	State NY	Zip Code 10990-3911
-----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) PASSPORT CORPORATION	Occupation (for Individual) EXECUTIVE
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
350.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		28		2016

Transaction ID : SA11A.456146

Amount of Each Receipt this Period
50.00

Memo Item
CONTRIBUTION

C. TONNESEN, ALAN, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 38 CONKLIN ROAD

City WARWICK	State NY	Zip Code 10990-3911
-----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) PASSPORT CORPORATION	Occupation (for Individual) EXECUTIVE
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
350.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11		04		2016

Transaction ID : SA11A.470865

Amount of Each Receipt this Period
100.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	250.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3738 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. TONNESEN, ALAN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 38 CONKLIN ROAD
 City WARWICK State NY Zip Code 10990-3911
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) PASSPORT CORPORATION Occupation (for Individual) EXECUTIVE
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 350.00

Date of Receipt 11 / 04 / 2016
Transaction ID : SA11A.471188
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

B. TOOHEY, MICHAEL, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 47180 MIDDLE BLUFF PLACE
 City STERLING State VA Zip Code 20165-3123
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) WATERWAYS COUNCIL Occupation (for Individual) BUSINESSMAN
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 11 / 08 / 2016
Transaction ID : SA11A.467934
 Amount of Each Receipt this Period 500.00
 Memo Item CONTRIBUTION

C. TOOLE, PATRICK, A., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 20 HARBORVIEW ROAD
 City WESTPORT State CT Zip Code 06880-5061
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt 10 / 21 / 2016
Transaction ID : SA11A.443548
 Amount of Each Receipt this Period 500.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	1050.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3739 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name A. TOP, FRANKLIN, H., , JR		Date of Receipt MM / DD / YYYY 10 / 21 / 2016 Transaction ID : SA11A.443610
Mailing Address 3000 GALLOWAY RIDGE, APT J311		Amount of Each Receipt this Period 250.00
City PITTSBORO	State NC	Zip Code 27312-5522
FEC ID number of contributing federal political committee. C		<input type="checkbox"/> Memo Item CONTRIBUTION
Name of Employer (for Individual) RETIRED	Occupation (for Individual) RETIRED	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00	

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name B. TOPHAM, KATHIE, J., MRS.,		Date of Receipt MM / DD / YYYY 11 / 07 / 2016 Transaction ID : SA11A.467712
Mailing Address 19800 VERONICA DRIVE		Amount of Each Receipt this Period 100.00
City SARATOGA	State CA	Zip Code 95070-3947
FEC ID number of contributing federal political committee. C		<input type="checkbox"/> Memo Item CONTRIBUTION
Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 450.00	

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name C. TOPOR, FREDERIC, , ,		Date of Receipt MM / DD / YYYY 11 / 01 / 2016 Transaction ID : SA11A.461609
Mailing Address 108 VICTORIA BAY COURT		Amount of Each Receipt this Period 200.00
City PALM BEACH GARDENS	State FL	Zip Code 33418-5764
FEC ID number of contributing federal political committee. C		<input type="checkbox"/> Memo Item CONTRIBUTION
Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Aggregate Year-to-Date ▼ 400.00	

SUBTOTAL of Receipts This Page (optional).....▶	550.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3740 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. TORR, DOUGLAS, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 529 CAROLINA MEADOWS VILLA
 City CHAPEL HILL State NC Zip Code 27517-5701
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 325.00

Date of Receipt 11 / 04 / 2016
Transaction ID : SA11A.472339
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

B. TORR, DOUGLAS, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 529 CAROLINA MEADOWS VILLA
 City CHAPEL HILL State NC Zip Code 27517-5701
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 325.00

Date of Receipt 11 / 04 / 2016
Transaction ID : SA11A.472965
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

C. TORRES, CARMELITA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 7658 E. BRIDGEWOOD DR
 City ANAHEIM State CA Zip Code 92808-1418
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 280.00

Date of Receipt 10 / 30 / 2016
Transaction ID : SA11A.460048
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶ 100.00
TOTAL This Period (last page this line number only).....▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3741 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. TORRES, CARMELITA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 7658 E. BRIDGEWOOD DR
 City ANAHEIM State CA Zip Code 92808-1418
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 280.00

Date of Receipt 10 / 29 / 2016
Transaction ID : SA11A.460373
 Amount of Each Receipt this Period 15.00
 Memo Item CONTRIBUTION

B. TORRES, CARMELITA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 7658 E. BRIDGEWOOD DR
 City ANAHEIM State CA Zip Code 92808-1418
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 280.00

Date of Receipt 10 / 29 / 2016
Transaction ID : SA11A.460374
 Amount of Each Receipt this Period 15.00
 Memo Item CONTRIBUTION

C. TORRES, CARMELITA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 7658 E. BRIDGEWOOD DR
 City ANAHEIM State CA Zip Code 92808-1418
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 280.00

Date of Receipt 11 / 04 / 2016
Transaction ID : SA11A.471598
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 55.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3742 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. TORRES, CARMELITA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 7658 E. BRIDGEWOOD DR
 City ANAHEIM State CA Zip Code 92808-1418
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 280.00

Date of Receipt 11 / 04 / 2016
Transaction ID : SA11A.473445
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

B. TORTELLI, RONALD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 20 PORTO MAR, #603
 City PALM COAST State FL Zip Code 32137-2393
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 10 / 25 / 2016
Transaction ID : SA11A.452200
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

C. TOTH, MIKLOS, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 45 EAST 89TH STREET 15F
 City NEW YORK State NY Zip Code 10128-1251
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt 11 / 04 / 2016
Transaction ID : SA11A.472744
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	375.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3743 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
Team Ryan

A. TOUBIN, CHARLES, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 6533 EAST HILL DRIVE #7
 City AUSTIN State TX Zip Code 78731-4338
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt 10 / 31 / 2016
Transaction ID : SA11A.459215
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

B. TOUBIN, CHARLES, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 6533 EAST HILL DRIVE #7
 City AUSTIN State TX Zip Code 78731-4338
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt 11 / 04 / 2016
Transaction ID : SA11A.473732
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

C. TOWERSEY, BRIAN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2979 COLTON ROAD
 City PEBBLE BEACH State CA Zip Code 93953-2944
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 350.00

Date of Receipt 10 / 27 / 2016
Transaction ID : SA11A.452678
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 250.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3744 OF 4311
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. TOWNSEND, DAVID, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 3211 MUSKRAT CREEK DR

City FT COLLINS	State CO	Zip Code 80528-7027
--------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) JBS USA	Occupation (for Individual) ENGINEER
--	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	26	/	2016

Transaction ID : SA11A.454562

Amount of Each Receipt this Period
250.00

Memo Item
CONTRIBUTION

B. TOWNSEND, FREDERICK, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1506 LAKESIDE DR SW

City ALEXANDRIA	State MN	Zip Code 56308-2310
--------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) SANFORD HEALTH BROADWAY CLINIC	Occupation (for Individual) PHYSICIAN
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
350.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	04	/	2016

Transaction ID : SA11A.473814

Amount of Each Receipt this Period
50.00

Memo Item
CONTRIBUTION

C. TRACEY, RICHARD, D., MR.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 16 MURRAY HILL

City BLUFFTON	State SC	Zip Code 29909-6136
------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
470.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	28	/	2016

Transaction ID : SA11A.456110

Amount of Each Receipt this Period
25.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	325.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3745 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
A. TRACEY, RICHARD, D., MR.,

Mailing Address 16 MURRAY HILL

City BLUFFTON	State SC	Zip Code 29909-6136
------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
470.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11		03		2016

Transaction ID : SA11A.465456

Amount of Each Receipt this Period
25.00

Memo Item
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
B. TRACEY, RICHARD, D., MR.,

Mailing Address 16 MURRAY HILL

City BLUFFTON	State SC	Zip Code 29909-6136
------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
470.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11		04		2016

Transaction ID : SA11A.473743

Amount of Each Receipt this Period
25.00

Memo Item
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
C. TRACEY, RICHARD, D., MR.,

Mailing Address 16 MURRAY HILL

City BLUFFTON	State SC	Zip Code 29909-6136
------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
470.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11		05		2016

Transaction ID : SA11A.479292

Amount of Each Receipt this Period
25.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	75.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3746 OF 4311
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Team Ryan

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
A. TRACY, BRENT, , ,

Mailing Address **72 DONCASTER LN**

City BLUFFTON	State SC	Zip Code 29909-5091
-------------------------	--------------------	-------------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
--	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
205.00

Date of Receipt
10 / 27 / 2016

Transaction ID : SA11A.452760

Amount of Each Receipt this Period
25.00

Memo Item CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
B. TRACY, BRENT, , ,

Mailing Address **72 DONCASTER LN**

City BLUFFTON	State SC	Zip Code 29909-5091
-------------------------	--------------------	-------------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
--	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
205.00

Date of Receipt
11 / 06 / 2016

Transaction ID : SA11A.480916

Amount of Each Receipt this Period
30.00

Memo Item CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
C. TRAINA, DORIANN, , ,

Mailing Address **9 KNOLLS LANE**

City MANHASSET	State NY	Zip Code 11030-1629
--------------------------	--------------------	-------------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
--	---

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
250.00

Date of Receipt
11 / 06 / 2016

Transaction ID : SA11A.480842

Amount of Each Receipt this Period
250.00

Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	305.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3747 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. TRAINES, IRWIN, J., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3075 MINERAL SPRINGS TRAIL
 City MOUNT PLEASANT State MI Zip Code 48858-9663
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 11 / 02 / 2016
Transaction ID : SA11A.465030
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

B. TRAMMELL, GRACE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3628 ROYAL TERN CR.
 City BOYNTON BEACH State FL Zip Code 33436-5430
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1100.00

Date of Receipt 10 / 30 / 2016
Transaction ID : SA11A.459807
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

C. TRAMMELL, GRACE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3628 ROYAL TERN CR.
 City BOYNTON BEACH State FL Zip Code 33436-5430
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1100.00

Date of Receipt 11 / 02 / 2016
Transaction ID : SA11A.465848
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	600.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3748 OF 4311
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. TRAN, CON, V., ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 5614 STATE ROAD 33

City CLERMONT	State FL	Zip Code 34714-9111
------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) RETIRED	Occupation (for Individual) RETIRED
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
295.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		25		2016

Transaction ID : SA11A.447566

Amount of Each Receipt this Period
150.00

Memo Item CONTRIBUTION

B. TRAN, CON, V., ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 5614 STATE ROAD 33

City CLERMONT	State FL	Zip Code 34714-9111
------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) RETIRED	Occupation (for Individual) RETIRED
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
295.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11		03		2016

Transaction ID : SA11A.465444

Amount of Each Receipt this Period
75.00

Memo Item CONTRIBUTION

C. TRANBERG, GARY, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 1530 N HONEYSUCKLE CIR

City DE PERE	State WI	Zip Code 54115-8130
-----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11		02		2016

Transaction ID : SA11A.466031

Amount of Each Receipt this Period
50.00

Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	275.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3749 OF 4311
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. TRASK, AMI, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 303 HICKORY RIDGE CIR.-

City GLENWOOD	State IA	Zip Code 51534-5410
------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
235.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	26	/	2016

Transaction ID : SA11A.450809

Amount of Each Receipt this Period
25.00

Memo Item CONTRIBUTION

B. TRASK, AMI, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 303 HICKORY RIDGE CIR.-

City GLENWOOD	State IA	Zip Code 51534-5410
------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
235.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	27	/	2016

Transaction ID : SA11A.453968

Amount of Each Receipt this Period
30.00

Memo Item CONTRIBUTION

C. TRASK, AMI, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 303 HICKORY RIDGE CIR.-

City GLENWOOD	State IA	Zip Code 51534-5410
------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
235.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	04	/	2016

Transaction ID : SA11A.471033

Amount of Each Receipt this Period
30.00

Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	85.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3750 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. TRASK, AMI, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 303 HICKORY RIDGE CIR.-

City GLENWOOD	State IA	Zip Code 51534-5410
------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
235.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	04	/	2016

Transaction ID : SA11A.471380

Amount of Each Receipt this Period
25.00

Memo Item CONTRIBUTION

B. TRASK, AMI, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 303 HICKORY RIDGE CIR.-

City GLENWOOD	State IA	Zip Code 51534-5410
------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
235.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	04	/	2016

Transaction ID : SA11A.472158

Amount of Each Receipt this Period
25.00

Memo Item CONTRIBUTION

C. TRAUGHBER, AMY, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 2305 PINE AVE

City MANHATTAN BEACH	State CA	Zip Code 90266-2834
-------------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) AMY TRAUGHBER	Occupation (for Individual) MOM
--	------------------------------------

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	25	/	2016

Transaction ID : SA11A.452026

Amount of Each Receipt this Period
250.00

Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	300.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3751 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
A. TRAUTMANN, JANE, , ,

Mailing Address **PO BOX2103**

City MENLO PARK	State CA	Zip Code 94026-2103
---------------------------	--------------------	-------------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
--	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
230.00

Date of Receipt
10 / 26 / 2016

Transaction ID : SA11A.451304

Amount of Each Receipt this Period
30.00

Memo Item CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
B. TRAUTMANN, JANE, , ,

Mailing Address **PO BOX2103**

City MENLO PARK	State CA	Zip Code 94026-2103
---------------------------	--------------------	-------------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
--	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
230.00

Date of Receipt
10 / 31 / 2016

Transaction ID : SA11A.463721

Amount of Each Receipt this Period
15.00

Memo Item CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
C. TRAUTMANN, JANE, , ,

Mailing Address **PO BOX2103**

City MENLO PARK	State CA	Zip Code 94026-2103
---------------------------	--------------------	-------------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
--	---

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
230.00

Date of Receipt
10 / 31 / 2016

Transaction ID : SA11A.463733

Amount of Each Receipt this Period
15.00

Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	60.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3752 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
Team Ryan

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
A. TRAUTMANN, JANE, , ,

Mailing Address **PO BOX2103**

City MENLO PARK	State CA	Zip Code 94026-2103
---------------------------	--------------------	-------------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
--	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
230.00

Date of Receipt
11 / 02 / 2016

Transaction ID : SA11A.467122

Amount of Each Receipt this Period
10.00

Memo Item
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
B. TRAUTMANN, JANE, , ,

Mailing Address **PO BOX2103**

City MENLO PARK	State CA	Zip Code 94026-2103
---------------------------	--------------------	-------------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
--	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
230.00

Date of Receipt
11 / 03 / 2016

Transaction ID : SA11A.469313

Amount of Each Receipt this Period
10.00

Memo Item
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
C. TRAUTMANN, JANE, , ,

Mailing Address **PO BOX2103**

City MENLO PARK	State CA	Zip Code 94026-2103
---------------------------	--------------------	-------------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
--	---

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
230.00

Date of Receipt
11 / 03 / 2016

Transaction ID : SA11A.469314

Amount of Each Receipt this Period
10.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	30.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3753 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
A. TRAUTMANN, JANE, , ,

Mailing Address **PO BOX2103**

City MENLO PARK	State CA	Zip Code 94026-2103
---------------------------	--------------------	-------------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
--	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
230.00

Date of Receipt
11 / 02 / 2016

Transaction ID : SA11A.469390

Amount of Each Receipt this Period
10.00

Memo Item
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
B. TRAUTMANN, JANE, , ,

Mailing Address **PO BOX2103**

City MENLO PARK	State CA	Zip Code 94026-2103
---------------------------	--------------------	-------------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
--	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
230.00

Date of Receipt
11 / 07 / 2016

Transaction ID : SA11A.475278

Amount of Each Receipt this Period
10.00

Memo Item
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
C. TRAUTMANN, JANE, , ,

Mailing Address **PO BOX2103**

City MENLO PARK	State CA	Zip Code 94026-2103
---------------------------	--------------------	-------------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
--	---

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
230.00

Date of Receipt
11 / 04 / 2016

Transaction ID : SA11A.479387

Amount of Each Receipt this Period
10.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	30.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3754 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
-----------------------------	-----------------------------	-----------------------------

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
Team Ryan

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
A. TRAUTMANN, JANE, , ,

Mailing Address **PO BOX2103**

City MENLO PARK	State CA	Zip Code 94026-2103
---------------------------	--------------------	-------------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
--	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
230.00

Date of Receipt
11 / 04 / 2016

Transaction ID : SA11A.479462

Amount of Each Receipt this Period
10.00

Memo Item CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
B. TRAVIS, ROBERT, , ,

Mailing Address **8519 DELAVAN AVE**

City AUSTIN	State TX	Zip Code 78717-5406
-----------------------	--------------------	-------------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) ENGINEER	Occupation (for Individual) STATE OF TEXAS
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
300.00

Date of Receipt
10 / 30 / 2016

Transaction ID : SA11A.460034

Amount of Each Receipt this Period
25.00

Memo Item CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
C. TRAWICK, ARCHIE, , ,

Mailing Address **220 JAKES LNDG RD STE2**

City LEXINGTON	State SC	Zip Code 29072-9690
--------------------------	--------------------	-------------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) JAKES LANDING LLC	Occupation (for Individual) MARINA OPERATOR
---	---

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
400.00

Date of Receipt
10 / 25 / 2016

Transaction ID : SA11A.449024

Amount of Each Receipt this Period
100.00

Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	135.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3755 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. TRAWICK, ARCHIE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 220 JAKES LNDG RD STE2
 City LEXINGTON State SC Zip Code 29072-9690
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) JAKES LANDING LLC Occupation (for Individual) MARINA OPERATOR
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 02 / 2016
Transaction ID : SA11A.469851
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION

B. TRAWICK, ARCHIE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 220 JAKES LNDG RD STE2
 City LEXINGTON State SC Zip Code 29072-9690
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) JAKES LANDING LLC Occupation (for Individual) MARINA OPERATOR
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 02 / 2016
Transaction ID : SA11A.469858
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION

C. TRAWICK, ARCHIE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 220 JAKES LNDG RD STE2
 City LEXINGTON State SC Zip Code 29072-9690
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) JAKES LANDING LLC Occupation (for Individual) MARINA OPERATOR
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 02 / 2016
Transaction ID : SA11A.469859
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	300.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3756 OF 4311
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. TREADWELL, MONICA, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 3780 CRACKER WAY

City BONITA SPRINGS	State FL	Zip Code 34134-8628
------------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) SELF EMPLOYED	Occupation (for Individual) REAL ESTATE
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
475.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		21		2016

Transaction ID : SA11A.444627

Amount of Each Receipt this Period
5.00

Memo Item
CONTRIBUTION

B. TREADWELL, MONICA, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 3780 CRACKER WAY

City BONITA SPRINGS	State FL	Zip Code 34134-8628
------------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) SELF EMPLOYED	Occupation (for Individual) REAL ESTATE
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
475.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		21		2016

Transaction ID : SA11A.444628

Amount of Each Receipt this Period
5.00

Memo Item
CONTRIBUTION

C. TREADWELL, MONICA, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 3780 CRACKER WAY

City BONITA SPRINGS	State FL	Zip Code 34134-8628
------------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) SELF EMPLOYED	Occupation (for Individual) REAL ESTATE
--	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
475.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		22		2016

Transaction ID : SA11A.446840

Amount of Each Receipt this Period
25.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	35.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3757 OF 4311
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. TREADWELL, MONICA, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 3780 CRACKER WAY

City BONITA SPRINGS	State FL	Zip Code 34134-8628
------------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) SELF EMPLOYED	Occupation (for Individual) REAL ESTATE
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
475.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
10		28		2016

Transaction ID : SA11A.455823

Amount of Each Receipt this Period
25.00

Memo Item
CONTRIBUTION

B. TREADWELL, MONICA, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 3780 CRACKER WAY

City BONITA SPRINGS	State FL	Zip Code 34134-8628
------------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) SELF EMPLOYED	Occupation (for Individual) REAL ESTATE
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
475.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
11		01		2016

Transaction ID : SA11A.462941

Amount of Each Receipt this Period
10.00

Memo Item
CONTRIBUTION

C. TREADWELL, MONICA, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 3780 CRACKER WAY

City BONITA SPRINGS	State FL	Zip Code 34134-8628
------------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) SELF EMPLOYED	Occupation (for Individual) REAL ESTATE
--	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
475.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
11		02		2016

Transaction ID : SA11A.467097

Amount of Each Receipt this Period
15.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	50.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3758 OF 4311
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. TREADWELL, MONICA, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 3780 CRACKER WAY

City BONITA SPRINGS	State FL	Zip Code 34134-8628
------------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) SELF EMPLOYED	Occupation (for Individual) REAL ESTATE
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
475.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
11		02		2016

Transaction ID : SA11A.469820

Amount of Each Receipt this Period
15.00

Memo Item
CONTRIBUTION

B. TREADWELL, MONICA, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 3780 CRACKER WAY

City BONITA SPRINGS	State FL	Zip Code 34134-8628
------------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) SELF EMPLOYED	Occupation (for Individual) REAL ESTATE
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
475.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
11		06		2016

Transaction ID : SA11A.477123

Amount of Each Receipt this Period
25.00

Memo Item
CONTRIBUTION

C. TREADWAY, WILTON, A., MR.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 2 WESTBROOK CIRCLE

City LITTLE ROCK	State AR	Zip Code 72205-2259
---------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
500.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
11		08		2016

Transaction ID : SA11A.467946

Amount of Each Receipt this Period
100.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	140.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3759 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. TRENT, CARLA, M., MS.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 324 CHESTNUT HILL COURT
 APT 16
 City THOUSAND OAKS State CA Zip Code 91360-3893
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 635.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 09 / 2016
Transaction ID : SA11A.468179
 Amount of Each Receipt this Period
 200.00
 Memo Item
 CONTRIBUTION

B. TRENT, NINA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 122 CREEK RD EAST
 City GREENWOOD State SC Zip Code 29646-8513
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 350.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 29 / 2016
Transaction ID : SA11A.461095
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION

C. TRENT, NINA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 122 CREEK RD EAST
 City GREENWOOD State SC Zip Code 29646-8513
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 350.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 04 / 2016
Transaction ID : SA11A.471451
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	400.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3760 OF 4311
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
Team Ryan

A. TRICE, CLIFTON, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 830 KISKER ROAD

City SAINT CHARLES	State MO	Zip Code 63304-7383
-----------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
275.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		29		2016

Transaction ID : SA11A.460661

Amount of Each Receipt this Period
50.00

Memo Item CONTRIBUTION

B. TRICE, CLIFTON, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 830 KISKER ROAD

City SAINT CHARLES	State MO	Zip Code 63304-7383
-----------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
275.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		29		2016

Transaction ID : SA11A.460665

Amount of Each Receipt this Period
50.00

Memo Item CONTRIBUTION

C. TRILLICH, BARBARA, D., ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 155 CHERRY TREE BEND ROAD

City PORT MURRAY	State NJ	Zip Code 07865-4112
---------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
1200.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11		07		2016

Transaction ID : SA11A.467868

Amount of Each Receipt this Period
1000.00

Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	1100.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3761 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name A. TRIPP, ISAAC, , ,		Date of Receipt M M M / D D D / Y Y Y Y Y Y 10 / 31 / 2016
Mailing Address 101 CHAMPION LANE		Transaction ID : SA11A.457564
City CHAGRIN FALLS	State OH	Zip Code 44022-4200
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 250.00
Name of Employer (for Individual) ETNA PRODUCTS, INC.	Occupation (for Individual) EXECUTIVE	<input type="checkbox"/> Memo Item CONTRIBUTION
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name B. TRISCARI, ANTONIO, , ,		Date of Receipt M M M / D D D / Y Y Y Y Y Y 10 / 25 / 2016
Mailing Address 1159 MARAVILLA CIRCLE		Transaction ID : SA11A.447506
City CORONA	State CA	Zip Code 92881-5913
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 250.00
Name of Employer (for Individual) INFORMATION REQUESTED PER BEST EFFORTS	Occupation (for Individual) INFORMATION REQUESTED PER BE	<input type="checkbox"/> Memo Item CONTRIBUTION
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 900.00	

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name C. TRISCARI, ANTONIO, , ,		Date of Receipt M M M / D D D / Y Y Y Y Y Y 11 / 17 / 2016
Mailing Address 3991 IBBETSON STREET		Transaction ID : SA11A.468413
City CORONA	State CA	Zip Code 92882-5003
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 250.00
Name of Employer (for Individual) CCI	Occupation (for Individual) CEO	<input type="checkbox"/> Memo Item CONTRIBUTION
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Aggregate Year-to-Date ▼ 250.00	

SUBTOTAL of Receipts This Page (optional).....▶	750.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3762 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name A. TRISTAN, ALFREDO, , ,			Date of Receipt MM / DD / YYYY 10 / 21 / 2016
Mailing Address 31574 WINTERGREEN WAY			Transaction ID : SA11A.444574
City MURRIETA	State CA	Zip Code 92563-3245	Amount of Each Receipt this Period 50.00
FEC ID number of contributing federal political committee. C			<input type="checkbox"/> Memo Item CONTRIBUTION
Name of Employer (for Individual) SELF EMPLOYED		Occupation (for Individual) ENGINEERING CONTRACTOR	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 325.00		

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name B. TRISTAN, ALFREDO, , ,			Date of Receipt MM / DD / YYYY 11 / 01 / 2016
Mailing Address 31574 WINTERGREEN WAY			Transaction ID : SA11A.462331
City MURRIETA	State CA	Zip Code 92563-3245	Amount of Each Receipt this Period 25.00
FEC ID number of contributing federal political committee. C			<input type="checkbox"/> Memo Item CONTRIBUTION
Name of Employer (for Individual) SELF EMPLOYED		Occupation (for Individual) ENGINEERING CONTRACTOR	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 325.00		

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name C. TRISTAN, ALFREDO, , ,			Date of Receipt MM / DD / YYYY 11 / 04 / 2016
Mailing Address 31574 WINTERGREEN WAY			Transaction ID : SA11A.472016
City MURRIETA	State CA	Zip Code 92563-3245	Amount of Each Receipt this Period 50.00
FEC ID number of contributing federal political committee. C			<input type="checkbox"/> Memo Item CONTRIBUTION
Name of Employer (for Individual) SELF EMPLOYED		Occupation (for Individual) ENGINEERING CONTRACTOR	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Aggregate Year-to-Date ▼ 325.00		

SUBTOTAL of Receipts This Page (optional).....	125.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3763 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. TROMBETTA, R. NICK, , MR.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 7501 HOOPER AVENUE

City BAKERSFIELD	State CA	Zip Code 93308-3754
---------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
235.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	15	/	2016

Transaction ID : SA11A.468295

Amount of Each Receipt this Period
200.00

Memo Item
CONTRIBUTION

B. TROTTER, SCOTT, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 16 CAMPUS BLVD

City NEWTOWN SQUARE	State PA	Zip Code 19073-3229
------------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) CFG	Occupation (for Individual) INSURANCE
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
800.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	23	/	2016

Transaction ID : SA11A.446600

Amount of Each Receipt this Period
200.00

Memo Item
CONTRIBUTION

C. TROWBRIDGE, CHRIS, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 6019 EAST 500 NORTH
P

City LEESBURG	State IN	Zip Code 46538-8854
------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) MAVERICK PROMOTIONS INC.	Occupation (for Individual) SALES
---	--------------------------------------

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
220.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	27	/	2016

Transaction ID : SA11A.454116

Amount of Each Receipt this Period
100.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	500.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3764 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13 <input type="checkbox"/> 11b <input type="checkbox"/> 14 <input type="checkbox"/> 11c <input type="checkbox"/> 15 <input type="checkbox"/> 12 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. TRUEX, TERRY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 11539 N ST RD 13
 City SYRACUSE State IN Zip Code 46567-9118
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) EXTON INC Occupation (for Individual) OWNER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt 10 / 29 / 2016
Transaction ID : SA11A.460957
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

B. TRUMBORE, PHYLLIS, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 6532 LOVE POINT RD
 City DENVER State NC Zip Code 28037-9756
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 10 / 23 / 2016
Transaction ID : SA11A.446406
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

C. TRUMBORE, PHYLLIS, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 6532 LOVE POINT RD
 City DENVER State NC Zip Code 28037-9756
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 10 / 26 / 2016
Transaction ID : SA11A.450921
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	150.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3765 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13 <input type="checkbox"/> 11b <input type="checkbox"/> 14 <input type="checkbox"/> 11c <input type="checkbox"/> 15 <input type="checkbox"/> 12 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. TRUMBORE, PHYLLIS, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 6532 LOVE POINT RD
 City DENVER State NC Zip Code 28037-9756
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 26 / 2016
Transaction ID : SA11A.450925
 Amount of Each Receipt this Period
 25.00
 Memo Item
 CONTRIBUTION

B. TRUMBORE, PHYLLIS, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 6532 LOVE POINT RD
 City DENVER State NC Zip Code 28037-9756
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 31 / 2016
Transaction ID : SA11A.458426
 Amount of Each Receipt this Period
 25.00
 Memo Item
 CONTRIBUTION

C. TRUMBORE, PHYLLIS, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 6532 LOVE POINT RD
 City DENVER State NC Zip Code 28037-9756
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 31 / 2016
Transaction ID : SA11A.458432
 Amount of Each Receipt this Period
 25.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	75.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3766 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. TRUMBORE, PHYLLIS, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 6532 LOVE POINT RD
 City DENVER State NC Zip Code 28037-9756
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt
 11 / 07 / 2016
Transaction ID : SA11A.480673
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

B. TRUMBORE, PHYLLIS, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 6532 LOVE POINT RD
 City DENVER State NC Zip Code 28037-9756
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt
 11 / 07 / 2016
Transaction ID : SA11A.480679
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

C. TRYCZYNSKI, RON, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address S29W31820 ROBERTS RD
 City WAUKESHA State WI Zip Code 53188-9114
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt
 10 / 31 / 2016
Transaction ID : SA11A.458648
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 75.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 3767 OF 4311
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. TRYTTEN, BEVERLY, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 6 MOULTRIE DR.
City TAYLORS State SC Zip Code 29687-1914
FEC ID number of contributing federal political committee. **C**
Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 490.00

Date of Receipt 10 / 31 / 2016
Transaction ID : SA11A.464096
Amount of Each Receipt this Period 240.00
 Memo Item CONTRIBUTION

B. TRYTTEN, BEVERLY, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 6 MOULTRIE DR.
City TAYLORS State SC Zip Code 29687-1914
FEC ID number of contributing federal political committee. **C**
Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 490.00

Date of Receipt 11 / 04 / 2016
Transaction ID : SA11A.470297
Amount of Each Receipt this Period 150.00
 Memo Item CONTRIBUTION

C. TRYTTEN, BEVERLY, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 6 MOULTRIE DR.
City TAYLORS State SC Zip Code 29687-1914
FEC ID number of contributing federal political committee. **C**
Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 490.00

Date of Receipt 11 / 07 / 2016
Transaction ID : SA11A.480105
Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	490.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3768 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. TSANG, JANIS, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 7 BENJAMIN ROAD

City LEXINGTON	State MA	Zip Code 02421-8005
-------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) PARSONS CORPORATION	Occupation (for Individual) ENGINEER
--	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
665.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 04 / 2016
Transaction ID : SA11A.472430

Amount of Each Receipt this Period
50.00

Memo Item
CONTRIBUTION

B. TSANG, JANIS, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 7 BENJAMIN ROAD

City LEXINGTON	State MA	Zip Code 02421-8005
-------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) PARSONS CORPORATION	Occupation (for Individual) ENGINEER
--	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
665.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 05 / 2016
Transaction ID : SA11A.479307

Amount of Each Receipt this Period
10.00

Memo Item
CONTRIBUTION

C. TSANG, JANIS, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 7 BENJAMIN ROAD

City LEXINGTON	State MA	Zip Code 02421-8005
-------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) PARSONS CORPORATION	Occupation (for Individual) ENGINEER
--	---

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
665.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 05 / 2016
Transaction ID : SA11A.479308

Amount of Each Receipt this Period
10.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	70.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3769 OF 4311
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. TSANG, JANIS, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 7 BENJAMIN ROAD

City LEXINGTON	State MA	Zip Code 02421-8005
-------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) PARSONS CORPORATION	Occupation (for Individual) ENGINEER
--	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
665.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
11		07		2016

Transaction ID : SA11A.480624

Amount of Each Receipt this Period
20.00

Memo Item
CONTRIBUTION

B. TSANG, JANIS, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 7 BENJAMIN ROAD

City LEXINGTON	State MA	Zip Code 02421-8005
-------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) PARSONS CORPORATION	Occupation (for Individual) ENGINEER
--	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
665.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
11		07		2016

Transaction ID : SA11A.480625

Amount of Each Receipt this Period
20.00

Memo Item
CONTRIBUTION

C. TSCHAPPAT, BROCK, E., ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 6115 N DAVIS HWY
89A

City PENSACOLA	State FL	Zip Code 32504-6963
-------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
400.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
10		24		2016

Transaction ID : SA11A.445737

Amount of Each Receipt this Period
100.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	140.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3770 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
Team Ryan

A. TSCHAPPAT, BROCK, E., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 6115 N DAVIS HWY 89A
 City PENSACOLA State FL Zip Code 32504-6963
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt 11 / 08 / 2016
Transaction ID : SA11A.479716
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

B. TSCHAPPAT, BROCK, E., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 6115 N DAVIS HWY 89A
 City PENSACOLA State FL Zip Code 32504-6963
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt 11 / 08 / 2016
Transaction ID : SA11A.479717
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

C. TSOU, SCHUMARRY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 8101 SAPPHIRE BAY CIRCLE
 City LAS VEGAS State NV Zip Code 89128-7738
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 450.00

Date of Receipt 11 / 04 / 2016
Transaction ID : SA11A.473165
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	250.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3771 OF 4311
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. TUCKER, BARRRETT, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2862 COX NECK RD
 City CHESTER State MD Zip Code 21619-2346
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) ALLAN MYERS Occupation (for Individual) BUSINESS DEVELOPMENT MANAGE
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 10 / 29 / 2016
Transaction ID : SA11A.461061
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

B. TUCKER, BRYAN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3746 SCARLET OAK
 City CORPUS CHRISTI State TX Zip Code 78418-9127
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) ONLINE DIRECTIONAL Occupation (for Individual) CONSTRUCTION
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 800.00

Date of Receipt 10 / 28 / 2016
Transaction ID : SA11A.456013
 Amount of Each Receipt this Period 75.00
 Memo Item CONTRIBUTION

C. TUCKER, BRYAN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3746 SCARLET OAK
 City CORPUS CHRISTI State TX Zip Code 78418-9127
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) ONLINE DIRECTIONAL Occupation (for Individual) CONSTRUCTION
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 800.00

Date of Receipt 11 / 04 / 2016
Transaction ID : SA11A.473247
 Amount of Each Receipt this Period 75.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 250.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3772 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
Team Ryan

A. TUCKER, DONALD, P., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 6406 W HALBERT RD
 City BETHESDA State MD Zip Code 20817-5468
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 10 / 23 / 2016
Transaction ID : SA11A.446587
 Amount of Each Receipt this Period 75.00
 Memo Item CONTRIBUTION

B. TUCKER, DONALD, P., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 6406 W HALBERT RD
 City BETHESDA State MD Zip Code 20817-5468
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 11 / 04 / 2016
Transaction ID : SA11A.471879
 Amount of Each Receipt this Period 75.00
 Memo Item CONTRIBUTION

C. TUCKER, GARY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 12765 W 67TH WAY
 City ARVADA State CO Zip Code 80004-2282
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) JETSET LLC Occupation (for Individual) PILOT
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 10 / 26 / 2016
Transaction ID : SA11A.451262
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	250.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3773 OF 4311
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. TUMLINSON, RICHARD, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address **PO BOX 3817**

City GREENWOOD VILLAGE	State CO	Zip Code 80155-3817
----------------------------------	--------------------	-------------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
--	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
400.00

Date of Receipt
10 / 20 / 2016

Transaction ID : SA11A.442401

Amount of Each Receipt this Period
100.00

Memo Item
CONTRIBUTION

B. TUMLINSON, RICHARD, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address **PO BOX 3817**

City GREENWOOD VILLAGE	State CO	Zip Code 80155-3817
----------------------------------	--------------------	-------------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
--	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
400.00

Date of Receipt
11 / 04 / 2016

Transaction ID : SA11A.471723

Amount of Each Receipt this Period
100.00

Memo Item
CONTRIBUTION

C. TUMLINSON, THOMAS, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address **480 W MILL ST**

City NEW BRAUNFELS	State TX	Zip Code 78130-7915
------------------------------	--------------------	-------------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
--	---

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
550.00

Date of Receipt
11 / 08 / 2016

Transaction ID : SA11A.479848

Amount of Each Receipt this Period
100.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	300.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3774 OF 4311
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. TUMLINSON, THOMAS, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 480 W MILL ST
 City NEW BRAUNFELS State TX Zip Code 78130-7915
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 550.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 08 / 2016
Transaction ID : SA11A.479849
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION

B. TUMLINSON, THOMAS, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 480 W MILL ST
 City NEW BRAUNFELS State TX Zip Code 78130-7915
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 550.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 08 / 2016
Transaction ID : SA11A.479850
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION

C. TURBA, DIANE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 203 OAK HILL DR NE
 City BROOKHAVEN State MS Zip Code 39601-3692
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 600.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 21 / 2016
Transaction ID : SA11A.447235
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	300.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3775 OF 4311
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. TURISSINI, ELIZABETH, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address **ONE HARVEST CIRCLE**
R316

City **LINCOLN** State **MA** Zip Code **01773-3214**

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) **NONE** Occupation (for Individual) **RETIRED**

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **300.00**

Date of Receipt **10 / 24 / 2016**
Transaction ID : SA11A.446214

Amount of Each Receipt this Period **100.00**

Memo Item CONTRIBUTION

B. TURISSINI, ELIZABETH, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address **ONE HARVEST CIRCLE**
R316

City **LINCOLN** State **MA** Zip Code **01773-3214**

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) **NONE** Occupation (for Individual) **RETIRED**

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **300.00**

Date of Receipt **11 / 04 / 2016**
Transaction ID : SA11A.473095

Amount of Each Receipt this Period **100.00**

Memo Item CONTRIBUTION

C. TURNER, DONALD, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address **182 DON MIGUEL CIRCLE**

City **PALM DESERT** State **CA** Zip Code **92260-2122**

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) **NONE** Occupation (for Individual) **RETIRED**

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼ **300.00**

Date of Receipt **10 / 31 / 2016**
Transaction ID : SA11A.458561

Amount of Each Receipt this Period **100.00**

Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... **300.00**

TOTAL This Period (last page this line number only).....

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3776 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. TURNER, DONALD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 182 DON MIGUEL CIRCLE
 City PALM DESERT State CA Zip Code 92260-2122
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 11 / 05 / 2016
Transaction ID : SA11A.480949
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

B. TURNER, JOHN, E., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 10675 N MERIDIAN AVE
 City FRESNO State CA Zip Code 93730-3513
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) JOHN-MASTERCARD Occupation (for Individual) ENGINEER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 312.00

Date of Receipt 10 / 31 / 2016
Transaction ID : SA11A.463454
 Amount of Each Receipt this Period 30.00
 Memo Item CONTRIBUTION

C. TURNER, JOHN, E., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 10675 N MERIDIAN AVE
 City FRESNO State CA Zip Code 93730-3513
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) JOHN-MASTERCARD Occupation (for Individual) ENGINEER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 312.00

Date of Receipt 11 / 04 / 2016
Transaction ID : SA11A.479413
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	180.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3777 OF 4311
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. TURNER, JOHN, E., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 10675 N MERIDIAN AVE
 City FRESNO State CA Zip Code 93730-3513
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) JOHN-MASTERCARD Occupation (for Individual) ENGINEER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 312.00

Date of Receipt 11 / 04 / 2016
Transaction ID : SA11A.479415
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

B. TURNER, PAMELA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4 FAYERWEATHER ST.
 City CAMBRIDGE State MA Zip Code 02138-3330
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 10 / 31 / 2016
Transaction ID : SA11A.458279
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

C. TURNER, THOMAS, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 848. CENTRAL. DRIVE
 City ODESSA State TX Zip Code 79761-4202
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) PHYSICIAN
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 2022.00

Date of Receipt 10 / 30 / 2016
Transaction ID : SA11A.460136
 Amount of Each Receipt this Period 131.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶ 231.00
TOTAL This Period (last page this line number only).....▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3778 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
-----------------------------	-----------------------------	-----------------------------

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NAME OF COMMITTEE (In Full)
Team Ryan

A. TURNER, THOMAS, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 848. CENTRAL. DRIVE
 City ODESSA State TX Zip Code 79761-4202
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) PHYSICIAN
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 2022.00

Date of Receipt 11 / 04 / 2016
Transaction ID : SA11A.473351
 Amount of Each Receipt this Period 131.00
 Memo Item CONTRIBUTION

B. TURNER, THOMAS, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 848. CENTRAL. DRIVE
 City ODESSA State TX Zip Code 79761-4202
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) PHYSICIAN
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 2022.00

Date of Receipt 11 / 06 / 2016
Transaction ID : SA11A.476734
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

C. TURNER, THOMAS, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 848. CENTRAL. DRIVE
 City ODESSA State TX Zip Code 79761-4202
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) PHYSICIAN
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 2022.00

Date of Receipt 11 / 06 / 2016
Transaction ID : SA11A.476736
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	331.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3779 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name A. TURNER, THOMAS, , ,		Date of Receipt MM / DD / YYYY 11 / 07 / 2016
Mailing Address 848. CENTRAL. DRIVE		Transaction ID : SA11A.479955
City ODESSA	State TX	Zip Code 79761-4202
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 150.00
Name of Employer (for Individual) SELF EMPLOYED	Occupation (for Individual) PHYSICIAN	<input type="checkbox"/> Memo Item CONTRIBUTION
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 2022.00	

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name B. TURNQUIST, ROBERT, , ,		Date of Receipt MM / DD / YYYY 11 / 04 / 2016
Mailing Address 5670 GRANOLLERS DR		Transaction ID : SA11A.472795
City LAS VEGAS	State NV	Zip Code 89135-2401
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 100.00
Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED	<input type="checkbox"/> Memo Item CONTRIBUTION
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 400.00	

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name C. TUSA, ANTHONY, R., ,		Date of Receipt MM / DD / YYYY 11 / 02 / 2016
Mailing Address 120 DODGE AVE		Transaction ID : SA11A.467111
City JEFFERSON	State LA	Zip Code 70121-3306
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 250.00
Name of Employer (for Individual) DELTA CORP	Occupation (for Individual) MANAGEMENT ANALYST	<input type="checkbox"/> Memo Item CONTRIBUTION
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Aggregate Year-to-Date ▼ 250.00	

SUBTOTAL of Receipts This Page (optional).....	500.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3780 OF 4311
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. TUSSING, GERALD, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 5237 MORLEYCT

City FAIRFAX	State VA	Zip Code 22032-3917
-----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) USFALCON	Occupation (for Individual) COO
---	------------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
600.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		29		2016

Transaction ID : SA11A.460807

Amount of Each Receipt this Period
100.00

Memo Item
CONTRIBUTION

B. TUTTLE, LEE, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 4718 HALLMARK DR.
102

City HOUSTON	State TX	Zip Code 77056-3909
-----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
400.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		20		2016

Transaction ID : SA11A.442304

Amount of Each Receipt this Period
25.00

Memo Item
CONTRIBUTION

C. TWEED, AMY, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 4315 N GLENVIEW

City RAPID CITY	State SD	Zip Code 57702-6823
--------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) RCCSS	Occupation (for Individual) TEACHER
--	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11		04		2016

Transaction ID : SA11A.473835

Amount of Each Receipt this Period
250.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	375.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3781 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
Team Ryan

A. TYLER, SAMUEL, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 12108 LOCUST LN
 City LOUISVILLE State KY Zip Code 40223-1450
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) UNDERWRITERS Occupation (for Individual) INSURANCE
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 28 / 2016
Transaction ID : SA11A.455948
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION

B. TYLER, SAMUEL, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 12108 LOCUST LN
 City LOUISVILLE State KY Zip Code 40223-1450
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) UNDERWRITERS Occupation (for Individual) INSURANCE
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 04 / 2016
Transaction ID : SA11A.472667
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION

C. TYLER, WILLIAM, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 40255 98TH STREET WEST
 City LEONA VALLEY State CA Zip Code 93551-7315
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 600.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 29 / 2016
Transaction ID : SA11A.460623
 Amount of Each Receipt this Period
 50.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	250.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3782 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. TYLER, WILLIAM, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 40255 98TH STREET WEST
 City LEONA VALLEY State CA Zip Code 93551-7315
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 600.00

Date of Receipt 10 / 29 / 2016
Transaction ID : SA11A.460626
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

B. TYLER, WILLIAM, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 40255 98TH STREET WEST
 City LEONA VALLEY State CA Zip Code 93551-7315
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 600.00

Date of Receipt 10 / 29 / 2016
Transaction ID : SA11A.460627
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

C. UCHIYAMA, DON, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 12863 HAMMOCK LANE
 City PLAYA VISTA State CA Zip Code 90094-2096
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 550.00

Date of Receipt 11 / 01 / 2016
Transaction ID : SA11A.462240
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 200.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3783 OF 4311
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. UCHIYAMA, DON, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 12863 HAMMOCK LANE

City PLAYA VISTA	State CA	Zip Code 90094-2096
---------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
550.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	01	/	2016

Transaction ID : SA11A.462246

Amount of Each Receipt this Period
100.00

Memo Item
CONTRIBUTION

B. UGHETTA, MARY, L., ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 261 LLWYDS LANE

City VERO BEACH	State FL	Zip Code 32963-3252
--------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
475.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	25	/	2016

Transaction ID : SA11A.447944

Amount of Each Receipt this Period
50.00

Memo Item
CONTRIBUTION

C. UGHETTA, MARY, L., ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 261 LLWYDS LANE

City VERO BEACH	State FL	Zip Code 32963-3252
--------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
475.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	25	/	2016

Transaction ID : SA11A.447945

Amount of Each Receipt this Period
50.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	200.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3784 OF 4311
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
UGHETTA, MARY, L., ,

Mailing Address **261 LLWYDS LANE**

City VERO BEACH	State FL	Zip Code 32963-3252
---------------------------	--------------------	-------------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
--	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **475.00**

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	27	/	2016

Transaction ID : SA11A.453493

Amount of Each Receipt this Period

50.00

Memo Item
CONTRIBUTION

B. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
UGHETTA, MARY, L., ,

Mailing Address **261 LLWYDS LANE**

City VERO BEACH	State FL	Zip Code 32963-3252
---------------------------	--------------------	-------------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
--	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **475.00**

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	27	/	2016

Transaction ID : SA11A.453496

Amount of Each Receipt this Period

50.00

Memo Item
CONTRIBUTION

C. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
UGHETTA, MARY, L., ,

Mailing Address **261 LLWYDS LANE**

City VERO BEACH	State FL	Zip Code 32963-3252
---------------------------	--------------------	-------------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
--	---

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼ **475.00**

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	01	/	2016

Transaction ID : SA11A.462914

Amount of Each Receipt this Period

25.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	125.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3785 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. UHLEMEYER, GARY, , MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 906 S KIRKWOOD RD
 City ST LOUIS State MO Zip Code 63122-6018
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) CRC INS SVS Occupation (for Individual) SR VP
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 750.00

Date of Receipt 10 / 31 / 2016
Transaction ID : SA11A.458170
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

B. UHLEMEYER, GARY, , MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 906 S KIRKWOOD RD
 City ST LOUIS State MO Zip Code 63122-6018
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) CRC INS SVS Occupation (for Individual) SR VP
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 750.00

Date of Receipt 10 / 31 / 2016
Transaction ID : SA11A.458195
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

C. UHLMANN, BARBARA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 11401 E BELLA VISTA DR
 City SCOTTSDALE State AZ Zip Code 85259-5813
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 700.00

Date of Receipt 10 / 27 / 2016
Transaction ID : SA11A.453632
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	200.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3786 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. UHORCHAK, JOHN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO BOX 525
 City CORNWALL State NY Zip Code 12518-0525
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) PHYSICIAN
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 10 / 30 / 2016
Transaction ID : SA11A.464926
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

B. ULRICH, GERARD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 11553 LUCASVILLE RD
 City MANASSAS State VA Zip Code 20112-4422
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) LOCKHEED MARTIN Occupation (for Individual) QUALITY ENGINEER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1300.00

Date of Receipt 10 / 25 / 2016
Transaction ID : SA11A.448652
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

C. ULRICH, GERARD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 11553 LUCASVILLE RD
 City MANASSAS State VA Zip Code 20112-4422
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) LOCKHEED MARTIN Occupation (for Individual) QUALITY ENGINEER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1300.00

Date of Receipt 11 / 04 / 2016
Transaction ID : SA11A.479533
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	300.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3787 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. ULRICH, GERARD, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 11553 LUCASVILLE RD

City MANASSAS	State VA	Zip Code 20112-4422
------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) LOCKHEED MARTIN	Occupation (for Individual) QUALITY ENGINEER
--	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1300.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	04	/	2016

Transaction ID : SA11A.479535

Amount of Each Receipt this Period
100.00

Memo Item CONTRIBUTION

B. ULRICH, JEAN, E., MRS.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1372 LUTHER LANE

City ARLINGTON HEIGHTS	State IL	Zip Code 60004-8101
---------------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
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Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
700.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	07	/	2016

Transaction ID : SA11A.467737

Amount of Each Receipt this Period
200.00

Memo Item CONTRIBUTION

C. UNDERWOOD, RON, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 104 PASSAGE DRIVE

City LAFAYETTE	State LA	Zip Code 70506-6641
-------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
221.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	04	/	2016

Transaction ID : SA11A.470628

Amount of Each Receipt this Period
10.00

Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	310.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3788 OF 4311
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. UNDERWOOD, RON, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 104 PASSAGE DRIVE

City LAFAYETTE	State LA	Zip Code 70506-6641
-------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
221.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11		04		2016

Transaction ID : SA11A.470629

Amount of Each Receipt this Period
18.00

Memo Item
CONTRIBUTION

B. UNDERWOOD, RON, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 104 PASSAGE DRIVE

City LAFAYETTE	State LA	Zip Code 70506-6641
-------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
221.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11		04		2016

Transaction ID : SA11A.470630

Amount of Each Receipt this Period
18.00

Memo Item
CONTRIBUTION

C. UNDERWOOD, RON, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 104 PASSAGE DRIVE

City LAFAYETTE	State LA	Zip Code 70506-6641
-------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
221.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11		04		2016

Transaction ID : SA11A.471703

Amount of Each Receipt this Period
35.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	71.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3789 OF 4311
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. UNGAR, STEPHEN, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1000 ROYAL COURT
UNIT 1208

City NORTH HILLS State NY Zip Code 11040-2605

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) AMTRUST FINANCIAL SERVICES, INC. Occupation (for Individual) ATTORNEY

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt 11 / 04 / 2016
Transaction ID : SA11A.473808

Amount of Each Receipt this Period 250.00

Memo Item CONTRIBUTION

B. UPSHAW, RICHARD, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 833 HEATHERHAVEN DR.

City BALLWIN State MO Zip Code 63011-5113

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) R2 RESTAURANTS, INC. Occupation (for Individual) RESTAURANT OWNER

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 900.00

Date of Receipt 10 / 24 / 2016
Transaction ID : SA11A.445808

Amount of Each Receipt this Period 100.00

Memo Item CONTRIBUTION

C. UPSHAW, RICHARD, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 833 HEATHERHAVEN DR.

City BALLWIN State MO Zip Code 63011-5113

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) R2 RESTAURANTS, INC. Occupation (for Individual) RESTAURANT OWNER

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 900.00

Date of Receipt 10 / 25 / 2016
Transaction ID : SA11A.448355

Amount of Each Receipt this Period 250.00

Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 600.00

TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3790 OF 4311
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. URBANAS, GARY, J., ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 337 BALTIMORE STREET
APT 2

City GETTYSBURG State PA Zip Code 17325-2627

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) INFORMATION REQUESTED PER BEST EFFORTS Occupation (for Individual) INFORMATION REQUESTED PER BE

Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 343.00

Date of Receipt 10 / 20 / 2016
Transaction ID : SA11A.433460

Amount of Each Receipt this Period 35.00

Memo Item CONTRIBUTION

B. URBANAS, GARY, J., ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 337 BALTIMORE STREET
APT 2

City GETTYSBURG State PA Zip Code 17325-2627

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) INFORMATION REQUESTED PER BEST EFFORTS Occupation (for Individual) INFORMATION REQUESTED PER BE

Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 343.00

Date of Receipt 10 / 25 / 2016
Transaction ID : SA11A.447484

Amount of Each Receipt this Period 53.00

Memo Item CONTRIBUTION

C. URSTADT, ELINOR, F., ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 6 BEECHWOOD ROAD

City BRONXVILLE State NY Zip Code 10708-3202

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED

Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 1200.00

Date of Receipt 10 / 24 / 2016
Transaction ID : SA11A.446209

Amount of Each Receipt this Period 100.00

Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶ 188.00

TOTAL This Period (last page this line number only).....▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3791 OF 4311
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. URSTADT, ELINOR, F., ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address **6 BEECHWOOD ROAD**

City BRONXVILLE	State NY	Zip Code 10708-3202
---------------------------	--------------------	-------------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
--	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1200.00

Date of Receipt
11 / 04 / 2016

Transaction ID : SA11A.473144

Amount of Each Receipt this Period
100.00

Memo Item
CONTRIBUTION

B. UTZINGER, KRISTIN, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address **PO BOX 700469**

City OOSTBURG	State WI	Zip Code 53070-0469
-------------------------	--------------------	-------------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
--	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
405.00

Date of Receipt
10 / 24 / 2016

Transaction ID : SA11A.445889

Amount of Each Receipt this Period
50.00

Memo Item
CONTRIBUTION

C. VAASLLUZZO, JOSEPH, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address **2200 CHERRY PALM ROAD**

City BOCA RATON	State FL	Zip Code 33432-7988
---------------------------	--------------------	-------------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) SELF EMPLOYED	Occupation (for Individual) RETAIL, REAL ESTATE
---	---

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
2000.00

Date of Receipt
11 / 04 / 2016

Transaction ID : SA11A.471806

Amount of Each Receipt this Period
1000.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	1150.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3792 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. VAGOVIC, PETER, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2223 GLENDALE RD
 City AUGUSTA State GA Zip Code 30904-3449
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) VAGOVIC HEATING AND AIR CONDITIONING C Occupation (for Individual) HVAC
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 650.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 25 / 2016
Transaction ID : SA11A.447923
 Amount of Each Receipt this Period
 250.00
 Memo Item
CONTRIBUTION

B. VAGOVIC, PETER, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2223 GLENDALE RD
 City AUGUSTA State GA Zip Code 30904-3449
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) VAGOVIC HEATING AND AIR CONDITIONING C Occupation (for Individual) HVAC
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 650.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 02 / 2016
Transaction ID : SA11A.465714
 Amount of Each Receipt this Period
 100.00
 Memo Item
CONTRIBUTION

C. VAGOVIC, PETER, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2223 GLENDALE RD
 City AUGUSTA State GA Zip Code 30904-3449
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) VAGOVIC HEATING AND AIR CONDITIONING C Occupation (for Individual) HVAC
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 650.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 02 / 2016
Transaction ID : SA11A.470282
 Amount of Each Receipt this Period
 100.00
 Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	450.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3793 OF 4311
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. VALBERG, ELWIN, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 6313 CREIGHTON AVE NW

City HUNTSVILLE	State AL	Zip Code 35810-1356
--------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
227.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		21		2016

Transaction ID : SA11A.444638

Amount of Each Receipt this Period
25.00

Memo Item CONTRIBUTION

B. VALBERG, ELWIN, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 6313 CREIGHTON AVE NW

City HUNTSVILLE	State AL	Zip Code 35810-1356
--------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
227.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		25		2016

Transaction ID : SA11A.452022

Amount of Each Receipt this Period
2.00

Memo Item CONTRIBUTION

C. VALBERG, ELWIN, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 6313 CREIGHTON AVE NW

City HUNTSVILLE	State AL	Zip Code 35810-1356
--------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
227.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		27		2016

Transaction ID : SA11A.452843

Amount of Each Receipt this Period
30.00

Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	57.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3794 OF 4311
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. VALBERG, ELWIN, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 6313 CREIGHTON AVE NW

City HUNTSVILLE	State AL	Zip Code 35810-1356
--------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
227.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
11		06		2016

Transaction ID : SA11A.477436

Amount of Each Receipt this Period
25.00

Memo Item CONTRIBUTION

B. VALLAR, SCOTT, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1530 LONDON RAOD

City CHARLOTTESVILLE	State VA	Zip Code 22901-8880
-------------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) GUARD HILL ADVISORS	Occupation (for Individual) INVESTMENT ADVISOR
--	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1150.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
10		21		2016

Transaction ID : SA11A.444282

Amount of Each Receipt this Period
100.00

Memo Item CONTRIBUTION

C. VALLAR, SCOTT, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1530 LONDON RAOD

City CHARLOTTESVILLE	State VA	Zip Code 22901-8880
-------------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) GUARD HILL ADVISORS	Occupation (for Individual) INVESTMENT ADVISOR
--	---

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
1150.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
10		21		2016

Transaction ID : SA11A.444284

Amount of Each Receipt this Period
100.00

Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	225.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3795 OF 4311
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. VAN ARSDALE, JAY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 13722 MILTON AVE
 City WESTMINSTER State CA Zip Code 92683-2916
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) COUNTRY CITY TOWING Occupation (for Individual) MGR.
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 450.00

Date of Receipt 10 / 26 / 2016
Transaction ID : SA11A.454429
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

B. VAN AMERONGEN, LEWIS, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 509 MADISON AVENUE 2300
 City NEW YORK State NY Zip Code 10022-5501
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) ENTREPRENEUR, INVESTOR
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1100.00

Date of Receipt 11 / 07 / 2016
Transaction ID : SA11A.476176
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

C. VAN BOXTEL, RICHARD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5023 ADDICKS SATSUMA SUITE L
 City HOUSTON State TX Zip Code 77084-6075
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 855.00

Date of Receipt 10 / 25 / 2016
Transaction ID : SA11A.449055
 Amount of Each Receipt this Period 75.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 225.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3796 OF 4311
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. VAN BOXTEL, RICHARD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5023 ADDICKS SATSUMA SUITE L
 City HOUSTON State TX Zip Code 77084-6075
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 855.00

Date of Receipt **10 / 28 / 2016**
Transaction ID : SA11A.455876
 Amount of Each Receipt this Period 75.00
 Memo Item CONTRIBUTION

B. VAN BOXTEL, RICHARD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5023 ADDICKS SATSUMA SUITE L
 City HOUSTON State TX Zip Code 77084-6075
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 855.00

Date of Receipt **11 / 03 / 2016**
Transaction ID : SA11A.469249
 Amount of Each Receipt this Period 75.00
 Memo Item CONTRIBUTION

C. VAN BOXTEL, RICHARD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5023 ADDICKS SATSUMA SUITE L
 City HOUSTON State TX Zip Code 77084-6075
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 855.00

Date of Receipt **11 / 06 / 2016**
Transaction ID : SA11A.478234
 Amount of Each Receipt this Period 75.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 225.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3797 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. VAN BOXTEL, RICHARD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5023 ADDICKS SATSUMA SUITE L
 City HOUSTON State TX Zip Code 77084-6075
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 855.00

Date of Receipt 11 / 07 / 2016
Transaction ID : SA11A.480640
 Amount of Each Receipt this Period 75.00
 Memo Item CONTRIBUTION

B. VAN DENBURGH, DAVID, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5439 E CALLE DEL NORTE
 City PHOENIX State AZ Zip Code 85018-4531
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) AMERICAN FENCE CO Occupation (for Individual) CHAIRMAN & CEO
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 10400.00

Date of Receipt 10 / 27 / 2016
Transaction ID : SA11A.452256
 Amount of Each Receipt this Period 10400.00
 Memo Item CONTRIBUTION

C. VAN ECK, CAROL, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1931 WILMONT DR., SE
 City KENTWOOD State MI Zip Code 49508-6565
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 675.00

Date of Receipt 10 / 21 / 2016
Transaction ID : SA11A.444080
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	10575.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3798 OF 4311
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. VAN ECK, CAROL, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1931 WILMONT DR., SE
 City KENTWOOD State MI Zip Code 49508-6565
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 675.00

Date of Receipt 10 / 21 / 2016
Transaction ID : SA11A.447250
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

B. VAN ECK, CAROL, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1931 WILMONT DR., SE
 City KENTWOOD State MI Zip Code 49508-6565
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 675.00

Date of Receipt 10 / 25 / 2016
Transaction ID : SA11A.448514
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

C. VAN ECK, CAROL, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1931 WILMONT DR., SE
 City KENTWOOD State MI Zip Code 49508-6565
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 675.00

Date of Receipt 11 / 06 / 2016
Transaction ID : SA11A.477105
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶ 375.00
TOTAL This Period (last page this line number only).....▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3799 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. VAN ECK, CAROL, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1931 WILMONT DR., SE
 City KENTWOOD State MI Zip Code 49508-6565
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 675.00

Date of Receipt 11 / 06 / 2016
Transaction ID : SA11A.477111
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

B. VAN FLEET, RICHARD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 44 S MAIN ST
 City PENNINGTON State NJ Zip Code 08534-2817
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RICHARD VAN FLEET Occupation (for Individual) GRAPHICS
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 900.00

Date of Receipt 11 / 01 / 2016
Transaction ID : SA11A.462493
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

C. VAN FLEET, RICHARD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 44 S MAIN ST
 City PENNINGTON State NJ Zip Code 08534-2817
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RICHARD VAN FLEET Occupation (for Individual) GRAPHICS
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 900.00

Date of Receipt 11 / 01 / 2016
Transaction ID : SA11A.462494
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	225.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3800 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
Team Ryan

A. VAN FLEET, RICHARD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 44 S MAIN ST
 City PENNINGTON State NJ Zip Code 08534-2817
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RICHARD VAN FLEET Occupation (for Individual) GRAPHICS
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 900.00

Date of Receipt 11 / 04 / 2016
Transaction ID : SA11A.473694
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

B. VAN HEUKELO, JOHN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2550 DEER LANE ROAD
 City MARION State IA Zip Code 52302-9603
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 850.00

Date of Receipt 10 / 20 / 2016
Transaction ID : SA11A.442359
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

C. VAN HOOSE, MADELINE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2420 SILVERTHORN CT.
 City FORT WORTH State TX Zip Code 76177-7322
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 210.00

Date of Receipt 10 / 24 / 2016
Transaction ID : SA11A.445735
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	375.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3801 OF 4311
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. VAN HOOSE, MADELINE, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 2420 SILVERTHORN CT.

City FORT WORTH	State TX	Zip Code 76177-7322
--------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
210.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		24		2016

Transaction ID : SA11A.445736

Amount of Each Receipt this Period
25.00

Memo Item
CONTRIBUTION

B. VAN HOOSE, MADELINE, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 2420 SILVERTHORN CT.

City FORT WORTH	State TX	Zip Code 76177-7322
--------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
210.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		31		2016

Transaction ID : SA11A.457904

Amount of Each Receipt this Period
5.00

Memo Item
CONTRIBUTION

C. VAN HORN, MICHAEL, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 43 W. MISTY MORNING TRACE

City THE WOODLANDS	State TX	Zip Code 77381-3859
-----------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) INDEPENDENCE RESOURCES MANAGEMENT, LLC	Occupation (for Individual) CEO
---	------------------------------------

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
1250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		26		2016

Transaction ID : SA11A.450811

Amount of Each Receipt this Period
250.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	280.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3802 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. VAN HORN, MICHAEL, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 43 W. MISTY MORNING TRACE
 City THE WOODLANDS State TX Zip Code 77381-3859
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) INDEPENDENCE RESOURCES MANAGEMENT, LLC Occupation (for Individual) CEO
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 1250.00

Date of Receipt **10 / 28 / 2016**
Transaction ID : SA11A.455987
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

B. VAN HORN, MICHAEL, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 43 W. MISTY MORNING TRACE
 City THE WOODLANDS State TX Zip Code 77381-3859
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) INDEPENDENCE RESOURCES MANAGEMENT, LLC Occupation (for Individual) CEO
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 1250.00

Date of Receipt **11 / 04 / 2016**
Transaction ID : SA11A.471502
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

C. VAN HORN, MICHAEL, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 43 W. MISTY MORNING TRACE
 City THE WOODLANDS State TX Zip Code 77381-3859
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) INDEPENDENCE RESOURCES MANAGEMENT, LLC Occupation (for Individual) CEO
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 1250.00

Date of Receipt **11 / 04 / 2016**
Transaction ID : SA11A.472802
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	750.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3803 OF 4311
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. VAN INGEN, JOHN, F., MR.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 2108 PALACE AVE.

City ST. PAUL	State MN	Zip Code 55105-1329
------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) JOHN VAN INGEN	Occupation (for Individual) COLLEGE TEACHER
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
259.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
11		03		2016

Transaction ID : SA11A.474387

Amount of Each Receipt this Period
50.00

Memo Item
CONTRIBUTION

B. VAN KIRK, FRAN, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 109 GREEN LANE

City HAVERFORD	State PA	Zip Code 19041-2025
-------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
800.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
10		27		2016

Transaction ID : SA11A.453462

Amount of Each Receipt this Period
100.00

Memo Item
CONTRIBUTION

C. VAN KIRK, FRAN, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 109 GREEN LANE

City HAVERFORD	State PA	Zip Code 19041-2025
-------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
800.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
10		27		2016

Transaction ID : SA11A.453471

Amount of Each Receipt this Period
100.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	250.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3804 OF 4311
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. VAN KIRK, FRAN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 109 GREEN LANE
 City HAVERFORD State PA Zip Code 19041-2025
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 800.00

Date of Receipt 10 / 27 / 2016
Transaction ID : SA11A.453473
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

B. VAN SLYKE, CHARLES, N., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 16 DEERWOOD LANE
 City PALMYRA State VA Zip Code 22963-2754
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 240.00

Date of Receipt 10 / 20 / 2016
Transaction ID : SA11A.441939
 Amount of Each Receipt this Period 20.00
 Memo Item CONTRIBUTION

C. VAN SLYKE, CHARLES, N., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 16 DEERWOOD LANE
 City PALMYRA State VA Zip Code 22963-2754
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 240.00

Date of Receipt 10 / 26 / 2016
Transaction ID : SA11A.450166
 Amount of Each Receipt this Period 10.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶ 130.00
TOTAL This Period (last page this line number only).....▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3805 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. VAN SLYKE, CHARLES, N., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 16 DEERWOOD LANE
 City PALMYRA State VA Zip Code 22963-2754
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 240.00

Date of Receipt 10 / 31 / 2016
Transaction ID : SA11A.457982
 Amount of Each Receipt this Period 10.00
 Memo Item CONTRIBUTION

B. VANAMBURGH, STEVE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3945 MARQUETTE
 City DALLAS State TX Zip Code 75225-5432
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) KDC Occupation (for Individual) SALES
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt 10 / 27 / 2016
Transaction ID : SA11A.453225
 Amount of Each Receipt this Period 1000.00
 Memo Item CONTRIBUTION

C. VANCE, WILLIAM, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4112 TUFTON
 City WILLIAMSBURG State VA Zip Code 23188-2799
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 800.00

Date of Receipt 11 / 02 / 2016
Transaction ID : SA11A.465138
 Amount of Each Receipt this Period 500.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶ 1510.00
TOTAL This Period (last page this line number only).....▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3806 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. VANDER SLUIS, SCOTT, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1553 18TH ST SW
 City LE MARS State IA Zip Code 51031-3041
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) VAN'S SANITATION INC Occupation (for Individual) OWNER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 10 / 31 / 2016
Transaction ID : SA11A.458567
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

B. VANDER SLUIS, SCOTT, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1553 18TH ST SW
 City LE MARS State IA Zip Code 51031-3041
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) VAN'S SANITATION INC Occupation (for Individual) OWNER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 10 / 31 / 2016
Transaction ID : SA11A.458597
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

C. VANETTEN, RONALD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address P.O. BOX 24
 City BLOOMINGTON State IL Zip Code 61702-0024
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 225.00

Date of Receipt 10 / 26 / 2016
Transaction ID : SA11A.451216
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶ 150.00
TOTAL This Period (last page this line number only).....▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3807 OF 4311
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. VANETTEN, RONALD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address P.O. BOX 24
 City BLOOMINGTON State IL Zip Code 61702-0024
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 225.00

Date of Receipt 11 / 04 / 2016
Transaction ID : SA11A.473141
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

B. VANQYLEN, GORDON, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 145 COLUMBIA AVENUE APT 600
 City HOLLAND State MI Zip Code 49423-2980
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) INFORMATION REQUESTED PER BEST EFFORTS Occupation (for Individual) INFORMATION REQUESTED PER BE
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 375.00

Date of Receipt 11 / 02 / 2016
Transaction ID : SA11A.465027
 Amount of Each Receipt this Period 375.00
 Memo Item CONTRIBUTION

C. VANVALKENBURG, ANN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO BOX 1124
 City PUEBLO State CO Zip Code 81002-1124
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) ANESTHESIA PAIN MANAGEMENT Occupation (for Individual) NURSE ANESTHETIST
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 700.00

Date of Receipt 10 / 29 / 2016
Transaction ID : SA11A.461118
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 525.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3808 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. VANVALKENBURG, ANN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO BOX 1124
 City PUEBLO State CO Zip Code 81002-1124
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) ANESTHESIA PAIN MANAGEMENT Occupation (for Individual) NURSE ANESTHETIST
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 700.00

Date of Receipt 11 / 04 / 2016
Transaction ID : SA11A.472666
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

B. VAREHA, ALBIN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 113 ATTERBURY RD
 City MONROEVILLE State PA Zip Code 15146-4801
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 225.00

Date of Receipt 10 / 25 / 2016
Transaction ID : SA11A.448369
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

C. VAREHA, ALBIN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 113 ATTERBURY RD
 City MONROEVILLE State PA Zip Code 15146-4801
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 225.00

Date of Receipt 11 / 07 / 2016
Transaction ID : SA11A.480067
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	175.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3809 OF 4311
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. VARGAS, JOSEPH, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 2950 VAN HORN RD

City FAIRBANKS	State AK	Zip Code 99709-5417
-------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) DENALI FENCEWORKS, LLC	Occupation (for Individual) CONTRACTOR
---	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		20		2016

Transaction ID : SA11A.444827

Amount of Each Receipt this Period
250.00

Memo Item
CONTRIBUTION

B. VARN, WILLIAM, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address PO BOX 2726

City HARTSVILLE	State SC	Zip Code 29551-2726
--------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
350.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		24		2016

Transaction ID : SA11A.449566

Amount of Each Receipt this Period
50.00

Memo Item
CONTRIBUTION

C. VARN, WILLIAM, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address PO BOX 2726

City HARTSVILLE	State SC	Zip Code 29551-2726
--------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
350.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11		07		2016

Transaction ID : SA11A.480627

Amount of Each Receipt this Period
50.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	350.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3810 OF 4311
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. VARNER, PAULA, K., MRS.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1515 N LINDEN COURT

City WICHITA	State KS	Zip Code 67206-3312
-----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) HOMEMAKER	Occupation (for Individual) HOMEMAKER
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	08	/	2016

Transaction ID : SA11A.467912

Amount of Each Receipt this Period
250.00

Memo Item
CONTRIBUTION

B. VARNI, LOUIE, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 323 RAYLOW AVE.

City MANTECA	State CA	Zip Code 95336-4007
-----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) LVF ENTERPRISES	Occupation (for Individual) MANAGING PARTNER
--	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	31	/	2016

Transaction ID : SA11A.464749

Amount of Each Receipt this Period
250.00

Memo Item
CONTRIBUTION

C. VASAPOLLO, ROSA, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1326 JUANITA WAY

City CAMPBELL	State CA	Zip Code 95008-6307
------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
337.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	27	/	2016

Transaction ID : SA11A.453832

Amount of Each Receipt this Period
27.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	527.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3811 OF 4311
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. VASAPOLLO, ROSA, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1326 JUANITA WAY

City CAMPBELL	State CA	Zip Code 95008-6307
------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
337.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		28		2016

Transaction ID : SA11A.455054

Amount of Each Receipt this Period
100.00

Memo Item
CONTRIBUTION

B. VASAPOLLO, ROSA, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1326 JUANITA WAY

City CAMPBELL	State CA	Zip Code 95008-6307
------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
337.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11		04		2016

Transaction ID : SA11A.472673

Amount of Each Receipt this Period
27.00

Memo Item
CONTRIBUTION

C. VASEY, ROGER, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 3580 GIN LANE

City NAPLES	State FL	Zip Code 34102-7815
----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
2700.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		24		2016

Transaction ID : SA11A.444070

Amount of Each Receipt this Period
2700.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	2827.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3812 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. VASILAKOS, GEORGE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 46 INNISBROOK AVE
 City LAS VEGAS State NV Zip Code 89113-1225
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) DITRONICS Occupation (for Individual) CEO
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 10 / 30 / 2016
Transaction ID : SA11A.459987
 Amount of Each Receipt this Period 500.00
 Memo Item
CONTRIBUTION

B. VASQUEZ, MARCIA, J., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2908 PUEBLO TSANKAWI
 City SANTA FE State NM Zip Code 87507-2530
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) BARNABAS INSTITUTE Occupation (for Individual) VOLUNTEER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 625.00

Date of Receipt 10 / 31 / 2016
Transaction ID : SA11A.458044
 Amount of Each Receipt this Period 100.00
 Memo Item
CONTRIBUTION

C. VASQUEZ, MARCIA, J., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2908 PUEBLO TSANKAWI
 City SANTA FE State NM Zip Code 87507-2530
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) BARNABAS INSTITUTE Occupation (for Individual) VOLUNTEER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 625.00

Date of Receipt 10 / 31 / 2016
Transaction ID : SA11A.458057
 Amount of Each Receipt this Period 100.00
 Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 700.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3813 OF 4311
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. VASQUEZ, MARCIA, J., ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 2908 PUEBLO TSANKAWI

City SANTA FE	State NM	Zip Code 87507-2530
------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) BARNABAS INSTITUTE	Occupation (for Individual) VOLUNTEER
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
625.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		31		2016

Transaction ID : SA11A.458059

Amount of Each Receipt this Period
100.00

Memo Item
CONTRIBUTION

B. VASSALLUZZO, JOSEPH, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 2200 CHERRY PALM ROAD

City BOCA RATON	State FL	Zip Code 33432-7988
--------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) SELF EMPLOYED	Occupation (for Individual) RETAIL, REAL ESTATE
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
950.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		22		2016

Transaction ID : SA11A.447040

Amount of Each Receipt this Period
250.00

Memo Item
CONTRIBUTION

C. VASSALLUZZO, JOSEPH, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 2200 CHERRY PALM ROAD

City BOCA RATON	State FL	Zip Code 33432-7988
--------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) SELF EMPLOYED	Occupation (for Individual) RETAIL, REAL ESTATE
--	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
950.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		22		2016

Transaction ID : SA11A.447041

Amount of Each Receipt this Period
250.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	600.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3814 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
-----------------------------	-----------------------------	-----------------------------

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NAME OF COMMITTEE (In Full)
Team Ryan

A. VASSALLUZZO, JOSEPH, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2200 CHERRY PALM ROAD
 City BOCA RATON State FL Zip Code 33432-7988
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) RETAIL, REAL ESTATE
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 950.00

Date of Receipt 10 / 22 / 2016
Transaction ID : SA11A.447042
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

B. VASSALLUZZO, JOSEPH, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2200 CHERRY PALM ROAD
 City BOCA RATON State FL Zip Code 33432-7988
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) RETAIL, REAL ESTATE
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 950.00

Date of Receipt 10 / 22 / 2016
Transaction ID : SA11A.447043
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

C. VATHAYANON, SATHAPORN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5545 N FRESNO STREET APT 212
 City FRESNO State CA Zip Code 93710-6169
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) INFORMATION REQUESTED PER BEST EFFORTS Occupation (for Individual) INFORMATION REQUESTED PER BEST EFFORTS
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 10 / 24 / 2016
Transaction ID : SA11A.443887
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	300.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3815 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. VATHAYANON, SATHAPORN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5545 N FRESNO STREET
 APT 212
 City FRESNO State CA Zip Code 93710-6169
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) INFORMATION REQUESTED PER BEST EFFORTS Occupation (for Individual) INFORMATION REQUESTED PER BE
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 300.00

Date of Receipt 11 / 08 / 2016
Transaction ID : SA11A.468040
 Amount of Each Receipt this Period 150.00
 Memo Item CONTRIBUTION

B. VATTHAUER, VIRGENE, A., MRS.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1321 STRATFORD COURT
 City MIDDLETON State WI Zip Code 53562-3675
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 225.00

Date of Receipt 10 / 28 / 2016
Transaction ID : SA11A.455063
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

C. VATTHAUER, VIRGENE, A., MRS.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1321 STRATFORD COURT
 City MIDDLETON State WI Zip Code 53562-3675
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 225.00

Date of Receipt 11 / 02 / 2016
Transaction ID : SA11A.469756
 Amount of Each Receipt this Period 15.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶ 190.00
TOTAL This Period (last page this line number only).....▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3816 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. VAUGHN, JACK, C., JR.
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5325 WANETA DR
 City DALLAS State TX Zip Code 75209-5611
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) ENERGY INVESTMENTS
 Receipt For: Primary General Other (specify) Aggregate Year-to-Date 1000.00

Date of Receipt 10 / 24 / 2016
Transaction ID : SA11A.443435
 Amount of Each Receipt this Period 1000.00
 Memo Item CONTRIBUTION

B. VAUGHAN, JANE, C., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3331 DORCHESTER COURT
 City LYNCHBURG State VA Zip Code 24503-3128
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) HOMEMAKER
 Receipt For: Primary General Other (specify) Aggregate Year-to-Date 250.00

Date of Receipt 10 / 25 / 2016
Transaction ID : SA11A.447278
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

C. VAUGHT, KEN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO BOX 3663
 City CONROE State TX Zip Code 77305-3663
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) VAUGHT INVESTMENTS Occupation (for Individual) CONSTRUCTION
 Receipt For: Primary General Other (specify) Aggregate Year-to-Date 300.00

Date of Receipt 11 / 06 / 2016
Transaction ID : SA11A.480849
 Amount of Each Receipt this Period 300.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... 1550.00
TOTAL This Period (last page this line number only).....

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3817 OF 4311
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Team Ryan

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
A. VAUGHN, RICHARD, , ,

Mailing Address **495 CROSSINGHAM ROAD**

City MT. AIRY	State NC	Zip Code 27030-9169
-------------------------	--------------------	-------------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
--	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
300.00

Date of Receipt
10 / 27 / 2016

Transaction ID : SA11A.456806

Amount of Each Receipt this Period
100.00

Memo Item
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
B. VAUGHN, RICHARD, , ,

Mailing Address **495 CROSSINGHAM ROAD**

City MT. AIRY	State NC	Zip Code 27030-9169
-------------------------	--------------------	-------------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
--	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
300.00

Date of Receipt
11 / 05 / 2016

Transaction ID : SA11A.479080

Amount of Each Receipt this Period
100.00

Memo Item
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
C. VAUGHN, ROBERT, R., MR.,

Mailing Address **11013 DEVENISH DR**

City OAKTON	State VA	Zip Code 22124-1805
-----------------------	--------------------	-------------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
--	---

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
217.50

Date of Receipt
11 / 02 / 2016

Transaction ID : SA11A.465129

Amount of Each Receipt this Period
25.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	225.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3818 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
Team Ryan

A. VAUGHAN, ROPER, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 151 SILVER SAGE DR
 City WEATHERFORD State TX Zip Code 76087-0709
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 25 / 2016
Transaction ID : SA11A.452005
 Amount of Each Receipt this Period
 250.00
 Memo Item
 CONTRIBUTION

B. VAUTRAIN, JOHN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4208 PEBBLE BEACH DRIVE
 City LEAGUE CITY State TX Zip Code 77573-5841
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 20 / 2016
Transaction ID : SA11A.442566
 Amount of Each Receipt this Period
 250.00
 Memo Item
 CONTRIBUTION

C. VENKATESAN, JAY, , MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 616 RIDGE ROAD
 City TIBURON State CA Zip Code 94920-1818
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) ALPINE BIOVENTURES Occupation (for Individual) VENTURE CAPITAL
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 12000.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 22 / 2016
Transaction ID : SA11A.449657
 Amount of Each Receipt this Period
 12000.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	12500.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3819 OF 4311
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
Team Ryan

A. VERNACE, SALVATORE, J., DR.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 6 CINNAMON BARK LANE

City KEY LARGO	State FL	Zip Code 33037-5119
-------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1100.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	04	/	2016

Transaction ID : SA11A.473897

Amount of Each Receipt this Period
50.00

Memo Item
CONTRIBUTION

B. VERSTANDIG, GRANT, L., MR.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1881 N NASH ST PH08

City ARLINGTON	State VA	Zip Code 22209-1511
-------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) RALLY HEALTH	Occupation (for Individual) CEO
---	------------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
33000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	31	/	2016

Transaction ID : SA11A.454998

Amount of Each Receipt this Period
33000.00

Memo Item
CONTRIBUTION

C. VESSELS, ROBERT, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 79 RAILROAD PLACE
APT 101

City SARATOGA SPRINGS	State NY	Zip Code 12866-2163
--------------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
1500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	28	/	2016

Transaction ID : SA11A.454720

Amount of Each Receipt this Period
500.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	33550.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3820 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. VICKERS, DEBBIE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 111 ROCHELLE ST.
 City BRADY State TX Zip Code 76825-7746
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 375.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 26 / 2016
Transaction ID : SA11A.450942
 Amount of Each Receipt this Period
 50.00
 Memo Item
 CONTRIBUTION

B. VICKERS, DEBBIE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 111 ROCHELLE ST.
 City BRADY State TX Zip Code 76825-7746
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 375.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 26 / 2016
Transaction ID : SA11A.450944
 Amount of Each Receipt this Period
 50.00
 Memo Item
 CONTRIBUTION

C. VICTOR, JOSEPH, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 7041 MEADOWLANDS AVE NW
 City NORTH CANTON State OH Zip Code 44720-8814
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) MARKERNET Occupation (for Individual) PRESIDENT
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 31 / 2016
Transaction ID : SA11A.463838
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	200.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3821 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
Team Ryan

A. VICTOR, JOSEPH, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 7041 MEADOWLANDS AVE NW
 City NORTH CANTON State OH Zip Code 44720-8814
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) MARKERNET Occupation (for Individual) PRESIDENT
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt 11 / 02 / 2016
Transaction ID : SA11A.465923
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

B. VIGNES, CALVIN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1731 PARKWAY DR
 City BETTENDORF State IA Zip Code 52722-3742
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 450.00

Date of Receipt 10 / 30 / 2016
Transaction ID : SA11A.460327
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

C. VINTON, DRURY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 34 LILY LANE
 City WEST LEBANON State NH Zip Code 03784-1052
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 900.00

Date of Receipt 10 / 30 / 2016
Transaction ID : SA11A.464935
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	300.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3822 OF 4311
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. VINTON, DRURY, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 34 LILY LANE

City WEST LEBANON	State NH	Zip Code 03784-1052
----------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
900.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	04	/	2016

Transaction ID : SA11A.471165

Amount of Each Receipt this Period
100.00

Memo Item CONTRIBUTION

B. VIRKLER, CRAIG, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 6919 ANCIENT OAK LANE

City CHARLOTTE	State NC	Zip Code 28277-0359
-------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
700.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	31	/	2016

Transaction ID : SA11A.459191

Amount of Each Receipt this Period
100.00

Memo Item CONTRIBUTION

C. VIRKLER, CRAIG, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 6919 ANCIENT OAK LANE

City CHARLOTTE	State NC	Zip Code 28277-0359
-------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
700.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	04	/	2016

Transaction ID : SA11A.470538

Amount of Each Receipt this Period
100.00

Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	300.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3823 OF 4311
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. VISCO, JR., ANTHONY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3468 LIMEKILN PIKE
 City CHALFONT State PA Zip Code 18914-3608
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) LABOR ARBIUTRATOR
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 243.00

Date of Receipt 10 / 28 / 2016
Transaction ID : SA11A.455971
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

B. VISCO, JR., ANTHONY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3468 LIMEKILN PIKE
 City CHALFONT State PA Zip Code 18914-3608
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) LABOR ARBIUTRATOR
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 243.00

Date of Receipt 11 / 04 / 2016
Transaction ID : SA11A.473433
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

C. VIVERO, JOSE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address P.O.BOX 17704
 City TAMPA State FL Zip Code 33682-7704
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) CENTURY BANK OF FLORIDA Occupation (for Individual) CHAIRMAN AND CEO
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 235.00

Date of Receipt 10 / 31 / 2016
Transaction ID : SA11A.459013
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 125.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3824 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
Team Ryan

A. VIVERO, JOSE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address P.O.BOX 17704
 City TAMPA State FL Zip Code 33682-7704
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) CENTURY BANK OF FLORIDA Occupation (for Individual) CHAIRMAN AND CEO
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 235.00

Date of Receipt **11 / 04 / 2016**
Transaction ID : SA11A.474152
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

B. VIVERO, JOSE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address P.O.BOX 17704
 City TAMPA State FL Zip Code 33682-7704
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) CENTURY BANK OF FLORIDA Occupation (for Individual) CHAIRMAN AND CEO
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 235.00

Date of Receipt **11 / 05 / 2016**
Transaction ID : SA11A.478817
 Amount of Each Receipt this Period 30.00
 Memo Item CONTRIBUTION

C. VIVERO, JOSE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address P.O.BOX 17704
 City TAMPA State FL Zip Code 33682-7704
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) CENTURY BANK OF FLORIDA Occupation (for Individual) CHAIRMAN AND CEO
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 235.00

Date of Receipt **11 / 06 / 2016**
Transaction ID : SA11A.480811
 Amount of Each Receipt this Period 30.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	85.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3825 OF 4311
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. VLASZ, DONALD, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 5039 SHIRLEY RD

City GAINESVILLE	State GA	Zip Code 30506-5114
---------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
275.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	27	/	2016

Transaction ID : SA11A.453213

Amount of Each Receipt this Period
25.00

Memo Item CONTRIBUTION

B. VLASZ, DONALD, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 5039 SHIRLEY RD

City GAINESVILLE	State GA	Zip Code 30506-5114
---------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
275.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	28	/	2016

Transaction ID : SA11A.456066

Amount of Each Receipt this Period
25.00

Memo Item CONTRIBUTION

C. VLASZ, DONALD, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 5039 SHIRLEY RD

City GAINESVILLE	State GA	Zip Code 30506-5114
---------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
275.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	06	/	2016

Transaction ID : SA11A.477333

Amount of Each Receipt this Period
25.00

Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	75.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3826 OF 4311
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. VLASZ, DONALD, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 5039 SHIRLEY RD
City GAINESVILLE State GA Zip Code 30506-5114
FEC ID number of contributing federal political committee. **C**
Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 275.00

Date of Receipt 11 / 06 / 2016
Transaction ID : SA11A.477354
Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

B. VOGEL, KLAAS, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 234 CROMWELL HILL ROAD
City MONROE State NY Zip Code 10950-1430
FEC ID number of contributing federal political committee. **C**
Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) HI TECH CONSULTANT
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 300.00

Date of Receipt 11 / 02 / 2016
Transaction ID : SA11A.466895
Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

C. VOGLER, JAMES, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 1681 S. 7 1/2 RD.
City HARRIETTA State MI Zip Code 49638-9702
FEC ID number of contributing federal political committee. **C**
Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
Receipt For: Primary General Other (specify)
Aggregate Year-to-Date ▼ 275.00

Date of Receipt 10 / 27 / 2016
Transaction ID : SA11A.453329
Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶ 100.00
TOTAL This Period (last page this line number only).....▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3827 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. VOGLER, JAMES, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1681 S. 7 1/2 RD.
 City HARRIETTA State MI Zip Code 49638-9702
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 275.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 27 / 2016
Transaction ID : SA11A.453336
 Amount of Each Receipt this Period
 25.00
 Memo Item
 CONTRIBUTION

B. VOGLER, JAMES, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1681 S. 7 1/2 RD.
 City HARRIETTA State MI Zip Code 49638-9702
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 275.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 01 / 2016
Transaction ID : SA11A.462287
 Amount of Each Receipt this Period
 25.00
 Memo Item
 CONTRIBUTION

C. VOGLER, JAMES, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1681 S. 7 1/2 RD.
 City HARRIETTA State MI Zip Code 49638-9702
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 275.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 04 / 2016
Transaction ID : SA11A.470923
 Amount of Each Receipt this Period
 25.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	75.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3828 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. VOGT, GREGORY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5635 TOWERS ST
 City TORRANCE State CA Zip Code 90503-1160
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RAYTHEON Occupation (for Individual) ENGINEER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 750.00

Date of Receipt **10 / 26 / 2016**
Transaction ID : SA11A.449697
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

B. VOGT, SCOTT, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5635 TOWERS ST
 City TORRANCE State CA Zip Code 90503-1160
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RAYTHEON Occupation (for Individual) ENGINEER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt **11 / 03 / 2016**
Transaction ID : SA11A.468757
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

C. VOIGT, RONALD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2175 WINDING OAK TRAIL NE
 City ADA State MI Zip Code 49301-8656
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) X-RITE PANTONE Occupation (for Individual) EXECUTIVE
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt **10 / 30 / 2016**
Transaction ID : SA11A.459588
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	600.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3829 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. VOLK, INGRID, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 135 UPHILL LN
 City LOUISBURG State NC Zip Code 27549-9420
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 31 / 2016
Transaction ID : SA11A.459159
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION

B. VOLK, INGRID, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 135 UPHILL LN
 City LOUISBURG State NC Zip Code 27549-9420
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 04 / 2016
Transaction ID : SA11A.471261
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION

C. VOLKERT , DEBORAH, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 25621 AMBER LEAF ROAD
 City TORRANCE State CA Zip Code 90505-7152
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 1250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 28 / 2016
Transaction ID : SA11A.461443
 Amount of Each Receipt this Period
 250.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	450.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3830 OF 4311
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. VOLLBRACHT, WILLIAM, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 3033 E 1ST AVE, STE 600

City DENVER	State CO	Zip Code 80206-5620
----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) LAND TITLE GUARANTEE COMPANY	Occupation (for Individual) ENTREPRENEUR
---	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
10000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	27	/	2016

Transaction ID : SA11A.457095

Amount of Each Receipt this Period
5000.00

Memo Item
CONTRIBUTION

B. VOLLBRACHT, WILLIAM, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 3033 E 1ST AVE, STE 600

City DENVER	State CO	Zip Code 80206-5620
----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) LAND TITLE GUARANTEE COMPANY	Occupation (for Individual) ENTREPRENEUR
---	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
10000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	04	/	2016

Transaction ID : SA11A.471487

Amount of Each Receipt this Period
5000.00

Memo Item
CONTRIBUTION

C. VOLPENHEIN, TOM, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 474 W CRESCENTVILLE

City CINCINNATI	State OH	Zip Code 45246-1221
--------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) VOLPLENHEIN BRS ELECTRIC	Occupation (for Individual) PRESIDENT
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	28	/	2016

Transaction ID : SA11A.455856

Amount of Each Receipt this Period
25.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	10025.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3831 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. VOLPENHEIN, TOM, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 474 W CRESCENTVILLE
 City CINCINNATI State OH Zip Code 45246-1221
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) VOLPLENHEIN BRS ELECTRIC Occupation (for Individual) PRESIDENT
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 10 / 28 / 2016
Transaction ID : SA11A.455881
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

B. VOLPENHEIN, TOM, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 474 W CRESCENTVILLE
 City CINCINNATI State OH Zip Code 45246-1221
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) VOLPLENHEIN BRS ELECTRIC Occupation (for Individual) PRESIDENT
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 11 / 04 / 2016
Transaction ID : SA11A.472146
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

C. VON DEM BUSSCHE, MEREDITH, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 12831 W MINE TRL
 City PEORIA State AZ Zip Code 85383-3915
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 240.00

Date of Receipt 11 / 04 / 2016
Transaction ID : SA11A.479456
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶ 100.00
TOTAL This Period (last page this line number only).....▶

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3832 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
Team Ryan

A. VON HALEM, PETER, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 279 BOZRAH STREET
 City BOZRAH State CT Zip Code 06334-1401
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 11 / 14 / 2016
Transaction ID : SA11A.468258
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

B. VOUDREN, RICHARD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1 BROADWAY AVE.
 City MYSTIC State CT Zip Code 06355-2752
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 310.00

Date of Receipt 10 / 20 / 2016
Transaction ID : SA11A.442258
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

C. VRIENS, HEIDI, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3014 SHAKESPEARE PLACE
 City SALT LAKE CITY State UT Zip Code 84108-2515
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 850.00

Date of Receipt 10 / 20 / 2016
Transaction ID : SA11A.442099
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	400.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3833 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
Team Ryan

A. VRIENS, HEIDI, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3014 SHAKESPEARE PLACE
 City SALT LAKE CITY State UT Zip Code 84108-2515
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 850.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 20 / 2016
Transaction ID : SA11A.442102
 Amount of Each Receipt this Period
 250.00
 Memo Item
 CONTRIBUTION

B. VRIENS, HEIDI, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3014 SHAKESPEARE PLACE
 City SALT LAKE CITY State UT Zip Code 84108-2515
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 850.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 06 / 2016
Transaction ID : SA11A.480927
 Amount of Each Receipt this Period
 25.00
 Memo Item
 CONTRIBUTION

C. VRIENS, HEIDI, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3014 SHAKESPEARE PLACE
 City SALT LAKE CITY State UT Zip Code 84108-2515
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 850.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 06 / 2016
Transaction ID : SA11A.480928
 Amount of Each Receipt this Period
 25.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	300.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3834 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. WACKER, DELBERT, J., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3807 BRITTANY RD
 City NORTHBROOK State IL Zip Code 60062-2103
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 680.00

Date of Receipt 10 / 26 / 2016
Transaction ID : SA11A.454378
 Amount of Each Receipt this Period 30.00
 Memo Item CONTRIBUTION

B. WACKER, DELBERT, J., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3807 BRITTANY RD
 City NORTHBROOK State IL Zip Code 60062-2103
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 680.00

Date of Receipt 10 / 31 / 2016
Transaction ID : SA11A.458795
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

C. WACKER, DELBERT, J., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3807 BRITTANY RD
 City NORTHBROOK State IL Zip Code 60062-2103
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 680.00

Date of Receipt 10 / 29 / 2016
Transaction ID : SA11A.461130
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	130.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3835 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
Team Ryan

A. WACKER, DELBERT, J., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3807 BRITTANY RD
 City NORTHBROOK State IL Zip Code 60062-2103
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 680.00

Date of Receipt 11 / 04 / 2016
Transaction ID : SA11A.472606
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

B. WADDELL, D.W., , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1057 CHESTNUT HILL CIRCLE
 City MARIETTA State GA Zip Code 30064-4607
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 10 / 25 / 2016
Transaction ID : SA11A.451941
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

C. WADDELL, D.W., , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1057 CHESTNUT HILL CIRCLE
 City MARIETTA State GA Zip Code 30064-4607
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 11 / 04 / 2016
Transaction ID : SA11A.472915
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶ 150.00
TOTAL This Period (last page this line number only).....▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3836 OF 4311
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. WAECHTER, ROBERT, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4343 SAWYER ROAD
 City SARASOTA State FL Zip Code 34233-3634
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) PROPERTY MANAGER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt 10 / 27 / 2016
Transaction ID : SA11A.454146
 Amount of Each Receipt this Period 500.00
 Memo Item
 CONTRIBUTION

B. WAECHTER, ROBERT, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4343 SAWYER ROAD
 City SARASOTA State FL Zip Code 34233-3634
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) PROPERTY MANAGER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt 11 / 04 / 2016
Transaction ID : SA11A.471453
 Amount of Each Receipt this Period 500.00
 Memo Item
 CONTRIBUTION

C. WAFFENSMITH, WALTER, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4444 MERRIBEE DRIVE
 City GOLDEN VALLEY State MN Zip Code 55422-3669
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) OMNITOOL, INC. Occupation (for Individual) PRESIDENT
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 650.00

Date of Receipt 10 / 27 / 2016
Transaction ID : SA11A.454168
 Amount of Each Receipt this Period 100.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶ 1100.00
TOTAL This Period (last page this line number only).....▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3837 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. WAGES, DAVID, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 31 PINECONE LANE
 City SOUTHBOROUGH State MA Zip Code 01772-1244
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) DOC WAGES LLC Occupation (for Individual) PHYSICIAN
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 800.00

Date of Receipt 11 / 04 / 2016
Transaction ID : SA11A.473649
 Amount of Each Receipt this Period 400.00
 Memo Item CONTRIBUTION

B. WAGGONER, JAMES, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 204 S. E. BLUEPARKWAY
 City LEES SUMMIT State MO Zip Code 64063-4253
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) DIAMOND MUFFLERS INC Occupation (for Individual) OWNER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt 10 / 27 / 2016
Transaction ID : SA11A.453864
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

C. WAGGONER, JAMES, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 204 S. E. BLUEPARKWAY
 City LEES SUMMIT State MO Zip Code 64063-4253
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) DIAMOND MUFFLERS INC Occupation (for Individual) OWNER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt 11 / 04 / 2016
Transaction ID : SA11A.470953
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	600.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3838 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
Team Ryan

A. WAGNER, DAVID, F., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 106 FINVIEW STREET
 City TAZEWELL State VA Zip Code 24651-1316
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 350.00

Date of Receipt 10 / 24 / 2016
Transaction ID : SA11A.443757
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

B. WAGNER, DAVID, J., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO BOX 1950
 City BOCA GRANDE State FL Zip Code 33921-1950
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 10 / 28 / 2016
Transaction ID : SA11A.454815
 Amount of Each Receipt this Period 500.00
 Memo Item CONTRIBUTION

C. WAGONER, GORDON, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 6516 GENESEO CIRCLE
 City PLANO State TX Zip Code 75023-1615
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 275.00

Date of Receipt 10 / 20 / 2016
Transaction ID : SA11A.442565
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	625.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3839 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. WAGONER, GORDON, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 6516 GENESEO CIRCLE
 City PLANO State TX Zip Code 75023-1615
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 275.00

Date of Receipt 10 / 31 / 2016
Transaction ID : SA11A.463422
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

B. WAGONER, GORDON, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 6516 GENESEO CIRCLE
 City PLANO State TX Zip Code 75023-1615
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 275.00

Date of Receipt 10 / 31 / 2016
Transaction ID : SA11A.463448
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

C. WAGONER, GORDON, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 6516 GENESEO CIRCLE
 City PLANO State TX Zip Code 75023-1615
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 275.00

Date of Receipt 10 / 31 / 2016
Transaction ID : SA11A.463494
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 75.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3840 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. WAGONER, GORDON, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 6516 GENESEO CIRCLE

City PLANO	State TX	Zip Code 75023-1615
---------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
275.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	03	/	2016

Transaction ID : SA11A.468868

Amount of Each Receipt this Period
25.00

Memo Item CONTRIBUTION

B. WAGONER, RAYMOND, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 12392 LEE LANE

City GARDEN GROVE	State CA	Zip Code 92840-3401
----------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) DRS TECHNOLOGIES	Occupation (for Individual) ENGINEER
---	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
225.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	21	/	2016

Transaction ID : SA11A.444280

Amount of Each Receipt this Period
50.00

Memo Item CONTRIBUTION

C. WAGONER, RAYMOND, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 12392 LEE LANE

City GARDEN GROVE	State CA	Zip Code 92840-3401
----------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) DRS TECHNOLOGIES	Occupation (for Individual) ENGINEER
---	---

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
225.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	01	/	2016

Transaction ID : SA11A.463104

Amount of Each Receipt this Period
25.00

Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	100.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3841 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. WAHL, HOUGHTON, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 769 BAYLISS DR
 City MARIETTA State GA Zip Code 30068-4708
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 650.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 25 / 2016
Transaction ID : SA11A.448011
 Amount of Each Receipt this Period
 250.00
 Memo Item
 CONTRIBUTION

B. WAHL, LEO, T., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO BOX 6359
 City ROUND ROCK State TX Zip Code 78683-6359
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) THIND GENERATION FINANCIAL LLC Occupation (for Individual) INVESTOR
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 28 / 2016
Transaction ID : SA11A.454689
 Amount of Each Receipt this Period
 500.00
 Memo Item
 CONTRIBUTION

C. WAHL, MARLENE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2418 DEERFOOT TRAIL
 City AUSTIN State TX Zip Code 78704-2712
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 26 / 2016
Transaction ID : SA11A.451260
 Amount of Each Receipt this Period
 50.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	800.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3842 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. WAHL, MARLENE, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 2418 DEERFOOT TRAIL

City AUSTIN	State TX	Zip Code 78704-2712
----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
300.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11		04		2016

Transaction ID : SA11A.470761

Amount of Each Receipt this Period
50.00

Memo Item
CONTRIBUTION

B. WAHLICK, ROGER, A., MR.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 10643 CAVALLO RIDGE

City EDEN PRAIRIE	State MN	Zip Code 55347-2200
----------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) INFORMATION REQUESTED PER BEST EFFORTS	Occupation (for Individual) INFORMATION REQUESTED PER BE
---	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
900.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11		18		2016

Transaction ID : SA11A.480985

Amount of Each Receipt this Period
400.00

Memo Item
CONTRIBUTION

C. WAILES, R, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 11 LASALLE PLACE

City NEW ORLEANS	State LA	Zip Code 70118-6233
---------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
1000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11		06		2016

Transaction ID : SA11A.476869

Amount of Each Receipt this Period
1000.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	1450.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3843 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. WAITE, BETTY, H., MS.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 12 PLEASANT STREET
 City BURLINGTON State MA Zip Code 01803-2727
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 260.00

Date of Receipt
 11 / 01 / 2016
Transaction ID : SA11A.457157
 Amount of Each Receipt this Period 35.00
 Memo Item CONTRIBUTION

B. WAITE, BETTY, H., MS.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 12 PLEASANT STREET
 City BURLINGTON State MA Zip Code 01803-2727
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 260.00

Date of Receipt
 11 / 01 / 2016
Transaction ID : SA11A.457224
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

C. WAKEFIELD, DAVID, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4031 KENNETT PIKE APT 15
 City WILMINGTON State DE Zip Code 19807-2031
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt
 10 / 27 / 2016
Transaction ID : SA11A.452289
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	310.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3844 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
Team Ryan

A. WAKEHAM, SELMA, J., MS.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 17952 ATHENS AVE
 City VILLA PARK State CA Zip Code 92861-4501
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 693.00

Date of Receipt 10 / 29 / 2016
Transaction ID : SA11A.460464
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

B. WAKEHAM, SELMA, J., MS.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 17952 ATHENS AVE
 City VILLA PARK State CA Zip Code 92861-4501
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 693.00

Date of Receipt 10 / 29 / 2016
Transaction ID : SA11A.460465
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

C. WAKEHAM, SELMA, J., MS.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 17952 ATHENS AVE
 City VILLA PARK State CA Zip Code 92861-4501
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 693.00

Date of Receipt 11 / 02 / 2016
Transaction ID : SA11A.466479
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	100.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3845 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
Team Ryan

A. WAKEHAM, SELMA, J., MS.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 17952 ATHENS AVE
 City VILLA PARK State CA Zip Code 92861-4501
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 693.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 02 / 2016
Transaction ID : SA11A.466493
 Amount of Each Receipt this Period
 25.00
 Memo Item
 CONTRIBUTION

B. WAKEHAM, SELMA, J., MS.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 17952 ATHENS AVE
 City VILLA PARK State CA Zip Code 92861-4501
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 693.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 05 / 2016
Transaction ID : SA11A.478535
 Amount of Each Receipt this Period
 25.00
 Memo Item
 CONTRIBUTION

C. WAKEHAM, SELMA, J., MS.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 17952 ATHENS AVE
 City VILLA PARK State CA Zip Code 92861-4501
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 693.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 05 / 2016
Transaction ID : SA11A.478546
 Amount of Each Receipt this Period
 25.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	75.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3846 OF 4311
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. WALDIE, WALTER, B., MR.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 4105 STANHOPE ST.

City DALLAS	State TX	Zip Code 75205-1658
----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
300.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		26		2016

Transaction ID : SA11A.450688

Amount of Each Receipt this Period
50.00

Memo Item
CONTRIBUTION

B. WALDIE, WALTER, B., MR.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 4105 STANHOPE ST.

City DALLAS	State TX	Zip Code 75205-1658
----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
300.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11		04		2016

Transaction ID : SA11A.472266

Amount of Each Receipt this Period
50.00

Memo Item
CONTRIBUTION

C. WALDROP, DONALD, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address P.O. BOX 3298

City LAGRANDE	State OR	Zip Code 97850-7298
------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) A&B ENTERPRAISES, INC	Occupation (for Individual) CEO
--	------------------------------------

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
1255.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11		04		2016

Transaction ID : SA11A.472462

Amount of Each Receipt this Period
100.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	200.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3847 OF 4311
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. WALKER, DONALD, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 14 LAUREL OAK DR.

City BOILING SPRINGS	State PA	Zip Code 17007-9424
-------------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
225.00

Date of Receipt
10 / 23 / 2016
Transaction ID : SA11A.449608

Amount of Each Receipt this Period
25.00

Memo Item CONTRIBUTION

B. WALKER, EVELYN, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 4664 E. JOHNSTOWN RD.

City GAHANNA	State OH	Zip Code 43230-1824
-----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
300.00

Date of Receipt
10 / 25 / 2016
Transaction ID : SA11A.451497

Amount of Each Receipt this Period
100.00

Memo Item CONTRIBUTION

C. WALKER, FRANCES, ANN, ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 5920 N CAMINO PADRE ISIDORO

City TUCSON	State AZ	Zip Code 85718-4032
----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
648.00

Date of Receipt
10 / 27 / 2016
Transaction ID : SA11A.457124

Amount of Each Receipt this Period
50.00

Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	175.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3848 OF 4311
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. WALKES, FRANCES, J., ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 720 2ND STREET NW

City PLAINVIEW	State MN	Zip Code 55964-1000
-------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	25	/	2016

Transaction ID : SA11A.447541

Amount of Each Receipt this Period
50.00

Memo Item CONTRIBUTION

B. WALKES, FRANCES, J., ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 720 2ND STREET NW

City PLAINVIEW	State MN	Zip Code 55964-1000
-------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	07	/	2016

Transaction ID : SA11A.467762

Amount of Each Receipt this Period
50.00

Memo Item CONTRIBUTION

C. WALKER, JON, C., MR.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 7171 N. HILLSIDE DR

City PARADISE VALLEY	State AZ	Zip Code 85253-2865
-------------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) UNION LIFE & CASUALTY INSURANCE AGENCY	Occupation (for Individual) UNION LIFE & CASUALTY
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
700.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	21	/	2016

Transaction ID : SA11A.444487

Amount of Each Receipt this Period
100.00

Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	200.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3849 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. WALKER, JON, C., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 7171 N. HILLSIDE DR
 City PARADISE VALLEY State AZ Zip Code 85253-2865
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) UNION LIFE & CASUALTY INSURANCE AGENCY Occupation (for Individual) UNION LIFE & CASUALTY
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 700.00

Date of Receipt **11 / 04 / 2016**
Transaction ID : SA11A.472900
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

B. WALKER, ROBERT, L., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2655 NEBRASKA AVENUE, APT 331
 City PALM HARBOR State FL Zip Code 34684-2651
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 350.00

Date of Receipt **10 / 21 / 2016**
Transaction ID : SA11A.443661
 Amount of Each Receipt this Period 150.00
 Memo Item CONTRIBUTION

C. WALKER, RONNIE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 11709 MANITOU DR.
 City ALDEN State NY Zip Code 14004-9408
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) THE RJWALKERCO Occupation (for Individual) MARKETING / SALES
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 240.00

Date of Receipt **10 / 22 / 2016**
Transaction ID : SA11A.446709
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	275.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3850 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. WALKER, RONNIE, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 11709 MANITOU DR.

City ALDEN	State NY	Zip Code 14004-9408
---------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) THE RJWALKERCO	Occupation (for Individual) MARKETING / SALES
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
240.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		22		2016

Transaction ID : SA11A.446710

Amount of Each Receipt this Period
25.00

Memo Item
CONTRIBUTION

B. WALKER, RONNIE, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 11709 MANITOU DR.

City ALDEN	State NY	Zip Code 14004-9408
---------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) THE RJWALKERCO	Occupation (for Individual) MARKETING / SALES
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
240.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		29		2016

Transaction ID : SA11A.460813

Amount of Each Receipt this Period
30.00

Memo Item
CONTRIBUTION

C. WALKER, RONNIE, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 11709 MANITOU DR.

City ALDEN	State NY	Zip Code 14004-9408
---------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) THE RJWALKERCO	Occupation (for Individual) MARKETING / SALES
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
240.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		29		2016

Transaction ID : SA11A.460826

Amount of Each Receipt this Period
30.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	85.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3851 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. WALKER, RONNIE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 11709 MANITOU DR.
 City ALDEN State NY Zip Code 14004-9408
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) THE RJWALKERCO Occupation (for Individual) MARKETING / SALES
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 240.00

Date of Receipt 10 / 29 / 2016
Transaction ID : SA11A.460827
 Amount of Each Receipt this Period 30.00
 Memo Item CONTRIBUTION

B. WALKER, SARA, W., MS.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 58 OHARA DRIVE
 City ROCKMART State GA Zip Code 30153-4397
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 11 / 01 / 2016
Transaction ID : SA11A.461757
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

C. WALKER, THEODORE, C., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 24 ROCKWOOD LN SPUR
 City GREENWICH State CT Zip Code 06830-3816
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) PARTNER RE Occupation (for Individual) REINSURANCE
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 15000.00

Date of Receipt 10 / 24 / 2016
Transaction ID : SA11A.444067
 Amount of Each Receipt this Period 7500.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	7630.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3852 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name A. WALKER, THOMAS, , ,		Date of Receipt M M M / D D D / Y Y Y Y Y Y 10 / 26 / 2016 Transaction ID : SA11A.451123
Mailing Address 22 HEDWIG CIRCLE		Amount of Each Receipt this Period 100.00
City HOUSTON	State TX	Zip Code 77024-4519
FEC ID number of contributing federal political committee. C		<input type="checkbox"/> Memo Item CONTRIBUTION
Name of Employer (for Individual) GATEWAY HOMES, LTD.	Occupation (for Individual) PRESIDENT	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00	

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name B. WALKER, THOMAS, , ,		Date of Receipt M M M / D D D / Y Y Y Y Y Y 11 / 04 / 2016 Transaction ID : SA11A.470880
Mailing Address 22 HEDWIG CIRCLE		Amount of Each Receipt this Period 100.00
City HOUSTON	State TX	Zip Code 77024-4519
FEC ID number of contributing federal political committee. C		<input type="checkbox"/> Memo Item CONTRIBUTION
Name of Employer (for Individual) GATEWAY HOMES, LTD.	Occupation (for Individual) PRESIDENT	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00	

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name C. WALKER, TODD, A., MR,		Date of Receipt M M M / D D D / Y Y Y Y Y Y 11 / 02 / 2016 Transaction ID : SA11A.467087
Mailing Address 903 BANBURY CT		Amount of Each Receipt this Period 4250.00
City MCLEAN	State VA	Zip Code 22102-1301
FEC ID number of contributing federal political committee. C		<input type="checkbox"/> Memo Item CONTRIBUTION
Name of Employer (for Individual) ALTRIA	Occupation (for Individual) EXECUTIVE	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Aggregate Year-to-Date ▼ 10016.16	

SUBTOTAL of Receipts This Page (optional).....	4450.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3853 OF 4311
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. WALKER, W., , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 8403 ABINGDON COURT
 City UNIVERSITY PARK State FL Zip Code 34201-2026
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) COLLECTIBLES INSURANCE SERVICES L Occupation (for Individual) INSURANCE
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 600.00

Date of Receipt 10 / 24 / 2016
Transaction ID : SA11A.443721
 Amount of Each Receipt this Period 200.00
 Memo Item CONTRIBUTION

B. WALKER, W., , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 8403 ABINGDON COURT
 City UNIVERSITY PARK State FL Zip Code 34201-2026
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) COLLECTIBLES INSURANCE SERVICES L Occupation (for Individual) INSURANCE
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 600.00

Date of Receipt 10 / 29 / 2016
Transaction ID : SA11A.460998
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

C. WALKER, W., , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 8403 ABINGDON COURT
 City UNIVERSITY PARK State FL Zip Code 34201-2026
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) COLLECTIBLES INSURANCE SERVICES L Occupation (for Individual) INSURANCE
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 600.00

Date of Receipt 11 / 04 / 2016
Transaction ID : SA11A.471742
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	400.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3854 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. WALKER, WILLIAM, A., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2140 VISTA CIRCLE
 405
 City VIRGINIA BEACH State VA Zip Code 23451-1069
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 350.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 26 / 2016
Transaction ID : SA11A.451007
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION

B. WALKER, WILLIAM, A., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2140 VISTA CIRCLE
 405
 City VIRGINIA BEACH State VA Zip Code 23451-1069
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 350.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 31 / 2016
Transaction ID : SA11A.457249
 Amount of Each Receipt this Period
 50.00
 Memo Item
 CONTRIBUTION

C. WALKER, WILLIAM, A., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2140 VISTA CIRCLE
 405
 City VIRGINIA BEACH State VA Zip Code 23451-1069
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 350.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 04 / 2016
Transaction ID : SA11A.470829
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 250.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3855 OF 4311
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. WALLACE, GARY, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 378 CRANBROOK LANE

City IDAHO FALLS	State ID	Zip Code 83404-7975
---------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) CENTER FOR SIGHT	Occupation (for Individual) PHYSICIAN
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	05	/	2016

Transaction ID : SA11A.480945

Amount of Each Receipt this Period
500.00

Memo Item CONTRIBUTION

B. WALLACE, HAROLD, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address POB 1149

City OKLAHOMA CITY	State OK	Zip Code 73101-1149
-----------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
450.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	21	/	2016

Transaction ID : SA11A.444347

Amount of Each Receipt this Period
250.00

Memo Item CONTRIBUTION

C. WALLACE, HAROLD, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address POB 1149

City OKLAHOMA CITY	State OK	Zip Code 73101-1149
-----------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
450.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	26	/	2016

Transaction ID : SA11A.449961

Amount of Each Receipt this Period
100.00

Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	850.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3856 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. WALLACE, HAROLD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address POB 1149
 City OKLAHOMA CITY State OK Zip Code 73101-1149
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 450.00

Date of Receipt 10 / 26 / 2016
Transaction ID : SA11A.449963
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

B. WALLA, JOSEPH, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 6505 FAIRLAND STREET
 City ALEXANDRIA State VA Zip Code 22312-2214
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 240.00

Date of Receipt 10 / 25 / 2016
Transaction ID : SA11A.447971
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

C. WALLA, JOSEPH, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 6505 FAIRLAND STREET
 City ALEXANDRIA State VA Zip Code 22312-2214
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 240.00

Date of Receipt 10 / 27 / 2016
Transaction ID : SA11A.454044
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 250.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3857 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
Team Ryan

A. WALLA, JOSEPH, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 6505 FAIRLAND STREET
 City ALEXANDRIA State VA Zip Code 22312-2214
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 240.00

Date of Receipt 10 / 27 / 2016
Transaction ID : SA11A.454087
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

B. WALLACE, ROMAN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 274 VINCENT PL
 City ELGIN State IL Zip Code 60123-5352
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 509.00

Date of Receipt 10 / 31 / 2016
Transaction ID : SA11A.463193
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

C. WALLACE, ROMAN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 274 VINCENT PL
 City ELGIN State IL Zip Code 60123-5352
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 509.00

Date of Receipt 10 / 31 / 2016
Transaction ID : SA11A.463199
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	100.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3858 OF 4311
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. WALLACE, ROMAN, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 274 VINCENT PL

City ELGIN	State IL	Zip Code 60123-5352
---------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
509.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11		08		2016

Transaction ID : SA11A.479853

Amount of Each Receipt this Period
25.00

Memo Item
CONTRIBUTION

B. WALLACE, ROMAN, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 274 VINCENT PL

City ELGIN	State IL	Zip Code 60123-5352
---------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
509.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11		08		2016

Transaction ID : SA11A.479858

Amount of Each Receipt this Period
25.00

Memo Item
CONTRIBUTION

C. WALLACE, WILLIAM, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 24214 ROYALWICK DRIVE

City TOMBALL	State TX	Zip Code 77375-5136
-----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) WALLACE-WATKINS INTERNATIONAL	Occupation (for Individual) EXECUTIVE SEARCH
--	---

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
225.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		26		2016

Transaction ID : SA11A.451019

Amount of Each Receipt this Period
25.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	75.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3859 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. WALLACE, WILLIAM, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 24214 ROYALWICK DRIVE
 City TOMBALL State TX Zip Code 77375-5136
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) WALLACE-WATKINS INTERNATIONAL Occupation (for Individual) EXECUTIVE SEARCH
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 225.00

Date of Receipt **11 / 04 / 2016**
Transaction ID : SA11A.470692
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

B. WALLS, BURTON, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1307 N 43RD ST 501
 City SEATTLE State WA Zip Code 98103-7566
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt **10 / 31 / 2016**
Transaction ID : SA11A.457651
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

C. WALROD, TRUMAN, S., MR., III
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1200 WEST DIMOND BLVD. SPC 1301 SPACE 1301
 City ANCHORAGE State AK Zip Code 99515-1549
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 900.00

Date of Receipt **10 / 26 / 2016**
Transaction ID : SA11A.451004
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	375.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3860 OF 4311
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. WALROD, TRUMAN, S., MR., III
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1200 WEST DIMOND BLVD. SPC 1301
SPACE 1301

City ANCHORAGE State AK Zip Code 99515-1549

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
900.00

Date of Receipt
11 / 04 / 2016
Transaction ID : SA11A.471716

Amount of Each Receipt this Period
100.00

Memo Item CONTRIBUTION

B. WALSETH, HARVEY, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 4003 FIRSTVIEW DRIVE

City AUSTIN State TX Zip Code 78731-3809

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
425.00

Date of Receipt
10 / 29 / 2016
Transaction ID : SA11A.461034

Amount of Each Receipt this Period
100.00

Memo Item CONTRIBUTION

C. WALSTON, DOANIE, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 221 DEEP CREEK DR

City CLAYTON State NC Zip Code 27520-8161

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) INFORMATION REQUESTED PER BEST EFFORTS Occupation (for Individual) INFORMATION REQUESTED PER BEST EFFORTS

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
392.00

Date of Receipt
10 / 26 / 2016
Transaction ID : SA11A.450985

Amount of Each Receipt this Period
10.00

Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 210.00

TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3861 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. WALSTON, DOANIE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 221 DEEP CREEK DR
 City CLAYTON State NC Zip Code 27520-8161
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Occupation (for Individual)
 INFORMATION REQUESTED PER BEST EFFORTS INFORMATION REQUESTED PER BE
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 392.00

Date of Receipt
 10 / 26 / 2016
Transaction ID : SA11A.450986
 Amount of Each Receipt this Period
 18.00
 Memo Item
 CONTRIBUTION

B. WALSTON, DOANIE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 221 DEEP CREEK DR
 City CLAYTON State NC Zip Code 27520-8161
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Occupation (for Individual)
 INFORMATION REQUESTED PER BEST EFFORTS INFORMATION REQUESTED PER BE
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 392.00

Date of Receipt
 10 / 26 / 2016
Transaction ID : SA11A.450987
 Amount of Each Receipt this Period
 18.00
 Memo Item
 CONTRIBUTION

C. WALSTON, DOANIE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 221 DEEP CREEK DR
 City CLAYTON State NC Zip Code 27520-8161
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Occupation (for Individual)
 INFORMATION REQUESTED PER BEST EFFORTS INFORMATION REQUESTED PER BE
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 392.00

Date of Receipt
 10 / 26 / 2016
Transaction ID : SA11A.451124
 Amount of Each Receipt this Period
 50.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	86.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3862 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name A. WALSTON, DOANIE, , ,		Date of Receipt M M M / D D D / Y Y Y Y Y Y 10 / 26 / 2016 Transaction ID : SA11A.451129
Mailing Address 221 DEEP CREEK DR		Amount of Each Receipt this Period 100.00
City CLAYTON	State NC	Zip Code 27520-8161
FEC ID number of contributing federal political committee. C		<input type="checkbox"/> Memo Item CONTRIBUTION
Name of Employer (for Individual) INFORMATION REQUESTED PER BEST EFFORTS	Occupation (for Individual) INFORMATION REQUESTED PER BE	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 392.00	

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name B. WALSTON, DOANIE, , ,		Date of Receipt M M M / D D D / Y Y Y Y Y Y 11 / 04 / 2016 Transaction ID : SA11A.470793
Mailing Address 221 DEEP CREEK DR		Amount of Each Receipt this Period 50.00
City CLAYTON	State NC	Zip Code 27520-8161
FEC ID number of contributing federal political committee. C		<input type="checkbox"/> Memo Item CONTRIBUTION
Name of Employer (for Individual) INFORMATION REQUESTED PER BEST EFFORTS	Occupation (for Individual) INFORMATION REQUESTED PER BE	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 392.00	

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name C. WALSTON, DOANIE, , ,		Date of Receipt M M M / D D D / Y Y Y Y Y Y 11 / 06 / 2016 Transaction ID : SA11A.477529
Mailing Address 221 DEEP CREEK DR		Amount of Each Receipt this Period 50.00
City CLAYTON	State NC	Zip Code 27520-8161
FEC ID number of contributing federal political committee. C		<input type="checkbox"/> Memo Item CONTRIBUTION
Name of Employer (for Individual) INFORMATION REQUESTED PER BEST EFFORTS	Occupation (for Individual) INFORMATION REQUESTED PER BE	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Aggregate Year-to-Date ▼ 392.00	

SUBTOTAL of Receipts This Page (optional).....	200.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3863 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. WALTERS, CHARLEEN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3950 HWY 71E APT 711
 APT. 711
 City BASTROP State TX Zip Code 78602-4642
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 3564.00

Date of Receipt 10 / 24 / 2016
Transaction ID : SA11A.445993
 Amount of Each Receipt this Period 2.00
 Memo Item CONTRIBUTION

B. WALTERS, CHARLEEN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3950 HWY 71E APT 711
 APT. 711
 City BASTROP State TX Zip Code 78602-4642
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 3564.00

Date of Receipt 11 / 02 / 2016
Transaction ID : SA11A.469528
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

C. WALTER, RICHARD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 25 PLEASANTVILLE RD POB38
 City NEW VERNON State NJ Zip Code 07976-9707
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 700.00

Date of Receipt 11 / 03 / 2016
Transaction ID : SA11A.469048
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶ 127.00
TOTAL This Period (last page this line number only).....▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3864 OF 4311
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. WALTER, W. HOWARD, , MR.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 2205 FINK AVE

City WILLIAMSPORT	State PA	Zip Code 17701-1215
----------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
672.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	04	/	2016

Transaction ID : SA11A.472571

Amount of Each Receipt this Period
50.00

Memo Item
CONTRIBUTION

B. WALTON-LUGLAN, DOROTHY, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 601 LINCOLN CT.

City PROSSER	State WA	Zip Code 99350-1231
-----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
300.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	31	/	2016

Transaction ID : SA11A.458843

Amount of Each Receipt this Period
50.00

Memo Item
CONTRIBUTION

C. WALTON, PETER, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 19402 N PONDEROSA CT

City SURPRISE	State AZ	Zip Code 85387-4220
------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
870.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	30	/	2016

Transaction ID : SA11A.459449

Amount of Each Receipt this Period
250.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	350.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3865 OF 4311
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. WALTY, ETTA, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 9116 1ST PL NE
APT 2

City LAKE STEVENS State WA Zip Code 98258-3318

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
475.00

Date of Receipt
10 / 24 / 2016
Transaction ID : SA11A.449560

Amount of Each Receipt this Period
50.00

Memo Item CONTRIBUTION

B. WALTY, ETTA, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 9116 1ST PL NE
APT 2

City LAKE STEVENS State WA Zip Code 98258-3318

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
475.00

Date of Receipt
10 / 30 / 2016
Transaction ID : SA11A.460053

Amount of Each Receipt this Period
25.00

Memo Item CONTRIBUTION

C. WALTY, ETTA, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 9116 1ST PL NE
APT 2

City LAKE STEVENS State WA Zip Code 98258-3318

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
475.00

Date of Receipt
11 / 04 / 2016
Transaction ID : SA11A.471625

Amount of Each Receipt this Period
25.00

Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶ 100.00

TOTAL This Period (last page this line number only).....▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3866 OF 4311		
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14	<input type="checkbox"/> 11c <input type="checkbox"/> 15	<input type="checkbox"/> 12 <input type="checkbox"/> 16

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NAME OF COMMITTEE (In Full)
Team Ryan

A. WALTY, ETTA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 9116 1ST PL NE
 APT 2
 City LAKE STEVENS State WA Zip Code 98258-3318
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 475.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 04 / 2016
Transaction ID : SA11A.473982
 Amount of Each Receipt this Period
 50.00
 Memo Item
 CONTRIBUTION

B. WANEK, PATSY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO BOX 5263
 City ETNA State WY Zip Code 83118-0263
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 525.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 27 / 2016
Transaction ID : SA11A.453861
 Amount of Each Receipt this Period
 50.00
 Memo Item
 CONTRIBUTION

C. WANEK, PATSY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO BOX 5263
 City ETNA State WY Zip Code 83118-0263
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 525.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 04 / 2016
Transaction ID : SA11A.472884
 Amount of Each Receipt this Period
 50.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	150.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3867 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. WANKUM, JOSEPH, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO BOX 11590
 City CONWAY State AR Zip Code 72034-0027
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 600.00

Date of Receipt 10 / 20 / 2016
Transaction ID : SA11A.442656
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

B. WANKUM, JOSEPH, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO BOX 11590
 City CONWAY State AR Zip Code 72034-0027
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 600.00

Date of Receipt 11 / 07 / 2016
Transaction ID : SA11A.475689
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

C. WANKUM, JOSEPH, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO BOX 11590
 City CONWAY State AR Zip Code 72034-0027
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 600.00

Date of Receipt 11 / 07 / 2016
Transaction ID : SA11A.475695
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	200.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3868 OF 4311
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. WANTY, MARILYN, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 304 WOODLAND DRIVE
304 WOODLAND DRIVE

City CHELSEA State MI Zip Code 48118-2115

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1075.00

Date of Receipt
10 / 24 / 2016
Transaction ID : SA11A.446218

Amount of Each Receipt this Period
100.00

Memo Item CONTRIBUTION

B. WANTY, MARILYN, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 304 WOODLAND DRIVE
304 WOODLAND DRIVE

City CHELSEA State MI Zip Code 48118-2115

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1075.00

Date of Receipt
10 / 30 / 2016
Transaction ID : SA11A.464922

Amount of Each Receipt this Period
50.00

Memo Item CONTRIBUTION

C. WANTY, MARILYN, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 304 WOODLAND DRIVE
304 WOODLAND DRIVE

City CHELSEA State MI Zip Code 48118-2115

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
1075.00

Date of Receipt
11 / 04 / 2016
Transaction ID : SA11A.471001

Amount of Each Receipt this Period
100.00

Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 250.00

TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3869 OF 4311
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. WANTY, MARILYN, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 304 WOODLAND DRIVE
304 WOODLAND DRIVE

City CHELSEA State MI Zip Code 48118-2115

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1075.00

Date of Receipt
11 / 04 / 2016
Transaction ID : SA11A.472933

Amount of Each Receipt this Period
50.00

Memo Item CONTRIBUTION

B. WANZONG, ROBERT, C., ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 351 N. FORD AVE
301

City FULLERTON State CA Zip Code 92832-1453

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) RAYTHEON CORPORATION Occupation (for Individual) SR. RADAR SYSTEMS ENGINEER

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
600.00

Date of Receipt
10 / 30 / 2016
Transaction ID : SA11A.459771

Amount of Each Receipt this Period
100.00

Memo Item CONTRIBUTION

C. WANZONG, ROBERT, C., ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 351 N. FORD AVE
301

City FULLERTON State CA Zip Code 92832-1453

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) RAYTHEON CORPORATION Occupation (for Individual) SR. RADAR SYSTEMS ENGINEER

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
600.00

Date of Receipt
11 / 02 / 2016
Transaction ID : SA11A.465893

Amount of Each Receipt this Period
100.00

Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 250.00

TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3870 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. WANZONG, ROBERT, C., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 351 N. FORD AVE
 301
 City FULLERTON State CA Zip Code 92832-1453
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RAYTHEON CORPORATION Occupation (for Individual) SR. RADAR SYSTEMS ENGINEER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 600.00

Date of Receipt 11 / 05 / 2016
Transaction ID : SA11A.479280
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

B. WARD, ELAINE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 945 SOUTH ORANGE GROVE
 D
 City PASADENA State CA Zip Code 91105-1793
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 393.00

Date of Receipt 11 / 01 / 2016
Transaction ID : SA11A.462966
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

C. WARD, ELAINE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 945 SOUTH ORANGE GROVE
 D
 City PASADENA State CA Zip Code 91105-1793
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 393.00

Date of Receipt 11 / 06 / 2016
Transaction ID : SA11A.476976
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	300.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3871 OF 4311
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. WARD, FREDRICK, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1000 CROSSWINDS LANDING
 D104
 City FORT WALTON BEACH State FL Zip Code 32547-1164
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 11 / 04 / 2016
Transaction ID : SA11A.473507
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

B. WARD, JENNIFER, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 69 T. STREET, #5
 5
 City SALT LAKE CITY State UT Zip Code 84103-4158
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) CTS Occupation (for Individual) LAW
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 490.00

Date of Receipt 10 / 28 / 2016
Transaction ID : SA11A.455109
 Amount of Each Receipt this Period 30.00
 Memo Item CONTRIBUTION

C. WARD, NANCY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3222 29TH AVE NE
 City MINNEAPOLIS State MN Zip Code 55418-3241
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 807.00

Date of Receipt 10 / 25 / 2016
Transaction ID : SA11A.448529
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶ 180.00
TOTAL This Period (last page this line number only).....▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3872 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. WARD, NANCY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3222 29TH AVE NE
 City MINNEAPOLIS State MN Zip Code 55418-3241
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 807.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 28 / 2016
Transaction ID : SA11A.455429
 Amount of Each Receipt this Period
 50.00
 Memo Item CONTRIBUTION

B. WARD, NANCY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3222 29TH AVE NE
 City MINNEAPOLIS State MN Zip Code 55418-3241
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 807.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 31 / 2016
Transaction ID : SA11A.464013
 Amount of Each Receipt this Period
 30.00
 Memo Item CONTRIBUTION

C. WARD, NANCY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3222 29TH AVE NE
 City MINNEAPOLIS State MN Zip Code 55418-3241
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 807.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 02 / 2016
Transaction ID : SA11A.469518
 Amount of Each Receipt this Period
 30.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	110.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3873 OF 4311
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. WARD, NANCY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3222 29TH AVE NE
 City MINNEAPOLIS State MN Zip Code 55418-3241
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 807.00

Date of Receipt 11 / 08 / 2016
Transaction ID : SA11A.479733
 Amount of Each Receipt this Period 30.00
 Memo Item CONTRIBUTION

B. WARD, R., , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5495 BELT LINE RD. SUITE 200
 City DALLAS State TX Zip Code 75254-7658
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) DOUBLE DIAMOND INC. Occupation (for Individual) DEVELOPER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 2000.00

Date of Receipt 10 / 25 / 2016
Transaction ID : SA11A.448740
 Amount of Each Receipt this Period 1000.00
 Memo Item CONTRIBUTION

C. WARD, R., , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5495 BELT LINE RD. SUITE 200
 City DALLAS State TX Zip Code 75254-7658
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) DOUBLE DIAMOND INC. Occupation (for Individual) DEVELOPER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 2000.00

Date of Receipt 11 / 04 / 2016
Transaction ID : SA11A.471184
 Amount of Each Receipt this Period 1000.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	2030.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3874 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. WARD, SAM, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 106 E. ADAMS ST, STE. 212
 City CARSON CITY State NV Zip Code 89706-3081
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) R/E APPRAISER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt **10 / 20 / 2016**
Transaction ID : SA11A.442123
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

B. WARD, SAM, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 106 E. ADAMS ST, STE. 212
 City CARSON CITY State NV Zip Code 89706-3081
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) R/E APPRAISER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt **11 / 04 / 2016**
Transaction ID : SA11A.471757
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

C. WARD, SUMIE, Y., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO BOX 78
 City PENRYN State CA Zip Code 95663-0078
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF-EMPLOYED Occupation (for Individual) REALTOR
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 6750.00

Date of Receipt **10 / 25 / 2016**
Transaction ID : SA11A.447473
 Amount of Each Receipt this Period 1000.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	1100.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3875 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. WARD, SUMIE, Y., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address **PO BOX 78**
 City **PENRYN** State **CA** Zip Code **95663-0078**
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) **SELF-EMPLOYED** Occupation (for Individual) **REALTOR**
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼ **6750.00**

Date of Receipt
11 / 03 / 2016
Transaction ID : SA11A.465407
 Amount of Each Receipt this Period
1000.00
 Memo Item
CONTRIBUTION

B. WARD, WILLIAM, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address **15 ATLANTA**
 City **IRVINE** State **CA** Zip Code **92620-2503**
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) **NONE** Occupation (for Individual) **RETIRED**
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼ **230.00**

Date of Receipt
10 / 26 / 2016
Transaction ID : SA11A.449816
 Amount of Each Receipt this Period
30.00
 Memo Item
CONTRIBUTION

C. WARD, WILLIAM, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address **15 ATLANTA**
 City **IRVINE** State **CA** Zip Code **92620-2503**
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) **NONE** Occupation (for Individual) **RETIRED**
 Receipt For:
 Primary General
 Other (specify)
 Aggregate Year-to-Date ▼ **230.00**

Date of Receipt
10 / 30 / 2016
Transaction ID : SA11A.459838
 Amount of Each Receipt this Period
50.00
 Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	1080.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3876 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. WARD, WILLIAM, , MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2300 STEARNLEE AVE
 City LONG BEACH State CA Zip Code 90815-1935
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 350.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 26 / 2016
Transaction ID : SA11A.451111
 Amount of Each Receipt this Period
 50.00
 Memo Item
 CONTRIBUTION

B. WARD, WILLIAM, , MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2300 STEARNLEE AVE
 City LONG BEACH State CA Zip Code 90815-1935
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 350.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 04 / 2016
Transaction ID : SA11A.472294
 Amount of Each Receipt this Period
 50.00
 Memo Item
 CONTRIBUTION

C. WARDEN, JOHN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 125 BROAD STREET
 City NEW YORK State NY Zip Code 10004-2400
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SULLIVAN & CROMWELL LLP Occupation (for Individual) ATTORNEY
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 31 / 2016
Transaction ID : SA11A.458805
 Amount of Each Receipt this Period
 250.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	350.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3877 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. WARDEN, MARY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1701 HILLCREST DRIVE
 City HENRYETTA State OK Zip Code 74437-1908
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 510.00

Date of Receipt 10 / 20 / 2016
Transaction ID : SA11A.442011
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

B. WARDEN, MARY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1701 HILLCREST DRIVE
 City HENRYETTA State OK Zip Code 74437-1908
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 510.00

Date of Receipt 10 / 20 / 2016
Transaction ID : SA11A.442015
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

C. WAREZAK, RONALD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3649 WOLF ROAD
 City SAGINAW State MI Zip Code 48601-9245
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) MICHIGAN TRUCK SPRING OF SAGINAW Occupation (for Individual) EXECUTIVE
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 11 / 07 / 2016
Transaction ID : SA11A.474990
 Amount of Each Receipt this Period 500.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 550.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3878 OF 4311
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. WARFEL, DERRICK, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 11150 CANBY AVENUE
 City PORTER RANCH State CA Zip Code 91326-2503
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) INVESTOR
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 2500.00

Date of Receipt **10 / 25 / 2016**
Transaction ID : SA11A.447282
 Amount of Each Receipt this Period 500.00
 Memo Item CONTRIBUTION

B. WARK, JOE, E., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 626 ROGER ROAD
 City GLEN ELLYN State IL Zip Code 60137-4241
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 225.00

Date of Receipt **11 / 01 / 2016**
Transaction ID : SA11A.461732
 Amount of Each Receipt this Period 75.00
 Memo Item CONTRIBUTION

C. WARREN, JENNIFER, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 330 NORTH ROYAL ST
 City ALEXANDRIA State VA Zip Code 22314-2629
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) LOCKHEED MARTIN Occupation (for Individual) GOVERNMENT AFFAIRS
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt **11 / 01 / 2016**
Transaction ID : SA11A.462450
 Amount of Each Receipt this Period 500.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 1075.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3879 OF 4311
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. WARREN, JOHN, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 16678 HIDDEN COVE DRIVE

City JUPITER	State FL	Zip Code 33477-1305
-----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
300.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	04	/	2016

Transaction ID : SA11A.471713

Amount of Each Receipt this Period
50.00

Memo Item CONTRIBUTION

B. WARREN, NITA, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 900 E COOPER STREET

City BROWNSVILLE	State TN	Zip Code 38012-3524
---------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
800.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	03	/	2016

Transaction ID : SA11A.465349

Amount of Each Receipt this Period
200.00

Memo Item CONTRIBUTION

C. WARREN, XIAOJUAN, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 12146 QUAIL CREEK DR.

City HOUSTON	State TX	Zip Code 77070-2213
-----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) MISD/TISD	Occupation (for Individual) TEACHER/SUB TEACHER
--	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
435.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	27	/	2016

Transaction ID : SA11A.454210

Amount of Each Receipt this Period
50.00

Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	300.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3880 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. WARREN, XIAOJUAN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 12146 QUAIL CREEK DR.
 City HOUSTON State TX Zip Code 77070-2213
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) MISD/TISD Occupation (for Individual) TEACHER/SUB TEACHER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 435.00

Date of Receipt 10 / 27 / 2016
Transaction ID : SA11A.454211
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

B. WARREN, XIAOJUAN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 12146 QUAIL CREEK DR.
 City HOUSTON State TX Zip Code 77070-2213
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) MISD/TISD Occupation (for Individual) TEACHER/SUB TEACHER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 435.00

Date of Receipt 11 / 03 / 2016
Transaction ID : SA11A.469239
 Amount of Each Receipt this Period 30.00
 Memo Item CONTRIBUTION

C. WARREN, XIAOJUAN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 12146 QUAIL CREEK DR.
 City HOUSTON State TX Zip Code 77070-2213
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) MISD/TISD Occupation (for Individual) TEACHER/SUB TEACHER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 435.00

Date of Receipt 11 / 06 / 2016
Transaction ID : SA11A.476833
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶ 105.00
TOTAL This Period (last page this line number only).....▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3881 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
Team Ryan

A. WARRINGTON, DOT, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 8435 NOBLE LARK
 City FAIR OAKS RANCH State TX Zip Code 78015-4441
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 11 / 04 / 2016
Transaction ID : SA11A.473919
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

B. WARTHEN, JOHN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 749 N 375 EAST
 City SPRINGVILLE State UT Zip Code 84663-5538
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 10 / 27 / 2016
Transaction ID : SA11A.452320
 Amount of Each Receipt this Period 200.00
 Memo Item CONTRIBUTION

C. WASHBURN, SCOTT, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 85 WHITE OAK DRIVE
 City BATESVILLE State IN Zip Code 47006-7693
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) STUDENT
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 800.00

Date of Receipt 10 / 26 / 2016
Transaction ID : SA11A.451052
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	400.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3882 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. WASKOWIAK, PATRICIA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 13923 CARTAGE KNOLLS
 City CYPRESS State TX Zip Code 77429-8026
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) PARSONS BRINCKERHOFF Occupation (for Individual) TRANSPORTATION PLANNER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt **10 / 31 / 2016**
Transaction ID : SA11A.458988
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

B. WASMER, PEDRO, E., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 642 BOUGAINVILLEA RD.
 City NAPLES State FL Zip Code 34102-5525
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1600.00

Date of Receipt **10 / 27 / 2016**
Transaction ID : SA11A.453006
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

C. WASMER, PEDRO, E., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 642 BOUGAINVILLEA RD.
 City NAPLES State FL Zip Code 34102-5525
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1600.00

Date of Receipt **11 / 07 / 2016**
Transaction ID : SA11A.475408
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	450.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3883 OF 4311
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
Team Ryan

A. WATKINS, DAVID, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 257 OCEAN DRIVE W

City STAMFORD	State CT	Zip Code 06902-8201
------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) DISTINGUISHED PROGRAMS GROUP	Occupation (for Individual) VICE CHAIRMAN
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		31		2016

Transaction ID : SA11A.458959

Amount of Each Receipt this Period
250.00

Memo Item CONTRIBUTION

B. WATKINS, GINGER, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 4025 SHORE LANE
2536

City BOCA GRANDE	State FL	Zip Code 33921-
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
559.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11		05		2016

Transaction ID : SA11A.480959

Amount of Each Receipt this Period
100.00

Memo Item CONTRIBUTION

C. WATKINS, LINDA, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 934 POP NOAH RD.

City COLLINSVILLE	State TX	Zip Code 76233-3328
----------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) SELF EMPLOYED	Occupation (for Individual) ANNOUNCER
--	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
550.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11		02		2016

Transaction ID : SA11A.466999

Amount of Each Receipt this Period
250.00

Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	600.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3884 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
Team Ryan

A. WATKINS, SAMUEL, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2704 POPLAR HILL COURT
 City LOUISVILLE State KY Zip Code 40207-1171
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) FIRST UROLOGY Occupation (for Individual) PHYSICIAN
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1100.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 23 / 2016
Transaction ID : SA11A.446278
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION

B. WATKINS, SAMUEL, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2704 POPLAR HILL COURT
 City LOUISVILLE State KY Zip Code 40207-1171
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) FIRST UROLOGY Occupation (for Individual) PHYSICIAN
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1100.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 28 / 2016
Transaction ID : SA11A.461322
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION

C. WATKINS, SAMUEL, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2704 POPLAR HILL COURT
 City LOUISVILLE State KY Zip Code 40207-1171
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) FIRST UROLOGY Occupation (for Individual) PHYSICIAN
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1100.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 31 / 2016
Transaction ID : SA11A.463246
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	300.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3885 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. WATKINS, SAMUEL, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 2704 POPLAR HILL COURT

City LOUISVILLE	State KY	Zip Code 40207-1171
--------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) FIRST UROLOGY	Occupation (for Individual) PHYSICIAN
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1100.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	04	/	2016

Transaction ID : SA11A.473693

Amount of Each Receipt this Period
100.00

Memo Item
CONTRIBUTION

B. WATSON, ANDREW, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 1590 REGATTA DRIVE

City AMELIA ISLAND	State FL	Zip Code 32034-5541
-----------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	02	/	2016

Transaction ID : SA11A.469821

Amount of Each Receipt this Period
500.00

Memo Item
CONTRIBUTION

C. WATSON, BEN, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address P O BOX 780

City ST JOSEPH	State LA	Zip Code 71366-0780
-------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) CROSS KEYS BANK	Occupation (for Individual) COMMUNITY BANKER
--	---

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
425.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	24	/	2016

Transaction ID : SA11A.449345

Amount of Each Receipt this Period
100.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	700.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3886 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. WATSON, BEN, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address P O BOX 780

City ST JOSEPH	State LA	Zip Code 71366-0780
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) CROSS KEYS BANK	Occupation (for Individual) COMMUNITY BANKER
--	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
425.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
11		04		2016

Transaction ID : SA11A.471243

Amount of Each Receipt this Period
50.00

Memo Item
CONTRIBUTION

B. WATSON, BEN, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address P O BOX 780

City ST JOSEPH	State LA	Zip Code 71366-0780
-------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) CROSS KEYS BANK	Occupation (for Individual) COMMUNITY BANKER
--	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
425.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
11		07		2016

Transaction ID : SA11A.480413

Amount of Each Receipt this Period
50.00

Memo Item
CONTRIBUTION

C. WATSON, BEN, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address P O BOX 780

City ST JOSEPH	State LA	Zip Code 71366-0780
-------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) CROSS KEYS BANK	Occupation (for Individual) COMMUNITY BANKER
--	---

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
425.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
11		07		2016

Transaction ID : SA11A.480417

Amount of Each Receipt this Period
50.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	150.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3887 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. WATSON, DAVID, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4015 S FREEWAY
 City FORT WORTH State TX Zip Code 76110-6353
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) WATSON, INC Occupation (for Individual) CHAIRMAN
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 04 / 2016
Transaction ID : SA11A.473715
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION

B. WATSON, EDDIE, , MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 8855 SHERIDAN RD. N/A
 City MELBOURNE State FL Zip Code 32904-1951
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 310.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 31 / 2016
Transaction ID : SA11A.463534
 Amount of Each Receipt this Period
 30.00
 Memo Item
 CONTRIBUTION

C. WATSON, EDDIE, , MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 8855 SHERIDAN RD. N/A
 City MELBOURNE State FL Zip Code 32904-1951
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 310.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 04 / 2016
Transaction ID : SA11A.471717
 Amount of Each Receipt this Period
 50.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	180.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3888 OF 4311
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. WATSON, LARRY, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 5365 SHADY GROVE RD
5365 SHADY GROVE RD

City CUMMING State GA Zip Code 30041-4733

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 210.00

Date of Receipt 10 / 25 / 2016
Transaction ID : SA11A.452181

Amount of Each Receipt this Period 30.00

Memo Item CONTRIBUTION

B. WATSON, LARRY, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 5365 SHADY GROVE RD
5365 SHADY GROVE RD

City CUMMING State GA Zip Code 30041-4733

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 210.00

Date of Receipt 10 / 31 / 2016
Transaction ID : SA11A.464672

Amount of Each Receipt this Period 100.00

Memo Item CONTRIBUTION

C. WATSON, LARRY, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 5365 SHADY GROVE RD
5365 SHADY GROVE RD

City CUMMING State GA Zip Code 30041-4733

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 210.00

Date of Receipt 11 / 02 / 2016
Transaction ID : SA11A.470136

Amount of Each Receipt this Period 25.00

Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶ 155.00

TOTAL This Period (last page this line number only).....▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3889 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. WATSON, LARRY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5365 SHADY GROVE RD
 5365 SHADY GROVE RD
 City CUMMING State GA Zip Code 30041-4733
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 210.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 04 / 2016
Transaction ID : SA11A.479432
 Amount of Each Receipt this Period
 25.00
 Memo Item
 CONTRIBUTION

B. WATSON, RAYMOND, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 10214 DUTCH IRIS DR.
 City BAKERSFIELD State CA Zip Code 93311-3770
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 04 / 2016
Transaction ID : SA11A.471334
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION

C. WATSON, ROBERT, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1140 5TH AVENUE
 8B
 City NEW YORK State NY Zip Code 10128-0806
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 1750.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 24 / 2016
Transaction ID : SA11A.445893
 Amount of Each Receipt this Period
 500.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	625.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3890 OF 4311
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. WATSON, WILLIAM, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address **BOX 1796**
 City **LUBBOCK** State **TX** Zip Code **79408-1796**
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) **NONE** Occupation (for Individual) **RETIRED**
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ **282.00**

Date of Receipt **10 / 31 / 2016**
Transaction ID : SA11A.463699
 Amount of Each Receipt this Period **25.00**
 Memo Item CONTRIBUTION

B. WATSON, WILLIAM, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address **BOX 1796**
 City **LUBBOCK** State **TX** Zip Code **79408-1796**
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) **NONE** Occupation (for Individual) **RETIRED**
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ **282.00**

Date of Receipt **11 / 04 / 2016**
Transaction ID : SA11A.479678
 Amount of Each Receipt this Period **50.00**
 Memo Item CONTRIBUTION

C. WATSON, WILLIAM, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address **BOX 1796**
 City **LUBBOCK** State **TX** Zip Code **79408-1796**
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) **NONE** Occupation (for Individual) **RETIRED**
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ **282.00**

Date of Receipt **11 / 07 / 2016**
Transaction ID : SA11A.480184
 Amount of Each Receipt this Period **50.00**
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	125.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3891 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. WATTLES, RICHARD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 545 SESPE AVE
 FILLMORE

City FILLMORE	State CA	Zip Code 93015-1916
------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) RICHARD WATTLES	Occupation (for Individual) PACIFIC PROFESSIONALS INC.
--	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
 400.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 02 / 2016

Transaction ID : SA11A.465925

Amount of Each Receipt this Period
 100.00

Memo Item
 CONTRIBUTION

B. WAXMAN, ERIC, G., MR., III
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 4 SUNBURY LANE

City STONY BROOK	State NY	Zip Code 11790-3216
---------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) WESTERMAN BALL	Occupation (for Individual) ATTORNEY
---	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
 260.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 31 / 2016

Transaction ID : SA11A.464482

Amount of Each Receipt this Period
 75.00

Memo Item
 CONTRIBUTION

C. WAXMAN, ERIC, G., MR., III
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 4 SUNBURY LANE

City STONY BROOK	State NY	Zip Code 11790-3216
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) WESTERMAN BALL	Occupation (for Individual) ATTORNEY
---	---

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
 260.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 04 / 2016

Transaction ID : SA11A.467618

Amount of Each Receipt this Period
 60.00

Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	235.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3892 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. WAY, RALPH, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 306 WEST WALL
 STE. 410
 City MIDLAND State TX Zip Code 79701-5131
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) OIL & GAS PRODUCER
 Receipt For: Primary General Other (specify) Aggregate Year-to-Date 2000.00

Date of Receipt
 11 / 03 / 2016
Transaction ID : SA11A.468585
 Amount of Each Receipt this Period
 1000.00
 Memo Item CONTRIBUTION

B. WEARDEN, GLORIA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 901 N EAST ST.
 City VICTORIA State TX Zip Code 77901-6729
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) Aggregate Year-to-Date 300.00

Date of Receipt
 10 / 26 / 2016
Transaction ID : SA11A.454667
 Amount of Each Receipt this Period
 100.00
 Memo Item CONTRIBUTION

C. WEAVER, FRANK, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4451 GULFSHORE BLVD N
 UNIT 1504
 City NAPLES State FL Zip Code 34103-2643
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) Aggregate Year-to-Date 325.00

Date of Receipt
 11 / 02 / 2016
Transaction ID : SA11A.465905
 Amount of Each Receipt this Period
 25.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	1125.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3893 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. WEAVER, MARK, L., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 6641 HERBRAND RD
 City SAUK CITY State WI Zip Code 53583-9557
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) WEAVER SALES Occupation (for Individual) WEAVER SALES
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 10 / 25 / 2016
Transaction ID : SA11A.449002
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

B. WEBB, ANDREA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 621 MACARTHUR DR
 City ORLANDO State FL Zip Code 32839-1445
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) MISSION MANAGEMENT Occupation (for Individual) DIRECTOR OF OPERATIONS
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1741.00

Date of Receipt 10 / 24 / 2016
Transaction ID : SA11A.449290
 Amount of Each Receipt this Period 300.00
 Memo Item CONTRIBUTION

C. WEBB, ANDREA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 621 MACARTHUR DR
 City ORLANDO State FL Zip Code 32839-1445
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) MISSION MANAGEMENT Occupation (for Individual) DIRECTOR OF OPERATIONS
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1741.00

Date of Receipt 11 / 02 / 2016
Transaction ID : SA11A.469481
 Amount of Each Receipt this Period 300.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 700.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3894 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. WEBB, ANDREA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 621 MACARTHUR DR
 City ORLANDO State FL Zip Code 32839-1445
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) MISSION MANAGEMENT Occupation (for Individual) DIRECTOR OF OPERATIONS
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1741.00

Date of Receipt
 11 / 04 / 2016
Transaction ID : SA11A.473652
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION

B. WEBB, ANDREA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 621 MACARTHUR DR
 City ORLANDO State FL Zip Code 32839-1445
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) MISSION MANAGEMENT Occupation (for Individual) DIRECTOR OF OPERATIONS
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1741.00

Date of Receipt
 11 / 07 / 2016
Transaction ID : SA11A.475357
 Amount of Each Receipt this Period
 300.00
 Memo Item
 CONTRIBUTION

C. WEBB, ANDREA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 621 MACARTHUR DR
 City ORLANDO State FL Zip Code 32839-1445
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) MISSION MANAGEMENT Occupation (for Individual) DIRECTOR OF OPERATIONS
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1741.00

Date of Receipt
 11 / 07 / 2016
Transaction ID : SA11A.475360
 Amount of Each Receipt this Period
 300.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	700.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3895 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. WEBB, B. J., , MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1201 HARRIS DRIVE
 City BARTLESVILLE State OK Zip Code 74006-5511
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 11 / 17 / 2016
Transaction ID : SA11A.468409
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

B. WEBB, BILL, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address P O BOX 417
 City LAKE CRYSTAL State MN Zip Code 56055-0417
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) STATE FARM Occupation (for Individual) AGENT
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt 11 / 04 / 2016
Transaction ID : SA11A.473598
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

C. WEBB, BILL, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address P O BOX 417
 City LAKE CRYSTAL State MN Zip Code 56055-0417
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) STATE FARM Occupation (for Individual) AGENT
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt 11 / 04 / 2016
Transaction ID : SA11A.473605
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	300.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3896 OF 4311
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. WEBB, JACK, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 33622 HALYARD DRIVE
 City DANA POINT State CA Zip Code 92629-4421
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt **10 / 26 / 2016**
Transaction ID : SA11A.450363
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

B. WEBB, JACK, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 33622 HALYARD DRIVE
 City DANA POINT State CA Zip Code 92629-4421
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt **11 / 07 / 2016**
Transaction ID : SA11A.475731
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

C. WEBER, BETTY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1318 AUSTIN COLONY DRIVE
 City RICHMOND State TX Zip Code 77406-1208
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 275.00

Date of Receipt **10 / 25 / 2016**
Transaction ID : SA11A.451844
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	200.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3897 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
Team Ryan

A. WEBER, BETTY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1318 AUSTIN COLONY DRIVE
 City RICHMOND State TX Zip Code 77406-1208
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 275.00

Date of Receipt 10 / 27 / 2016
Transaction ID : SA11A.453424
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

B. WEBER, EDWARD, V., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address P O BOX 1165
 City PORT EWEN State NY Zip Code 12466-1165
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 601.00

Date of Receipt 10 / 26 / 2016
Transaction ID : SA11A.454342
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

C. WEBER, EDWARD, V., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address P O BOX 1165
 City PORT EWEN State NY Zip Code 12466-1165
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 601.00

Date of Receipt 11 / 02 / 2016
Transaction ID : SA11A.465902
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶ 150.00
TOTAL This Period (last page this line number only).....▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3898 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
Team Ryan

A. WEBER, EDWARD, V., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address P O BOX 1165
 City PORT EWEN State NY Zip Code 12466-1165
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 601.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 04 / 2016
Transaction ID : SA11A.470324
 Amount of Each Receipt this Period
 30.00
 Memo Item CONTRIBUTION

B. WEBER, EDWARD, V., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address P O BOX 1165
 City PORT EWEN State NY Zip Code 12466-1165
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 601.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 03 / 2016
Transaction ID : SA11A.474416
 Amount of Each Receipt this Period
 38.00
 Memo Item CONTRIBUTION

C. WEBER, EDWARD, V., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address P O BOX 1165
 City PORT EWEN State NY Zip Code 12466-1165
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 601.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 07 / 2016
Transaction ID : SA11A.474639
 Amount of Each Receipt this Period
 30.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	98.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3899 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
Team Ryan

A. WEBER, EDWARD, V., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address P O BOX 1165
 City PORT EWEN State NY Zip Code 12466-1165
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 601.00

Date of Receipt
 11 / 07 / 2016
Transaction ID : SA11A.480772
 Amount of Each Receipt this Period 30.00
 Memo Item CONTRIBUTION

B. WEBER, GEORGE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 438 GOLDON TROPHY TRL
 City LEXINGTON State KY Zip Code 40514-1775
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 225.00

Date of Receipt
 10 / 31 / 2016
Transaction ID : SA11A.463702
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

C. WEBER, GEORGE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 438 GOLDON TROPHY TRL
 City LEXINGTON State KY Zip Code 40514-1775
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 225.00

Date of Receipt
 10 / 31 / 2016
Transaction ID : SA11A.463705
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	80.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3900 OF 4311
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. WEBER, INES, , MS.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address **881 CHATTANOOGA AVE**

City PACIFIC PALISADES	State CA	Zip Code 90272-2326
----------------------------------	--------------------	-------------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) INES WEBER	Occupation (for Individual) ACCOUNTANT
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **250.00**

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		23		2016

Transaction ID : SA11A.446364

Amount of Each Receipt this Period

20.00

Memo Item
CONTRIBUTION

B. WEBER, INES, , MS.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address **881 CHATTANOOGA AVE**

City PACIFIC PALISADES	State CA	Zip Code 90272-2326
----------------------------------	--------------------	-------------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) INES WEBER	Occupation (for Individual) ACCOUNTANT
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **250.00**

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		26		2016

Transaction ID : SA11A.451083

Amount of Each Receipt this Period

20.00

Memo Item
CONTRIBUTION

C. WEBER, INES, , MS.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address **881 CHATTANOOGA AVE**

City PACIFIC PALISADES	State CA	Zip Code 90272-2326
----------------------------------	--------------------	-------------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) INES WEBER	Occupation (for Individual) ACCOUNTANT
--	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼ **250.00**

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		30		2016

Transaction ID : SA11A.459892

Amount of Each Receipt this Period

20.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	60.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3901 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. WEBER, INES, , MS.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 881 CHATTANOOGA AVE
 City PACIFIC PALISADES State CA Zip Code 90272-2326
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) INES WEBER Occupation (for Individual) ACCOUNTANT
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 11 / 04 / 2016
Transaction ID : SA11A.471198
 Amount of Each Receipt this Period 20.00
 Memo Item CONTRIBUTION

B. WEBER, INES, , MS.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 881 CHATTANOOGA AVE
 City PACIFIC PALISADES State CA Zip Code 90272-2326
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) INES WEBER Occupation (for Individual) ACCOUNTANT
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 11 / 04 / 2016
Transaction ID : SA11A.473077
 Amount of Each Receipt this Period 20.00
 Memo Item CONTRIBUTION

C. WEBER, INES, , MS.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 881 CHATTANOOGA AVE
 City PACIFIC PALISADES State CA Zip Code 90272-2326
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) INES WEBER Occupation (for Individual) ACCOUNTANT
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 11 / 07 / 2016
Transaction ID : SA11A.475899
 Amount of Each Receipt this Period 20.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 60.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3902 OF 4311
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. WEBER, KAREN, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 2776 MEADOWBROOK DR SE

City GRAND RAPIDS	State MI	Zip Code 49546-5583
----------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) LEGATUS	Occupation (for Individual) EVENT PLANNER
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
350.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
10		24		2016

Transaction ID : SA11A.449524

Amount of Each Receipt this Period
100.00

Memo Item CONTRIBUTION

B. WEBER, LANI, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 600 KINGS GRANT RD.

City VIRGINIA BEACH	State VA	Zip Code 23452-7013
------------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
375.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
11		06		2016

Transaction ID : SA11A.478122

Amount of Each Receipt this Period
25.00

Memo Item CONTRIBUTION

C. WEBER, VIN, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 7701 RIDGECREST DRIVE

City ALEXANDRIA	State VA	Zip Code 22308-1052
--------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) MERCURY	Occupation (for Individual) LOBBYIST
--	---

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
3000.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
10		26		2016

Transaction ID : SA11A.450722

Amount of Each Receipt this Period
3000.00

Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	3125.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3903 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. WEBER, WILLIAM, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1326 RIVER RIDGE DRIVE
 City VERO BEACH State FL Zip Code 32963-2563
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 10 / 24 / 2016
Transaction ID : SA11A.445985
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

B. WEBER, WILLIAM, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1326 RIVER RIDGE DRIVE
 City VERO BEACH State FL Zip Code 32963-2563
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 10 / 24 / 2016
Transaction ID : SA11A.445998
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

C. WEBSTER, C., W., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1 BEACH DRIVE SE UNIT 2307
 City ST. PETERSBURG State FL Zip Code 33701-3958
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) INFORMATION REQUESTED PER BEST EFFORTS Occupation (for Individual) INFORMATION REQUESTED PER BEST EFFORTS
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 350.00

Date of Receipt 10 / 27 / 2016
Transaction ID : SA11A.452371
 Amount of Each Receipt this Period 150.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	350.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3904 OF 4311
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
Team Ryan

A. WEBSTER, JOEL, S., DR., MD
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 7121 CYPRESS CREEK LANE
 City CHARLOTTE State NC Zip Code 28210-2468
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 550.00

Date of Receipt 10 / 28 / 2016
Transaction ID : SA11A.454759
 Amount of Each Receipt this Period 300.00
 Memo Item CONTRIBUTION

B. WEBSTER, ROBERT, W., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 924 18TH STREET S
 City ARLINGTON State VA Zip Code 22202-2604
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1750.00

Date of Receipt 11 / 03 / 2016
Transaction ID : SA11A.465285
 Amount of Each Receipt this Period 500.00
 Memo Item CONTRIBUTION

C. WEBSTER, SPENCE, , MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3600BRADINTON
 City WILLIAMSBURG State VA Zip Code 23188-2459
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 11 / 02 / 2016
Transaction ID : SA11A.469679
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶ 825.00
TOTAL This Period (last page this line number only).....▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3905 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. WEBSTER, SPENCE, , MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3600BRADINTON
 City WILLIAMSBURG State VA Zip Code 23188-2459
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 02 / 2016
Transaction ID : SA11A.469691
 Amount of Each Receipt this Period
 25.00
 Memo Item
 CONTRIBUTION

B. WEEDEN, JEFFERY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 891 14TH ST. #2706
 City DENVER State CO Zip Code 80202-3273
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) ATTORNEY
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 275.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 26 / 2016
Transaction ID : SA11A.450529
 Amount of Each Receipt this Period
 50.00
 Memo Item
 CONTRIBUTION

C. WEEDEN, JEFFERY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 891 14TH ST. #2706
 City DENVER State CO Zip Code 80202-3273
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) ATTORNEY
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 275.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 04 / 2016
Transaction ID : SA11A.472324
 Amount of Each Receipt this Period
 50.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶ 125.00
TOTAL This Period (last page this line number only).....▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3906 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. WEEDEN, JEFFERY, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 891 14TH ST.
#2706

City DENVER State CO Zip Code 80202-3273

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) ATTORNEY

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
275.00

Date of Receipt
11 / 06 / 2016
Transaction ID : SA11A.477676

Amount of Each Receipt this Period
100.00

Memo Item CONTRIBUTION

B. WEEKS, E. W., , MR.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 31 HILLTOP ROAD

City MENDHAM State NJ Zip Code 07945-1206

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt
10 / 25 / 2016
Transaction ID : SA11A.447365

Amount of Each Receipt this Period
50.00

Memo Item CONTRIBUTION

C. WEEKS, E. W., , MR.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 31 HILLTOP ROAD

City MENDHAM State NJ Zip Code 07945-1206

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
250.00

Date of Receipt
11 / 03 / 2016
Transaction ID : SA11A.465370

Amount of Each Receipt this Period
50.00

Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	200.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3907 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
Team Ryan

A. WEHRHEIM, NANCY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1024 CENTER OAK DR
 City PITTSBURGH State PA Zip Code 15237-6112
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 285.00

Date of Receipt **10 / 30 / 2016**
Transaction ID : SA11A.460128
 Amount of Each Receipt this Period 30.00
 Memo Item CONTRIBUTION

B. WEHRHEIM, NANCY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1024 CENTER OAK DR
 City PITTSBURGH State PA Zip Code 15237-6112
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 285.00

Date of Receipt **11 / 04 / 2016**
Transaction ID : SA11A.473403
 Amount of Each Receipt this Period 30.00
 Memo Item CONTRIBUTION

C. WEHRLY, JACK, R., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1589 FOUNDERS HILL NORTH
 City WILLIAMSBURG State VA Zip Code 23185-7612
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt **10 / 29 / 2016**
Transaction ID : SA11A.460908
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	160.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3908 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
Team Ryan

A. WEHRMEYER, SAMUEL, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO BOX 13352
 City LA JOLLA State CA Zip Code 92039-3352
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SAMUEL WEHRMEYER Occupation (for Individual) BUSINESS OWNER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 786.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 30 / 2016
Transaction ID : SA11A.464914
 Amount of Each Receipt this Period
 131.00
 Memo Item
 CONTRIBUTION

B. WEHRMEYER, SAMUEL, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO BOX 13352
 City LA JOLLA State CA Zip Code 92039-3352
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SAMUEL WEHRMEYER Occupation (for Individual) BUSINESS OWNER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 786.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 04 / 2016
Transaction ID : SA11A.472279
 Amount of Each Receipt this Period
 131.00
 Memo Item
 CONTRIBUTION

C. WEIGAND, CRAIG, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 8061 FOREST CT
 City FINDLAY State OH Zip Code 45840-9596
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) MARATHON PETROLEUM Occupation (for Individual) MANAGER
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 25 / 2016
Transaction ID : SA11A.448409
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	362.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3909 OF 4311
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. WEIGAND, CRAIG, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 8061 FOREST CT

City FINDLAY	State OH	Zip Code 45840-9596
-----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) MARATHON PETROLEUM	Occupation (for Individual) MANAGER
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
400.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	25	/	2016

Transaction ID : SA11A.448416

Amount of Each Receipt this Period
100.00

Memo Item
CONTRIBUTION

B. WEIGAND, CRAIG, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 8061 FOREST CT

City FINDLAY	State OH	Zip Code 45840-9596
-----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) MARATHON PETROLEUM	Occupation (for Individual) MANAGER
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
400.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	02	/	2016

Transaction ID : SA11A.467041

Amount of Each Receipt this Period
100.00

Memo Item
CONTRIBUTION

C. WEIHER, RODNEY, F., ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 813 E CAPITOL STREET SE

City WASHINGTON	State DC	Zip Code 20003-1347
--------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
1300.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	25	/	2016

Transaction ID : SA11A.447324

Amount of Each Receipt this Period
300.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	500.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3910 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. WEIHER, RODNEY, F., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 813 E CAPITOL STREET SE
 City WASHINGTON State DC Zip Code 20003-1347
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1300.00

Date of Receipt **11 / 03 / 2016**
Transaction ID : SA11A.465309
 Amount of Each Receipt this Period 200.00
 Memo Item CONTRIBUTION

B. WEINER, REBECCA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1470 S QUEBEC WAY 104
 City DENVER State CO Zip Code 80231-5696
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 350.00

Date of Receipt **10 / 31 / 2016**
Transaction ID : SA11A.463991
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

C. WEINGARTNER, GERARD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 198 RIVERVIEW ACRES ROAD
 City HUDSON State WI Zip Code 54016-6751
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) DENTIST
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt **10 / 31 / 2016**
Transaction ID : SA11A.458277
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	300.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3911 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. WEINGARTNER, GERARD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 198 RIVERVIEW ACRES ROAD
 City HUDSON State WI Zip Code 54016-6751
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) DENTIST
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 10 / 31 / 2016
Transaction ID : SA11A.458291
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

B. WEINGARTNER, GERARD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 198 RIVERVIEW ACRES ROAD
 City HUDSON State WI Zip Code 54016-6751
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) DENTIST
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 11 / 07 / 2016
Transaction ID : SA11A.475878
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

C. WEINGARTNER, GERARD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 198 RIVERVIEW ACRES ROAD
 City HUDSON State WI Zip Code 54016-6751
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) DENTIST
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 11 / 07 / 2016
Transaction ID : SA11A.475893
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	150.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3912 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. WEINSTEIN, MICHAEL, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3710 BARRINGTON DRIVE
 City ALLENTOWN State PA Zip Code 18104-1755
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) MICHAEL WEINSTEIN Occupation (for Individual) REALTOR
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 235.00

Date of Receipt 11 / 06 / 2016
Transaction ID : SA11A.476721
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

B. WEINTRAUB, RONALD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 141 BAR GATE TRL
 City KILLINGWORTH State CT Zip Code 06419-1372
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) CURTIS PRODUCTS Occupation (for Individual) MANAGER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 11 / 02 / 2016
Transaction ID : SA11A.467090
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

C. WEISBAUM, JACK, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 109 SPRINGLINE DRIVE
 City VERO BEACH State FL Zip Code 32963-2939
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 10 / 26 / 2016
Transaction ID : SA11A.454472
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	525.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3913 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name A. WEISLEDER, BROOKE, , ,		Date of Receipt MM / DD / YYYY 11 / 04 / 2016
Mailing Address 53 TARPON LANE		Transaction ID : SA11A.471959
City KEY LARGO	State FL	Zip Code 33037-5229
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 100.00
Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED	<input type="checkbox"/> Memo Item CONTRIBUTION
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00	

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name B. WEISS, NITZA, , ,		Date of Receipt MM / DD / YYYY 10 / 29 / 2016
Mailing Address 540 BARDINI DRIVE		Transaction ID : SA11A.460556
City MELVILLE	State NY	Zip Code 11747-5326
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 50.00
Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED	<input type="checkbox"/> Memo Item CONTRIBUTION
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 575.00	

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name C. WEISS, NITZA, , ,		Date of Receipt MM / DD / YYYY 10 / 29 / 2016
Mailing Address 540 BARDINI DRIVE		Transaction ID : SA11A.460557
City MELVILLE	State NY	Zip Code 11747-5326
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 50.00
Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED	<input type="checkbox"/> Memo Item CONTRIBUTION
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Aggregate Year-to-Date ▼ 575.00	

SUBTOTAL of Receipts This Page (optional).....▶	200.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3914 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. WEISS, NITZA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 540 BARDINI DRIVE
 City MELVILLE State NY Zip Code 11747-5326
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 575.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 02 / 2016
Transaction ID : SA11A.469814
 Amount of Each Receipt this Period
 50.00
 Memo Item
 CONTRIBUTION

B. WEISS, NITZA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 540 BARDINI DRIVE
 City MELVILLE State NY Zip Code 11747-5326
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 575.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 02 / 2016
Transaction ID : SA11A.469834
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION

C. WEISS, NITZA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 540 BARDINI DRIVE
 City MELVILLE State NY Zip Code 11747-5326
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 575.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 03 / 2016
Transaction ID : SA11A.474409
 Amount of Each Receipt this Period
 50.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	200.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3915 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
Team Ryan

A. WEISS, ROBERT, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 475 JEWELL 8
 City OXFORD State AL Zip Code 36203-4837
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) UNITY VENDING Occupation (for Individual) OWNER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 275.00

Date of Receipt 10 / 25 / 2016
Transaction ID : SA11A.448218
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

B. WEISSKOPF, VICTOR, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 624 BRIERHILL
 City DEERFIELD State IL Zip Code 60015-4406
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) ADMIRAL SECURITY SERVICES, INC. Occupation (for Individual) MANAGER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 750.00

Date of Receipt 10 / 31 / 2016
Transaction ID : SA11A.457538
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

C. WELBURN, FRIEDA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO BOX 238
 City GILA State NM Zip Code 88038-0238
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 460.00

Date of Receipt 10 / 23 / 2016
Transaction ID : SA11A.446266
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 525.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3916 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
Team Ryan

A. WELBURN, FRIEDA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO BOX 238
 City GILA State NM Zip Code 88038-0238
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 460.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 21 / 2016
Transaction ID : SA11A.447239
 Amount of Each Receipt this Period
 25.00
 Memo Item
 CONTRIBUTION

B. WELBURN, FRIEDA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO BOX 238
 City GILA State NM Zip Code 88038-0238
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 460.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 21 / 2016
Transaction ID : SA11A.447241
 Amount of Each Receipt this Period
 25.00
 Memo Item
 CONTRIBUTION

C. WELBURN, FRIEDA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO BOX 238
 City GILA State NM Zip Code 88038-0238
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 460.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 26 / 2016
Transaction ID : SA11A.451069
 Amount of Each Receipt this Period
 25.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	75.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3917 OF 4311
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
WELBURN, FRIEDA, , ,

Mailing Address **PO BOX 238**

City GILA	State NM	Zip Code 88038-0238
---------------------	--------------------	-------------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
--	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **460.00**

Date of Receipt
10 / 27 / 2016

Transaction ID : SA11A.456533

Amount of Each Receipt this Period
25.00

Memo Item CONTRIBUTION

B. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
WELBURN, FRIEDA, , ,

Mailing Address **PO BOX 238**

City GILA	State NM	Zip Code 88038-0238
---------------------	--------------------	-------------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
--	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **460.00**

Date of Receipt
11 / 04 / 2016

Transaction ID : SA11A.474196

Amount of Each Receipt this Period
25.00

Memo Item CONTRIBUTION

C. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
WELBURN, FRIEDA, , ,

Mailing Address **PO BOX 238**

City GILA	State NM	Zip Code 88038-0238
---------------------	--------------------	-------------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
--	---

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼ **460.00**

Date of Receipt
11 / 05 / 2016

Transaction ID : SA11A.478354

Amount of Each Receipt this Period
50.00

Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	100.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3918 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. WELDEN, ANN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 7009 LEE PARK COURT
 City FALLS CHURCH State VA Zip Code 22042-3907
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 01 / 2016
Transaction ID : SA11A.462888
 Amount of Each Receipt this Period
 250.00
 Memo Item
 CONTRIBUTION

B. WELDON, RICHARD, , MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 100 GOLF EDGE DRIVE
 City WESTFIELD State NJ Zip Code 07090-1804
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) WELDON MATERIALS INC Occupation (for Individual) PRESIDENT
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 03 / 2016
Transaction ID : SA11A.465601
 Amount of Each Receipt this Period
 250.00
 Memo Item
 CONTRIBUTION

C. WELLEMEYER, JOHN, C., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 89 ROSEDALE ROAD
 City PRINCETON State NJ Zip Code 08540-6701
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 2300.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 25 / 2016
Transaction ID : SA11A.447332
 Amount of Each Receipt this Period
 500.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	1000.00
TOTAL This Period (last page this line number only).....	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 3919 OF 4311
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. WELLS, ANNETTE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4338 STANDFILL LANE
 City VACAVILLE State CA Zip Code 95688-9344
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 340.00

Date of Receipt 11 / 04 / 2016
Transaction ID : SA11A.470429
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

B. WELLS, ANNETTE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4338 STANDFILL LANE
 City VACAVILLE State CA Zip Code 95688-9344
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 340.00

Date of Receipt 11 / 04 / 2016
Transaction ID : SA11A.470430
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

C. WELLS, LYLE, L., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1751 W BOWLING ST
 City ANAHEIM State CA Zip Code 92804-5504
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 475.00

Date of Receipt 10 / 20 / 2016
Transaction ID : SA11A.442575
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	150.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3920 OF 4311
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. WELLS, PHYLLIS, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address PO BOX 200

City PINELAND	State FL	Zip Code 33945-0200
FEC ID number of contributing federal political committee. C		
Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1000.00	

Date of Receipt
10 / 28 / 2016
Transaction ID : SA11A.454730

Amount of Each Receipt this Period
1000.00

Memo Item CONTRIBUTION

B. WELLS, RICHARD, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 3079 COUNTRY CLUB DR

City COSTA MESA	State CA	Zip Code 92626-2341
FEC ID number of contributing federal political committee. C		
Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 220.00	

Date of Receipt
10 / 25 / 2016
Transaction ID : SA11A.448483

Amount of Each Receipt this Period
50.00

Memo Item CONTRIBUTION

C. WELLS, RICHARD, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 3079 COUNTRY CLUB DR

City COSTA MESA	State CA	Zip Code 92626-2341
FEC ID number of contributing federal political committee. C		
Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Aggregate Year-to-Date ▼ 220.00	

Date of Receipt
10 / 25 / 2016
Transaction ID : SA11A.448515

Amount of Each Receipt this Period
30.00

Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	1080.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3921 OF 4311
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. WELLS, RICHARD, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 3079 COUNTRY CLUB DR

City COSTA MESA	State CA	Zip Code 92626-2341
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
220.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		25		2016

Transaction ID : SA11A.448518

Amount of Each Receipt this Period
30.00

Memo Item
CONTRIBUTION

B. WELLS, RICHARD, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 3079 COUNTRY CLUB DR

City COSTA MESA	State CA	Zip Code 92626-2341
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
220.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		30		2016

Transaction ID : SA11A.460111

Amount of Each Receipt this Period
25.00

Memo Item
CONTRIBUTION

C. WELLS, RICHARD, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 3079 COUNTRY CLUB DR

City COSTA MESA	State CA	Zip Code 92626-2341
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
220.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11		04		2016

Transaction ID : SA11A.472527

Amount of Each Receipt this Period
25.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	80.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3922 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. WELLS, RICHARD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3079 COUNTRY CLUB DR
 City COSTA MESA State CA Zip Code 92626-2341
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 220.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 07 / 2016
Transaction ID : SA11A.475615
 Amount of Each Receipt this Period
 35.00
 Memo Item
CONTRIBUTION

B. WELLS, SCOTT, R., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 37 ROYALSTON RD
 City WELLESLEY State MA Zip Code 02481-1220
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) CLEAR CHANNEL OUTDOOR Occupation (for Individual) CEO
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 02 / 2016
Transaction ID : SA11A.466349
 Amount of Each Receipt this Period
 250.00
 Memo Item
CONTRIBUTION

C. WELLS, STEPHEN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address P.O. BOX 3598
 City CLEBURNE State TX Zip Code 76033-3598
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) PHARMACIST
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 275.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 26 / 2016
Transaction ID : SA11A.449784
 Amount of Each Receipt this Period
 50.00
 Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	335.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3923 OF 4311
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. WELLS, STEPHEN, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address P.O. BOX 3598

City CLEBURNE	State TX	Zip Code 76033-3598
------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) SELF EMPLOYED	Occupation (for Individual) PHARMACIST
--	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
275.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	26	/	2016

Transaction ID : SA11A.449788

Amount of Each Receipt this Period
50.00

Memo Item
CONTRIBUTION

B. WELLS, STEPHEN, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address P.O. BOX 3598

City CLEBURNE	State TX	Zip Code 76033-3598
------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) SELF EMPLOYED	Occupation (for Individual) PHARMACIST
--	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
275.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	04	/	2016

Transaction ID : SA11A.473073

Amount of Each Receipt this Period
50.00

Memo Item
CONTRIBUTION

C. WELLS, STEPHEN, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address P.O. BOX 3598

City CLEBURNE	State TX	Zip Code 76033-3598
------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) SELF EMPLOYED	Occupation (for Individual) PHARMACIST
--	---

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
275.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	04	/	2016

Transaction ID : SA11A.473164

Amount of Each Receipt this Period
50.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	150.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3924 OF 4311
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. WELTE, ROBERT, F., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 700 PORT ST., COTTAGE 324
 City EASTON State MD Zip Code 21601-8155
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 11 / 04 / 2016
Transaction ID : SA11A.473161
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

B. WELTON, ANN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2603 BRANNAN RD
 City SNELLVILLE State GA Zip Code 30039-4301
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 207.00

Date of Receipt 11 / 05 / 2016
Transaction ID : SA11A.478793
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

C. WELWOOD, PAUL, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 119 LOCK STREET
 City PHILLIPSBURG State NJ Zip Code 08865-3626
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SCHOOL SPECIALTY Occupation (for Individual) SALES
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 10 / 28 / 2016
Transaction ID : SA11A.456322
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 225.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3925 OF 4311
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. WELWOOD, PAUL, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 119 LOCK STREET

City PHILLIPSBURG	State NJ	Zip Code 08865-3626
----------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) SCHOOL SPECIALTY	Occupation (for Individual) SALES
---	--------------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
300.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	02	/	2016

Transaction ID : SA11A.466940

Amount of Each Receipt this Period
50.00

Memo Item
CONTRIBUTION

B. WELWOOD, PAUL, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 119 LOCK STREET

City PHILLIPSBURG	State NJ	Zip Code 08865-3626
----------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) SCHOOL SPECIALTY	Occupation (for Individual) SALES
---	--------------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
300.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	04	/	2016

Transaction ID : SA11A.471259

Amount of Each Receipt this Period
100.00

Memo Item
CONTRIBUTION

C. WENRICH, SCOTT, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 24713 CHOKE CHERRY LANE

City NEWHALL	State CA	Zip Code 91321-1930
-----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
700.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	23	/	2016

Transaction ID : SA11A.446470

Amount of Each Receipt this Period
250.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	400.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3926 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. WENRICH, SCOTT, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 24713 CHOKE CHERRY LANE
 City NEWHALL State CA Zip Code 91321-1930
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 700.00

Date of Receipt 10 / 31 / 2016
Transaction ID : SA11A.463551
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

B. WERMERS, RONALD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2705 SUNDOWN DR
 City BERTHOUD State CO Zip Code 80513-9441
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 650.00

Date of Receipt 10 / 22 / 2016
Transaction ID : SA11A.446674
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

C. WERNER, STEPHEN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1150 FIESTA DRIVE
 City GREENWOOD State IN Zip Code 46143-2638
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) DELTA SERVICES Occupation (for Individual) VP
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 10 / 30 / 2016
Transaction ID : SA11A.459482
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	550.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3927 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
Team Ryan

A. WERTH, CINDY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1695 COUNTY ROAD 80
 City QUINTER State KS Zip Code 67752-6039
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) CINDY WERTH Occupation (for Individual) FARM/RANCH
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 25 / 2016
Transaction ID : SA11A.447844
 Amount of Each Receipt this Period
 400.00
 Memo Item
CONTRIBUTION

B. WERTHER, EDITH, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 630 CAROLINA BAY DRIVE 340
 City WILMINGTON State NC Zip Code 28403-2031
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 27 / 2016
Transaction ID : SA11A.453756
 Amount of Each Receipt this Period
 50.00
 Memo Item
CONTRIBUTION

C. WERTHER, EDITH, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 630 CAROLINA BAY DRIVE 340
 City WILMINGTON State NC Zip Code 28403-2031
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 27 / 2016
Transaction ID : SA11A.453784
 Amount of Each Receipt this Period
 50.00
 Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	500.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3928 OF 4311
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. WEST, CAROLE, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 6165 CHARTWELL LANE

City MEMPHIS	State TN	Zip Code 38120-2556
-----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) SELF EMPLOYED	Occupation (for Individual) HEALTHCARE COMPANY
--	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
600.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		27		2016

Transaction ID : SA11A.453709

Amount of Each Receipt this Period
100.00

Memo Item CONTRIBUTION

B. WEST, CAROLE, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 6165 CHARTWELL LANE

City MEMPHIS	State TN	Zip Code 38120-2556
-----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) SELF EMPLOYED	Occupation (for Individual) HEALTHCARE COMPANY
--	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
600.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		27		2016

Transaction ID : SA11A.453710

Amount of Each Receipt this Period
100.00

Memo Item CONTRIBUTION

C. WEST, CAROLE, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 6165 CHARTWELL LANE

City MEMPHIS	State TN	Zip Code 38120-2556
-----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) SELF EMPLOYED	Occupation (for Individual) HEALTHCARE COMPANY
--	---

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
600.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11		02		2016

Transaction ID : SA11A.465791

Amount of Each Receipt this Period
400.00

Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	600.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3929 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. WEST, JERRY, W., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 151 SAINT GEORGE PLACE
 City BERMUDA RUN State NC Zip Code 27006-8542
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 10 / 31 / 2016
Transaction ID : SA11A.463757
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

B. WEST, JERRY, W., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 151 SAINT GEORGE PLACE
 City BERMUDA RUN State NC Zip Code 27006-8542
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 10 / 31 / 2016
Transaction ID : SA11A.463762
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

C. WEST, K, J., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO BOX 631936
 City LITTLETON State CO Zip Code 80163-1936
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 800.00

Date of Receipt 10 / 25 / 2016
Transaction ID : SA11A.447348
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 350.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3930 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. WEST, KENNETH, JAMES, MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO BOX 631936
 City LITTLETON State CO Zip Code 80163-1936
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 11 / 04 / 2016
Transaction ID : SA11A.467501
 Amount of Each Receipt this Period 200.00
 Memo Item CONTRIBUTION

B. WEST, NANCY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 7315 MONON CT
 City INDIANAPOLIS State IN Zip Code 46256-1986
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 225.00

Date of Receipt 10 / 22 / 2016
Transaction ID : SA11A.447013
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

C. WEST, NANCY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 7315 MONON CT
 City INDIANAPOLIS State IN Zip Code 46256-1986
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 225.00

Date of Receipt 10 / 22 / 2016
Transaction ID : SA11A.447025
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 250.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3931 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. WESTERBECK, DANIEL, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 24 SURF SCOTER
 City HILTON HEAD ISLAND State SC Zip Code 29928-5610
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 22 / 2016
Transaction ID : SA11A.447017
 Amount of Each Receipt this Period
 250.00
 Memo Item
 CONTRIBUTION

B. WESTERMAN, JAN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1280 SUMMIT
 City JASPER State AL Zip Code 35501-0102
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) PASAJ Occupation (for Individual) PHYSICIAN
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 30 / 2016
Transaction ID : SA11A.459851
 Amount of Each Receipt this Period
 400.00
 Memo Item
 CONTRIBUTION

C. WESTHOFF, JERRY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 6932 BERRYWOOD CT
 City LINCOLN State NE Zip Code 68516-2445
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) JERRY WESTHOFF Occupation (for Individual) ENGINEER
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 27 / 2016
Transaction ID : SA11A.453746
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	750.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3932 OF 4311
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. WESTON, RICHARD, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 54 RAINEY STREET
1109

City AUSTIN State TX Zip Code 78701-4387

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) CONSULTANT

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt
10 / 24 / 2016
Transaction ID : SA11A.446023

Amount of Each Receipt this Period
50.00

Memo Item CONTRIBUTION

B. WESTON, RICHARD, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 54 RAINEY STREET
1109

City AUSTIN State TX Zip Code 78701-4387

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) CONSULTANT

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt
10 / 24 / 2016
Transaction ID : SA11A.446026

Amount of Each Receipt this Period
50.00

Memo Item CONTRIBUTION

C. WESTWOOD, NEAL, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 6071 S HATHAWAY STREET

City TAYLORSVILLE State UT Zip Code 84123-5359

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
225.00

Date of Receipt
10 / 30 / 2016
Transaction ID : SA11A.459336

Amount of Each Receipt this Period
75.00

Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 175.00

TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3933 OF 4311
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. WETZEL, BARBARA, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 101 LAKESIDE DRIVE

City STILLWATER	State MN	Zip Code 55082-4279
--------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) UNITED BUSINESS MAIL	Occupation (for Individual) SALES
---	--------------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		31		2016

Transaction ID : SA11A.459088

Amount of Each Receipt this Period
250.00

Memo Item
CONTRIBUTION

B. WEYLAND, SHARON, K., ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address HC 65 BOX 120

City BLUEBELL	State UT	Zip Code 84007-9708
------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
400.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		31		2016

Transaction ID : SA11A.463205

Amount of Each Receipt this Period
200.00

Memo Item
CONTRIBUTION

C. WHALEN, BETTY, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 2000 E. WASHINGTON
95

City MONTICELLO	State IL	Zip Code 61856-2147
--------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
240.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		24		2016

Transaction ID : SA11A.446158

Amount of Each Receipt this Period
25.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	475.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3934 OF 4311
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
Team Ryan

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name A. WHALEN, BETTY, , ,		Date of Receipt MM / DD / YYYY 10 / 24 / 2016 Transaction ID : SA11A.446161
Mailing Address 2000 E. WASHINGTON 95		Amount of Each Receipt this Period 25.00
City MONTICELLO	State IL	Zip Code 61856-2147
FEC ID number of contributing federal political committee. C		<input type="checkbox"/> Memo Item CONTRIBUTION
Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 240.00	

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name B. WHALEN, BETTY, , ,		Date of Receipt MM / DD / YYYY 10 / 28 / 2016 Transaction ID : SA11A.456078
Mailing Address 2000 E. WASHINGTON 95		Amount of Each Receipt this Period 20.00
City MONTICELLO	State IL	Zip Code 61856-2147
FEC ID number of contributing federal political committee. C		<input type="checkbox"/> Memo Item CONTRIBUTION
Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 240.00	

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name C. WHALEN, BETTY, , ,		Date of Receipt MM / DD / YYYY 11 / 04 / 2016 Transaction ID : SA11A.470801
Mailing Address 2000 E. WASHINGTON 95		Amount of Each Receipt this Period 20.00
City MONTICELLO	State IL	Zip Code 61856-2147
FEC ID number of contributing federal political committee. C		<input type="checkbox"/> Memo Item CONTRIBUTION
Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Aggregate Year-to-Date ▼ 240.00	

SUBTOTAL of Receipts This Page (optional).....	65.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3935 OF 4311
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
Team Ryan

A. WHALEN, BETTY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2000 E. WASHINGTON
 95
 City MONTICELLO State IL Zip Code 61856-2147
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 240.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 04 / 2016
Transaction ID : SA11A.473427
 Amount of Each Receipt this Period
 25.00
 Memo Item
 CONTRIBUTION

B. WHALER, KENNETH, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2202 CROOKED OAK COURT
 City PANAMA CITY State FL Zip Code 32408-5715
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 07 / 2016
Transaction ID : SA11A.476029
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION

C. WHALER, KENNETH, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2202 CROOKED OAK COURT
 City PANAMA CITY State FL Zip Code 32408-5715
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 07 / 2016
Transaction ID : SA11A.476032
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 225.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 3936 OF 4311
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
Team Ryan

A. WHALEN, MALACHY, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 535 SMITHFIELD ST

City PITTSBURGH	State PA	Zip Code 15222-2393
--------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) MALACHY WHALEN & CO. INC.	Occupation (for Individual) INSURANCE BROKER
--	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
786.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	30	/	2016

Transaction ID : SA11A.460092

Amount of Each Receipt this Period
131.00

Memo Item
CONTRIBUTION

B. WHALEN, MALACHY, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 535 SMITHFIELD ST

City PITTSBURGH	State PA	Zip Code 15222-2393
--------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) MALACHY WHALEN & CO. INC.	Occupation (for Individual) INSURANCE BROKER
--	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
786.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	04	/	2016

Transaction ID : SA11A.472150

Amount of Each Receipt this Period
131.00

Memo Item
CONTRIBUTION

C. WHATLEY, SAMMY, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 207 BASSETT P.O. BOX 832

City LONE STAR	State TX	Zip Code 75668-0832
-------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) S&B ENGINEERING	Occupation (for Individual) ELEC ENGR
--	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
2275.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	25	/	2016

Transaction ID : SA11A.448863

Amount of Each Receipt this Period
250.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	512.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3937 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. WHATLEY, SAMMY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 207 BASSETT P.O. BOX 832
 City LONE STAR State TX Zip Code 75668-0832
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) S&B ENGINEERING Occupation (for Individual) ELEC ENGR
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 2275.00

Date of Receipt **11 / 04 / 2016**
Transaction ID : SA11A.471463
 Amount of Each Receipt this Period 250.00
 Memo Item
 CONTRIBUTION

B. WHEALDON, MICHAEL, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 55 FARNHAM PLACE
 City METAIRIE State LA Zip Code 70005-4007
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) INFORMATION REQUESTED PER BEST EFFORTS Occupation (for Individual) INFORMATION REQUESTED PER BE
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt **10 / 27 / 2016**
Transaction ID : SA11A.452427
 Amount of Each Receipt this Period 250.00
 Memo Item
 CONTRIBUTION

C. WHEATLEY, DIANE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 25292 DARTMOUTH LANE
 City DANA POINT State CA Zip Code 92629-2941
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt **10 / 29 / 2016**
Transaction ID : SA11A.460984
 Amount of Each Receipt this Period 250.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	750.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3938 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. WHEATLEY, PATRICK, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2263 FLORA STREET
 City SAN LUIS OBISPO State CA Zip Code 93401-4613
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 325.00

Date of Receipt 11 / 05 / 2016
Transaction ID : SA11A.478982
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

B. WHEATLEY, PATRICK, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2263 FLORA STREET
 City SAN LUIS OBISPO State CA Zip Code 93401-4613
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 325.00

Date of Receipt 11 / 05 / 2016
Transaction ID : SA11A.478983
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

C. WHEELER, DON, E., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2954 LOS ALISOS DRIVE
 City FALLBROOK State CA Zip Code 92028-3712
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 282.00

Date of Receipt 10 / 24 / 2016
Transaction ID : SA11A.449499
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	75.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3939 OF 4311
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. WHEELER, DON, E., MR.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 2954 LOS ALISOS DRIVE

City FALLBROOK	State CA	Zip Code 92028-3712
-------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
282.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
10	/	24	/	2016

Transaction ID : SA11A.449503

Amount of Each Receipt this Period
25.00

Memo Item CONTRIBUTION

B. WHEELER, DON, E., MR.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 2954 LOS ALISOS DRIVE

City FALLBROOK	State CA	Zip Code 92028-3712
-------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
282.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
11	/	07	/	2016

Transaction ID : SA11A.480357

Amount of Each Receipt this Period
25.00

Memo Item CONTRIBUTION

C. WHEELER, MAX, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1673 COMPTON RD

City FARMINGTON	State UT	Zip Code 84025-3931
--------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) SCM LAW	Occupation (for Individual) ATTORNEY
--	---

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
300.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
11	/	01	/	2016

Transaction ID : SA11A.462827

Amount of Each Receipt this Period
100.00

Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	150.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3940 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. WHEELER, THOMAS, B., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1221 GULF SHORE BLVD,N
 502
 City NAPLES State FL Zip Code 34102-4922
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 5830.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 20 / 2016
Transaction ID : SA11A.442406
 Amount of Each Receipt this Period
 25.00
 Memo Item
 CONTRIBUTION

B. WHEELER, THOMAS, B., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1221 GULF SHORE BLVD,N
 502
 City NAPLES State FL Zip Code 34102-4922
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 5830.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 25 / 2016
Transaction ID : SA11A.448487
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION

C. WHEELER, THOMAS, B., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1221 GULF SHORE BLVD,N
 502
 City NAPLES State FL Zip Code 34102-4922
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 5830.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 30 / 2016
Transaction ID : SA11A.464944
 Amount of Each Receipt this Period
 50.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	175.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3941 OF 4311
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. WHEELER, THOMAS, B., ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1221 GULF SHORE BLVD,N
502

City NAPLES State FL Zip Code 34102-4922

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 5830.00

Date of Receipt
11 / 02 / 2016
Transaction ID : SA11A.465715

Amount of Each Receipt this Period
50.00

Memo Item CONTRIBUTION

B. WHEELER, THOMAS, B., ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1221 GULF SHORE BLVD,N
502

City NAPLES State FL Zip Code 34102-4922

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 5830.00

Date of Receipt
11 / 04 / 2016
Transaction ID : SA11A.472089

Amount of Each Receipt this Period
50.00

Memo Item CONTRIBUTION

C. WHEELER, THOMAS, B., ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1221 GULF SHORE BLVD,N
502

City NAPLES State FL Zip Code 34102-4922

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 5830.00

Date of Receipt
11 / 06 / 2016
Transaction ID : SA11A.480805

Amount of Each Receipt this Period
30.00

Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 130.00

TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3942 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. WHEELER, THOMAS, B., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1221 GULF SHORE BLVD,N
 502
 City NAPLES State FL Zip Code 34102-4922
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 5830.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 06 / 2016
Transaction ID : SA11A.480806
 Amount of Each Receipt this Period
 25.00
 Memo Item
 CONTRIBUTION

B. WHEELER, THOMAS, B., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1221 GULF SHORE BLVD,N
 502
 City NAPLES State FL Zip Code 34102-4922
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 5830.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 06 / 2016
Transaction ID : SA11A.480807
 Amount of Each Receipt this Period
 25.00
 Memo Item
 CONTRIBUTION

C. WHIPPLE, JOHN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 106 ATLANTIC AVE.
 City MARBLEHEAD State MA Zip Code 01945-3048
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 255.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 23 / 2016
Transaction ID : SA11A.446287
 Amount of Each Receipt this Period
 25.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 75.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3943 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. WHIPPLE, JOHN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 106 ATLANTIC AVE.
 City MARBLEHEAD State MA Zip Code 01945-3048
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 255.00

Date of Receipt **10 / 25 / 2016**
Transaction ID : SA11A.451704
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

B. WHIPPLE, JOHN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 106 ATLANTIC AVE.
 City MARBLEHEAD State MA Zip Code 01945-3048
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 255.00

Date of Receipt **10 / 31 / 2016**
Transaction ID : SA11A.458101
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

C. WHIPPLE, JOHN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 106 ATLANTIC AVE.
 City MARBLEHEAD State MA Zip Code 01945-3048
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 255.00

Date of Receipt **11 / 07 / 2016**
Transaction ID : SA11A.480389
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	100.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3944 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
Team Ryan

A. WHIRLEY, CARL, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 327 SHADOWWOOD
City RED OAK State TX Zip Code 75154-1423
FEC ID number of contributing federal political committee. **C**
Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 375.00

Date of Receipt 10 / 28 / 2016
Transaction ID : SA11A.455590
Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

B. WHIRLEY, CARL, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 327 SHADOWWOOD
City RED OAK State TX Zip Code 75154-1423
FEC ID number of contributing federal political committee. **C**
Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 375.00

Date of Receipt 11 / 01 / 2016
Transaction ID : SA11A.462656
Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

C. WHITAKER, WILLIAM, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 4430 DAVIDSON AVE NE
City ATLANTA State GA Zip Code 30319-1128
FEC ID number of contributing federal political committee. **C**
Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 450.00

Date of Receipt 10 / 25 / 2016
Transaction ID : SA11A.447860
Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 325.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3945 OF 4311
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. WHITE, BEVERLY, A., MS.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 9176 SYDNEY LANE

City BRENTWOOD	State TN	Zip Code 37027-8149
-------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1106.33

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		31		2016

Transaction ID : SA11A.464786

Amount of Each Receipt this Period
35.00

Memo Item
CONTRIBUTION

B. WHITE, BEVERLY, A., MS.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 9176 SYDNEY LANE

City BRENTWOOD	State TN	Zip Code 37027-8149
-------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1106.33

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11		02		2016

Transaction ID : SA11A.467142

Amount of Each Receipt this Period
35.17

Memo Item
CONTRIBUTION

C. WHITE, BEVERLY, A., MS.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 9176 SYDNEY LANE

City BRENTWOOD	State TN	Zip Code 37027-8149
-------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
1106.33

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11		04		2016

Transaction ID : SA11A.474219

Amount of Each Receipt this Period
50.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	120.17
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3946 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. WHITEHAIR, CHESTER, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 560 JOHN K DRIVE UNIT 103
 City LONG BEACH State CA Zip Code 90803-6349
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 10 / 26 / 2016
Transaction ID : SA11A.454270
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

B. WHITE, DIANE, , MS.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 376 NASSAU AVENUE
 City MANHASSET State NY Zip Code 11030-2046
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 280.00

Date of Receipt 10 / 24 / 2016
Transaction ID : SA11A.443766
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

C. WHITE, DIANE, , MS.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 376 NASSAU AVENUE
 City MANHASSET State NY Zip Code 11030-2046
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 280.00

Date of Receipt 11 / 03 / 2016
Transaction ID : SA11A.465355
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... 300.00
TOTAL This Period (last page this line number only).....

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3947 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. WHITE, JR, J., , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4555 E MAYO BLVD UNIT 3232
 City PHOENIX State AZ Zip Code 85050-6986
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 27 / 2016
Transaction ID : SA11A.456662
 Amount of Each Receipt this Period
 50.00
 Memo Item
 CONTRIBUTION

B. WHITEHORN, JOAN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 67 LONGVIEW COURT
 City DANVILLE State CA Zip Code 94526-3609
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 355.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 03 / 2016
Transaction ID : SA11A.469050
 Amount of Each Receipt this Period
 55.00
 Memo Item
 CONTRIBUTION

C. WHITELEY , JOHN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4679 MEADOW SPRINGS DRIVE
 City WATKINSVILLE State GA Zip Code 30677-4649
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) MCAA Occupation (for Individual) PHYSICIAN
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 375.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 22 / 2016
Transaction ID : SA11A.446727
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	205.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3948 OF 4311
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. WHITELEY, JOHN, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 4679 MEADOW SPRINGS DRIVE

City WATKINSVILLE	State GA	Zip Code 30677-4649
----------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) MCAA	Occupation (for Individual) PHYSICIAN
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
375.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		31		2016

Transaction ID : SA11A.457677

Amount of Each Receipt this Period
25.00

Memo Item
CONTRIBUTION

B. WHITE, LINDA, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1510 STAR POINT LANE

City NAPLES	State FL	Zip Code 34112-4232
----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		24		2016

Transaction ID : SA11A.446009

Amount of Each Receipt this Period
100.00

Memo Item
CONTRIBUTION

C. WHITESAGE, MICHAEL, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 774 MAYS BOULEVDVARD, SUITE 393

City INCLINE VILLAGE	State NV	Zip Code 89451-9669
-------------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) INFORMATION REQUESTED PER BEST EFFORTS	Occupation (for Individual) INFORMATION REQUESTED PER BES
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
1000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11		02		2016

Transaction ID : SA11A.465059

Amount of Each Receipt this Period
1000.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	1125.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3949 OF 4311
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. WHITE, NORMA, J., ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 10341 LEOLANG AVENUE

City SUNLAND	State CA	Zip Code 91040-3114
-----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
391.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		24		2016

Transaction ID : SA11A.443830

Amount of Each Receipt this Period
53.00

Memo Item
CONTRIBUTION

B. WHITE, NORMA, J., ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 10341 LEOLANG AVENUE

City SUNLAND	State CA	Zip Code 91040-3114
-----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
391.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11		01		2016

Transaction ID : SA11A.461761

Amount of Each Receipt this Period
53.00

Memo Item
CONTRIBUTION

C. WHITE, NORMA, J., ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 10341 LEOLANG AVENUE

City SUNLAND	State CA	Zip Code 91040-3114
-----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
391.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11		02		2016

Transaction ID : SA11A.465073

Amount of Each Receipt this Period
50.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	156.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3950 OF 4311
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. WHITE, NORMA, J., ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 10341 LEOLANG AVENUE

City SUNLAND	State CA	Zip Code 91040-3114
-----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
391.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	10	/	2016

Transaction ID : SA11A.468436

Amount of Each Receipt this Period
60.00

Memo Item
CONTRIBUTION

B. WHITEHURST, ROBERT, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 3004 UNIVERSITY AVE

City COLUMBUS	State GA	Zip Code 31907-2106
------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
400.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	04	/	2016

Transaction ID : SA11A.472808

Amount of Each Receipt this Period
100.00

Memo Item
CONTRIBUTION

C. WHITE, RONALD, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 333 WEST END AVENUE
9A

City NEW YORK	State NY	Zip Code 10023-8128
------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) MORRISON & FOERSTER	Occupation (for Individual) ATTORNEY
--	---

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	31	/	2016

Transaction ID : SA11A.458875

Amount of Each Receipt this Period
250.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	410.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3951 OF 4311
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. WHITEHOUSE, RONALD, R., MR.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 4780 CATTERTON RD

City FREE UNION	State VA	Zip Code 22940-1904
--------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
731.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		24		2016

Transaction ID : SA11A.445970

Amount of Each Receipt this Period
100.00

Memo Item
CONTRIBUTION

B. WHITEHOUSE, RONALD, R., MR.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 4780 CATTERTON RD

City FREE UNION	State VA	Zip Code 22940-1904
--------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
731.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		25		2016

Transaction ID : SA11A.448837

Amount of Each Receipt this Period
100.00

Memo Item
CONTRIBUTION

C. WHITEHOUSE, RONALD, R., MR.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 4780 CATTERTON RD

City FREE UNION	State VA	Zip Code 22940-1904
--------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
731.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11		04		2016

Transaction ID : SA11A.471550

Amount of Each Receipt this Period
100.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	300.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3952 OF 4311
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. WHITE, THOMAS, A., MR.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 7544 LA JOLLA BOULEVARD, APT T215
APT. T215

City LA JOLLA State CA Zip Code 92037-4737

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
225.00

Date of Receipt
10 / 26 / 2016
Transaction ID : SA11A.447648

Amount of Each Receipt this Period
75.00

Memo Item CONTRIBUTION

B. WHITESIDES, WILLIAM, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 900 NORTH TAYLOR STREET
APT 1124

City ARLINGTON State VA Zip Code 22203-1871

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt
10 / 31 / 2016
Transaction ID : SA11A.458789

Amount of Each Receipt this Period
25.00

Memo Item CONTRIBUTION

C. WHITE, WILLIAM, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 6494 SCENIC HWY

City PENSACOLA State FL Zip Code 32504-7811

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) REI Occupation (for Individual) REAL ESTATE

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
250.00

Date of Receipt
10 / 31 / 2016
Transaction ID : SA11A.464593

Amount of Each Receipt this Period
50.00

Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶ 150.00

TOTAL This Period (last page this line number only).....▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3953 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. WHITE, WILLIAM, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 6494 SCENIC HWY
 City PENSACOLA State FL Zip Code 32504-7811
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) REI Occupation (for Individual) REAL ESTATE
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 11 / 02 / 2016
Transaction ID : SA11A.465889
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

B. WHITE, WILLIAM, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 6494 SCENIC HWY
 City PENSACOLA State FL Zip Code 32504-7811
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) REI Occupation (for Individual) REAL ESTATE
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 11 / 07 / 2016
Transaction ID : SA11A.474728
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

C. WHITE, WILLIAM, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 6494 SCENIC HWY
 City PENSACOLA State FL Zip Code 32504-7811
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) REI Occupation (for Individual) REAL ESTATE
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 11 / 07 / 2016
Transaction ID : SA11A.474729
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	150.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3954 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. WHITE, WILLIAM, , , JR.
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3562 MEADOW GLEN CT
 City CLEMMONS State NC Zip Code 27012-3000
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 10 / 28 / 2016
Transaction ID : SA11A.456088
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

B. WHITING, ANN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 15848 SPRINGBROOK CT
 City LAKE OSWEGO State OR Zip Code 97034-3616
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 10 / 26 / 2016
Transaction ID : SA11A.450784
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

C. WHITING, ANN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 15848 SPRINGBROOK CT
 City LAKE OSWEGO State OR Zip Code 97034-3616
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 11 / 04 / 2016
Transaction ID : SA11A.472547
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	125.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3955 OF 4311
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. WHITING, TAMMY, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 1135 S. ROBIN LANE

City MESA	State AZ	Zip Code 85204-5505
--------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) MONTESSORI ED CTR	Occupation (for Individual) ADMINISTRATOR
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	29	/	2016

Transaction ID : SA11A.460987

Amount of Each Receipt this Period
100.00

Memo Item CONTRIBUTION

B. WHITING, TAMMY, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 1135 S. ROBIN LANE

City MESA	State AZ	Zip Code 85204-5505
--------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) MONTESSORI ED CTR	Occupation (for Individual) ADMINISTRATOR
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	04	/	2016

Transaction ID : SA11A.471575

Amount of Each Receipt this Period
100.00

Memo Item CONTRIBUTION

C. WHITLOCK, PEGGY, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 2212 SW SUNSET DR

City PORTLAND	State OR	Zip Code 97239-2068
------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
275.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	24	/	2016

Transaction ID : SA11A.445962

Amount of Each Receipt this Period
25.00

Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	225.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3956 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. WHITLOCK, PEGGY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2212 SW SUNSET DR
 City PORTLAND State OR Zip Code 97239-2068
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 275.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 28 / 2016
Transaction ID : SA11A.461465
 Amount of Each Receipt this Period
 25.00
 Memo Item
 CONTRIBUTION

B. WHITLOCK, PEGGY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2212 SW SUNSET DR
 City PORTLAND State OR Zip Code 97239-2068
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 275.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 02 / 2016
Transaction ID : SA11A.466119
 Amount of Each Receipt this Period
 25.00
 Memo Item
 CONTRIBUTION

C. WHITLOCK, PEGGY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2212 SW SUNSET DR
 City PORTLAND State OR Zip Code 97239-2068
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 275.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 04 / 2016
Transaction ID : SA11A.470570
 Amount of Each Receipt this Period
 25.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	75.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3957 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name A. WHITLOCK, PEGGY, , ,		Date of Receipt MM / DD / YYYY 11 / 04 / 2016 Transaction ID : SA11A.470574
Mailing Address 2212 SW SUNSET DR		Amount of Each Receipt this Period 25.00
City PORTLAND	State OR	Zip Code 97239-2068
FEC ID number of contributing federal political committee. C		<input type="checkbox"/> Memo Item CONTRIBUTION
Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 275.00	

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name B. WHITMAN, HAZEL, , ,		Date of Receipt MM / DD / YYYY 10 / 21 / 2016 Transaction ID : SA11A.444549
Mailing Address 41329 LAGOON CT.		Amount of Each Receipt this Period 20.00
City NORTHVILLE	State MI	Zip Code 48167-1923
FEC ID number of contributing federal political committee. C		<input type="checkbox"/> Memo Item CONTRIBUTION
Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 240.00	

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name C. WHITMAN, HAZEL, , ,		Date of Receipt MM / DD / YYYY 11 / 04 / 2016 Transaction ID : SA11A.473215
Mailing Address 41329 LAGOON CT.		Amount of Each Receipt this Period 25.00
City NORTHVILLE	State MI	Zip Code 48167-1923
FEC ID number of contributing federal political committee. C		<input type="checkbox"/> Memo Item CONTRIBUTION
Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Aggregate Year-to-Date ▼ 240.00	

SUBTOTAL of Receipts This Page (optional).....▶	70.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3958 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. WHITMAN, HAZEL, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 41329 LAGOON CT.
City NORTHVILLE State MI Zip Code 48167-1923
FEC ID number of contributing federal political committee. **C**
Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 240.00

Date of Receipt 11 / 04 / 2016
Transaction ID : SA11A.473780
Amount of Each Receipt this Period 20.00
 Memo Item CONTRIBUTION

B. WHITNEY, WILLIAM, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 72 ELM STREET
City DARTMOUTH State MA Zip Code 02748-3802
FEC ID number of contributing federal political committee. **C**
Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 450.00

Date of Receipt 10 / 27 / 2016
Transaction ID : SA11A.454056
Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

C. WHITNEY, WILLIAM, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 72 ELM STREET
City DARTMOUTH State MA Zip Code 02748-3802
FEC ID number of contributing federal political committee. **C**
Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
Receipt For: Primary General Other (specify)
Aggregate Year-to-Date ▼ 450.00

Date of Receipt 10 / 31 / 2016
Transaction ID : SA11A.458169
Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 170.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3959 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name A. WHITNEY, WILLIAM, , ,		Date of Receipt MM / DD / YYYY 11 / 02 / 2016 Transaction ID : SA11A.466777
Mailing Address 72 ELM STREET		Amount of Each Receipt this Period 100.00
City DARTMOUTH	State MA	Zip Code 02748-3802
FEC ID number of contributing federal political committee. C		<input type="checkbox"/> Memo Item CONTRIBUTION
Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 450.00	

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name B. WHITNEY, WILLIAM, , ,		Date of Receipt MM / DD / YYYY 11 / 02 / 2016 Transaction ID : SA11A.466780
Mailing Address 72 ELM STREET		Amount of Each Receipt this Period 100.00
City DARTMOUTH	State MA	Zip Code 02748-3802
FEC ID number of contributing federal political committee. C		<input type="checkbox"/> Memo Item CONTRIBUTION
Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 450.00	

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name C. WHITTLESEY, STEVEN, , ,		Date of Receipt MM / DD / YYYY 10 / 30 / 2016 Transaction ID : SA11A.460087
Mailing Address 2475A PASEO DE LAS AMERICAS STE 3511		Amount of Each Receipt this Period 147.00
City SAN DIEGO	State CA	Zip Code 92154-7223
FEC ID number of contributing federal political committee. C		<input type="checkbox"/> Memo Item CONTRIBUTION
Name of Employer (for Individual) ENERSYS	Occupation (for Individual) MANAGER	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Aggregate Year-to-Date ▼ 1029.00	

SUBTOTAL of Receipts This Page (optional).....▶	347.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3960 OF 4311
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. WHITTLESEY, STEVEN, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 2475A PASEO DE LAS AMERICAS
STE 3511

City SAN DIEGO State CA Zip Code 92154-7223

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) ENERSYS Occupation (for Individual) MANAGER

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 1029.00

Date of Receipt 11 / 04 / 2016
Transaction ID : SA11A.472011

Amount of Each Receipt this Period 147.00

Memo Item CONTRIBUTION

B. WICE, R. JOYCE, , MR.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 2100 SHILOH VALLEY DRIVE NW APT 12
APT. 1215

City KENNESAW State GA Zip Code 30144-3181

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 800.00

Date of Receipt 10 / 27 / 2016
Transaction ID : SA11A.452318

Amount of Each Receipt this Period 500.00

Memo Item CONTRIBUTION

C. WICHMANN, ROBERT, K., MR.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 326 BAMBERG DRIVE

City BLUFFTON State SC Zip Code 29910-4898

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 700.00

Date of Receipt 11 / 04 / 2016
Transaction ID : SA11A.467508

Amount of Each Receipt this Period 200.00

Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 847.00

TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3961 OF 4311
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. WIELAND, JANE, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1800 RIVIERA LN

City O FALLON	State IL	Zip Code 62269-6696
------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
325.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		28		2016

Transaction ID : SA11A.455990

Amount of Each Receipt this Period
100.00

Memo Item CONTRIBUTION

B. WIELAND, JANE, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1800 RIVIERA LN

City O FALLON	State IL	Zip Code 62269-6696
------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
325.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11		04		2016

Transaction ID : SA11A.470769

Amount of Each Receipt this Period
100.00

Memo Item CONTRIBUTION

C. WIELAND, MARY, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1422 LAMPETER RD.

City LANCASTER	State PA	Zip Code 17602-1534
-------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) HOMEMAKER
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
330.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		25		2016

Transaction ID : SA11A.448199

Amount of Each Receipt this Period
30.00

Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	230.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3962 OF 4311
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. WIELAND, MARY, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1422 LAMPETER RD.

City LANCASTER	State PA	Zip Code 17602-1534
-------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) HOMEMAKER
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
330.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		25		2016

Transaction ID : SA11A.448204

Amount of Each Receipt this Period
30.00

Memo Item
CONTRIBUTION

B. WIELAND, MARY, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1422 LAMPETER RD.

City LANCASTER	State PA	Zip Code 17602-1534
-------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) HOMEMAKER
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
330.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		24		2016

Transaction ID : SA11A.449131

Amount of Each Receipt this Period
30.00

Memo Item
CONTRIBUTION

C. WIELAND, MARY, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1422 LAMPETER RD.

City LANCASTER	State PA	Zip Code 17602-1534
-------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) HOMEMAKER
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
330.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11		02		2016

Transaction ID : SA11A.465967

Amount of Each Receipt this Period
30.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	90.00
TOTAL This Period (last page this line number only).....	

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3963 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. WIELAND, MARY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1422 LAMPETER RD.
 City LANCASTER State PA Zip Code 17602-1534
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) HOMEMAKER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 330.00

Date of Receipt 11 / 02 / 2016
Transaction ID : SA11A.465968
 Amount of Each Receipt this Period 30.00
 Memo Item CONTRIBUTION

B. WIELAND, MARY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1422 LAMPETER RD.
 City LANCASTER State PA Zip Code 17602-1534
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) HOMEMAKER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 330.00

Date of Receipt 11 / 04 / 2016
Transaction ID : SA11A.471726
 Amount of Each Receipt this Period 30.00
 Memo Item CONTRIBUTION

C. WIEMERS, SANDRA, L., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2429 7TH STREET
 City CLAY CENTER State KS Zip Code 67432-1506
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SANDRA WIEMERS Occupation (for Individual) SELF EMPLOYED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 425.00

Date of Receipt 10 / 31 / 2016
Transaction ID : SA11A.457859
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶ 110.00
TOTAL This Period (last page this line number only).....▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3964 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. WIEMERS, SANDRA, L., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2429 7TH STREET
 City CLAY CENTER State KS Zip Code 67432-1506
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SANDRA WIEMERS Occupation (for Individual) SELF EMPLOYED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 425.00

Date of Receipt 10 / 31 / 2016
Transaction ID : SA11A.457861
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

B. WIEMERS, SANDRA, L., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2429 7TH STREET
 City CLAY CENTER State KS Zip Code 67432-1506
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SANDRA WIEMERS Occupation (for Individual) SELF EMPLOYED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 425.00

Date of Receipt 11 / 04 / 2016
Transaction ID : SA11A.473432
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

C. WIEMERS, SANDRA, L., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2429 7TH STREET
 City CLAY CENTER State KS Zip Code 67432-1506
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SANDRA WIEMERS Occupation (for Individual) SELF EMPLOYED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 425.00

Date of Receipt 11 / 07 / 2016
Transaction ID : SA11A.480239
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶ 175.00
TOTAL This Period (last page this line number only).....▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3965 OF 4311
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. WIENS, HAROLD, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 8565 136TH ST N

City HUGO State MN Zip Code 55038-9135

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt 10 / 21 / 2016
Transaction ID : SA11A.444216

Amount of Each Receipt this Period 100.00

Memo Item CONTRIBUTION

B. WIENS, HAROLD, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 8565 136TH ST N

City HUGO State MN Zip Code 55038-9135

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt 10 / 21 / 2016
Transaction ID : SA11A.444217

Amount of Each Receipt this Period 100.00

Memo Item CONTRIBUTION

C. WIESE, JOHN, D., MR.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 208 PARKSIDE DRIVE

City PALO ALTO State CA Zip Code 94306-4530

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 750.00

Date of Receipt 10 / 29 / 2016
Transaction ID : SA11A.460478

Amount of Each Receipt this Period 250.00

Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 450.00

TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3966 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. WIESTER, GEORGIA, L., MRS.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 7760 SANTA ROSA RD

City BUELLTON	State CA	Zip Code 93427-9421
------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
2231.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	01	/	2016

Transaction ID : SA11A.467184

Amount of Each Receipt this Period
250.00

Memo Item CONTRIBUTION

B. WIESTER, GEORGIA, L., MRS.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 7760 SANTA ROSA RD

City BUELLTON	State CA	Zip Code 93427-9421
------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
2231.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	01	/	2016

Transaction ID : SA11A.467199

Amount of Each Receipt this Period
50.00

Memo Item CONTRIBUTION

C. WILBERT, DAVE, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 11825 SURFBIRD CIRCLE

City JACKSONVILLE	State FL	Zip Code 32256-9636
----------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
225.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	21	/	2016

Transaction ID : SA11A.444318

Amount of Each Receipt this Period
50.00

Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	350.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3967 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. WILBERT, DAVE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 11825 SURFBIRD CIRCLE
 City JACKSONVILLE State FL Zip Code 32256-9636
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 225.00

Date of Receipt 10 / 21 / 2016
Transaction ID : SA11A.444331
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

B. WILBERT, MARILYN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 33003 HEES ST
 City LIVONIA State MI Zip Code 48150-3722
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 10 / 27 / 2016
Transaction ID : SA11A.456944
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

C. WILBERT, MARILYN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 33003 HEES ST
 City LIVONIA State MI Zip Code 48150-3722
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 10 / 29 / 2016
Transaction ID : SA11A.461126
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	100.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3968 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. WILBERT, MARILYN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 33003 HEES ST
 City LIVONIA State MI Zip Code 48150-3722
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt **11 / 04 / 2016**
Transaction ID : SA11A.471189
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

B. WILBERT, MARILYN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 33003 HEES ST
 City LIVONIA State MI Zip Code 48150-3722
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt **11 / 04 / 2016**
Transaction ID : SA11A.471413
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

C. WILBUR, RICHARD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO BOX 3730
 City YUBA CITY State CA Zip Code 95992-3730
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) INFORMATION REQUESTED PER BEST EFFORTS Occupation (for Individual) INFORMATION REQUESTED PER BEST EFFORTS
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt **11 / 01 / 2016**
Transaction ID : SA11A.461839
 Amount of Each Receipt this Period 500.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	550.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3969 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. WILCOX, STEPHEN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2 ACCORD COURT
 City POTOMAC State MD Zip Code 20854-4339
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) PARKWOOD HOLDING COMPANY Occupation (for Individual) MANAGER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 2000.00

Date of Receipt 10 / 27 / 2016
Transaction ID : SA11A.452694
 Amount of Each Receipt this Period 1000.00
 Memo Item CONTRIBUTION

B. WILEY, DOUGLAS, M., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 295 HUCKLEBERRY LANE
 City SAVANNAH State TN Zip Code 38372-7913
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 11 / 03 / 2016
Transaction ID : SA11A.465522
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

C. WILEY, RICHARD, E., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1776 K ST NW
 City WASHINGTON State DC Zip Code 20006-2304
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) WILEY REIN LLP Occupation (for Individual) PARTNER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt 11 / 03 / 2016
Transaction ID : SA11A.465182
 Amount of Each Receipt this Period 1000.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	2100.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3970 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
Team Ryan

A. WILFORD, DAN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 206 KESWICK CT.
 City SUGAR LAND State TX Zip Code 77478-3950
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 600.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 26 / 2016
Transaction ID : SA11A.450492
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION

B. WILFORD, DAN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 206 KESWICK CT.
 City SUGAR LAND State TX Zip Code 77478-3950
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 600.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 26 / 2016
Transaction ID : SA11A.450495
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION

C. WILFORD, DAN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 206 KESWICK CT.
 City SUGAR LAND State TX Zip Code 77478-3950
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 600.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 28 / 2016
Transaction ID : SA11A.455999
 Amount of Each Receipt this Period
 50.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	250.00
TOTAL This Period (last page this line number only).....	

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3971 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
Team Ryan

A. WILFORD, DAN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 206 KESWICK CT.
 City SUGAR LAND State TX Zip Code 77478-3950
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 600.00

Date of Receipt
 11 / 04 / 2016
Transaction ID : SA11A.473260
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

B. WILHELM, JOSEPH, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 884 PEBBLEBROOK
 City EAST LANSING State MI Zip Code 48823-2164
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) LANSING OPHTHALMOLOGY Occupation (for Individual) OPHTHALMOLOGIST
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1450.00

Date of Receipt
 10 / 30 / 2016
Transaction ID : SA11A.459410
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

C. WILHELM, JOSEPH, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 884 PEBBLEBROOK
 City EAST LANSING State MI Zip Code 48823-2164
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) LANSING OPHTHALMOLOGY Occupation (for Individual) OPHTHALMOLOGIST
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1450.00

Date of Receipt
 10 / 30 / 2016
Transaction ID : SA11A.459411
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	250.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3972 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. WILHELM, JOSEPH, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 884 PEBBLEBROOK
 City EAST LANSING State MI Zip Code 48823-2164
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) LANSING OPHTHALMOLOGY Occupation (for Individual) OPHTHALMOLOGIST
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1450.00

Date of Receipt 10 / 30 / 2016
Transaction ID : SA11A.460305
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

B. WILHELM, JOSEPH, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 884 PEBBLEBROOK
 City EAST LANSING State MI Zip Code 48823-2164
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) LANSING OPHTHALMOLOGY Occupation (for Individual) OPHTHALMOLOGIST
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1450.00

Date of Receipt 11 / 04 / 2016
Transaction ID : SA11A.471104
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

C. WILHELM, JOSEPH, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 884 PEBBLEBROOK
 City EAST LANSING State MI Zip Code 48823-2164
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) LANSING OPHTHALMOLOGY Occupation (for Individual) OPHTHALMOLOGIST
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1450.00

Date of Receipt 11 / 06 / 2016
Transaction ID : SA11A.477168
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 250.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3973 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. WILHELM, JOSEPH, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 884 PEBBLEBROOK
 City EAST LANSING State MI Zip Code 48823-2164
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) LANSING OPHTHALMOLOGY Occupation (for Individual) OPHTHALMOLOGIST
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1450.00

Date of Receipt 11 / 07 / 2016
Transaction ID : SA11A.480505
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

B. WILKE, ROBERT, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 324STONEBRIDGE BLVD
 City SAINT PAUL State MN Zip Code 55105-
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt 10 / 31 / 2016
Transaction ID : SA11A.459124
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

C. WILKE, ROBERT, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 324STONEBRIDGE BLVD
 City SAINT PAUL State MN Zip Code 55105-
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt 11 / 04 / 2016
Transaction ID : SA11A.471134
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 600.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3974 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. WILKINS, BARRY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1222 LAKE ROYALE
 City LOUISBURG State NC Zip Code 27549-7449
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 225.00

Date of Receipt 10 / 20 / 2016
Transaction ID : SA11A.444805
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

B. WILKINS, DAVID, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 624 SMITHVILLE CHURCH ROAD
 City WARNER ROBINS State GA Zip Code 31088-6433
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 350.00

Date of Receipt 10 / 27 / 2016
Transaction ID : SA11A.456534
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

C. WILKINS, DAVID, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 624 SMITHVILLE CHURCH ROAD
 City WARNER ROBINS State GA Zip Code 31088-6433
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 350.00

Date of Receipt 10 / 27 / 2016
Transaction ID : SA11A.456539
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 75.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3975 OF 4311
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. WILKINS, DAVID, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 624 SMITHVILLE CHURCH ROAD
 City WARNER ROBINS State GA Zip Code 31088-6433
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 350.00

Date of Receipt 11 / 07 / 2016
Transaction ID : SA11A.480228
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

B. WILKINSON, JULIA, M., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3939 BEE CAVE ROAD BUILDING C-100
 City AUSTIN State TX Zip Code 78746-6431
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) INFORMATION REQUESTED PER BEST EFFORTS Occupation (for Individual) INFORMATION REQUESTED PER BE
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 10400.00

Date of Receipt 10 / 31 / 2016
Transaction ID : SA11A.457302
 Amount of Each Receipt this Period 10400.00
 Memo Item CONTRIBUTION

C. WILKINSON, MICHAEL, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 900 SOUTHAMPTON RD 47
 City BENICIA State CA Zip Code 94510-1843
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 330.00

Date of Receipt 10 / 20 / 2016
Transaction ID : SA11A.444867
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶ 10700.00
TOTAL This Period (last page this line number only).....▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3976 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. WILKINSON, MICHAEL, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 900 SOUTHAMPTON RD
 47
 City BENICIA State CA Zip Code 94510-1843
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 330.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 31 / 2016
Transaction ID : SA11A.464821
 Amount of Each Receipt this Period
 25.00
 Memo Item
 CONTRIBUTION

B. WILKINSON, MICHAEL, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 900 SOUTHAMPTON RD
 47
 City BENICIA State CA Zip Code 94510-1843
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 330.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 31 / 2016
Transaction ID : SA11A.464822
 Amount of Each Receipt this Period
 25.00
 Memo Item
 CONTRIBUTION

C. WILKS, JOHN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4475 SANTA CRUZ AVE
 City SAN DIEGO State CA Zip Code 92107-3616
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 24 / 2016
Transaction ID : SA11A.449494
 Amount of Each Receipt this Period
 250.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 300.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3977 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. WILLBANKS, DAVID, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1316 HODGE COURT
 City MORRISTOWN State TN Zip Code 37814-6155
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) HAMBLÉN PEDIATRIC ASSOCIATES Occupation (for Individual) PHYSICIAN
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 31 / 2016
Transaction ID : SA11A.464040
 Amount of Each Receipt this Period
 25.00
 Memo Item
 CONTRIBUTION

B. WILLIAMS, ADELE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 6341 E PLAYER AVENUE CIRCLE
 City MESA State AZ Zip Code 85215-
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 235.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 25 / 2016
Transaction ID : SA11A.447500
 Amount of Each Receipt this Period
 30.00
 Memo Item
 CONTRIBUTION

C. WILLIAMS, ANNE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1410 SHERIDAN ROAD, APT 2B
 City WILMETTE State IL Zip Code 60091-1840
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 02 / 2016
Transaction ID : SA11A.465056
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	155.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3978 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
Team Ryan

A. WILLIAMS, BETH, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1596 HIGHLAND GLEN PL
 City MCLEAN State VA Zip Code 22101-4159
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) KIRKLAND & ELLIS LLP Occupation (for Individual) ATTORNEY
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt **10 / 26 / 2016**
Transaction ID : SA11A.449881
 Amount of Each Receipt this Period 500.00
 Memo Item
CONTRIBUTION

B. WILLIAMS, BYRON, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 40 PELICAN POINT DR
 City NEWPORT COAST State CA Zip Code 92657-2006
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) CWSWG INC Occupation (for Individual) CEO
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1450.00

Date of Receipt **10 / 20 / 2016**
Transaction ID : SA11A.442217
 Amount of Each Receipt this Period 100.00
 Memo Item
CONTRIBUTION

C. WILLIAMS, BYRON, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 40 PELICAN POINT DR
 City NEWPORT COAST State CA Zip Code 92657-2006
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) CWSWG INC Occupation (for Individual) CEO
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1450.00

Date of Receipt **10 / 31 / 2016**
Transaction ID : SA11A.464271
 Amount of Each Receipt this Period 100.00
 Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	700.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3979 OF 4311
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. WILLIAMS, BYRON, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 40 PELICAN POINT DR

City NEWPORT COAST	State CA	Zip Code 92657-2006
-----------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) CWSWG INC	Occupation (for Individual) CEO
--	------------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1450.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		31		2016

Transaction ID : SA11A.464284

Amount of Each Receipt this Period
50.00

Memo Item
CONTRIBUTION

B. WILLIAMS, C. KENNETH, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 21 PINERIDGE

City MAGNOLIA	State AR	Zip Code 71753-2279
------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) INFORMATION REQUESTED PER BEST EFFORTS	Occupation (for Individual) INFORMATION REQUESTED PER BE
---	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11		01		2016

Transaction ID : SA11A.461844

Amount of Each Receipt this Period
1000.00

Memo Item
CONTRIBUTION

C. WILLIAMS, CATHERINE, M., ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 2323 WYOMING AVE NW

City WASHINGTON	State DC	Zip Code 20008-1642
--------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) INFORMATION REQUESTED PER BEST EFFORTS	Occupation (for Individual) INFORMATION REQUESTED PER BE
---	---

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
1000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		28		2016

Transaction ID : SA11A.449672

Amount of Each Receipt this Period
1000.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	2050.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3980 OF 4311
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. WILLIAMS, DAVID, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 2001 HALLUM ST

City CLOVIS State NM Zip Code 88101-8685

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) WILLIAMS INSURANCE LLC Occupation (for Individual) INSURANCE AGENT

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 455.00

Date of Receipt 11 / 04 / 2016
Transaction ID : SA11A.474110

Amount of Each Receipt this Period 100.00

Memo Item CONTRIBUTION

B. WILLIAMSON, DAVID, B., ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address PO BOX 7088

City NORTH AUGUSTA State SC Zip Code 29861-7088

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NAT NUCLEAR SECURITY ADMIN Occupation (for Individual) ENGINEER

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 595.00

Date of Receipt 10 / 23 / 2016
Transaction ID : SA11A.446448

Amount of Each Receipt this Period 25.00

Memo Item CONTRIBUTION

C. WILLIAMSON, DAVID, B., ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address PO BOX 7088

City NORTH AUGUSTA State SC Zip Code 29861-7088

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NAT NUCLEAR SECURITY ADMIN Occupation (for Individual) ENGINEER

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 595.00

Date of Receipt 10 / 23 / 2016
Transaction ID : SA11A.446455

Amount of Each Receipt this Period 100.00

Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 225.00

TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3981 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. WILLIAMSON, DAVID, B., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO BOX 7088
 City NORTH AUGUSTA State SC Zip Code 29861-7088
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NAT NUCLEAR SECURITY ADMIN Occupation (for Individual) ENGINEER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 595.00

Date of Receipt 10 / 24 / 2016
Transaction ID : SA11A.449522
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

B. WILLIAMSON, DAVID, B., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO BOX 7088
 City NORTH AUGUSTA State SC Zip Code 29861-7088
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NAT NUCLEAR SECURITY ADMIN Occupation (for Individual) ENGINEER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 595.00

Date of Receipt 11 / 06 / 2016
Transaction ID : SA11A.477842
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

C. WILLIAMS, DONALD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address P O BOX 80892
 City CONYERS State GA Zip Code 30013-8892
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 1250.00

Date of Receipt 10 / 26 / 2016
Transaction ID : SA11A.451379
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 375.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3982 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
-----------------------------	-----------------------------	-----------------------------

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NAME OF COMMITTEE (In Full)
Team Ryan

A. WILLIAMS, DONALD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address P O BOX 80892
 City CONYERS State GA Zip Code 30013-8892
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1250.00

Date of Receipt
 11 / 02 / 2016
Transaction ID : SA11A.466737
 Amount of Each Receipt this Period
 250.00
 Memo Item
 CONTRIBUTION

B. WILLIAMS, DONALD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address P O BOX 80892
 City CONYERS State GA Zip Code 30013-8892
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1250.00

Date of Receipt
 11 / 02 / 2016
Transaction ID : SA11A.466740
 Amount of Each Receipt this Period
 250.00
 Memo Item
 CONTRIBUTION

C. WILLIAMS, DONALD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address P O BOX 80892
 City CONYERS State GA Zip Code 30013-8892
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1250.00

Date of Receipt
 11 / 02 / 2016
Transaction ID : SA11A.466742
 Amount of Each Receipt this Period
 250.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	750.00
TOTAL This Period (last page this line number only).....	

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3983 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name A. WILLIAMS, EMMA, , ,			Date of Receipt <table border="1"> <tr> <td>M M</td> <td>/</td> <td>D D</td> <td>/</td> <td>Y Y Y Y</td> </tr> <tr> <td>11</td> <td></td> <td>04</td> <td></td> <td>2016</td> </tr> </table>	M M	/	D D	/	Y Y Y Y	11		04		2016
M M	/	D D	/	Y Y Y Y									
11		04		2016									
Mailing Address 2601 WEST 82ND STREET			Transaction ID : SA11A.471758										
City INGLEWOOD	State CA	Zip Code 90305-1428	Amount of Each Receipt this Period <table border="1"> <tr> <td>100.00</td> </tr> </table>	100.00									
100.00													
FEC ID number of contributing federal political committee. C			<input type="checkbox"/> Memo Item CONTRIBUTION										
Name of Employer (for Individual) U.S. GOVERNMENT		Occupation (for Individual) OWNER/BNSF RR											
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ <table border="1"> <tr> <td>300.00</td> </tr> </table>		300.00										
300.00													

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name B. WILLIAMSON, FRED, , ,			Date of Receipt <table border="1"> <tr> <td>M M</td> <td>/</td> <td>D D</td> <td>/</td> <td>Y Y Y Y</td> </tr> <tr> <td>10</td> <td></td> <td>21</td> <td></td> <td>2016</td> </tr> </table>	M M	/	D D	/	Y Y Y Y	10		21		2016
M M	/	D D	/	Y Y Y Y									
10		21		2016									
Mailing Address 7833 VALDERRAMA WAY			Transaction ID : SA11A.444180										
City LAKEWOOD RANCH	State FL	Zip Code 34202-5651	Amount of Each Receipt this Period <table border="1"> <tr> <td>250.00</td> </tr> </table>	250.00									
250.00													
FEC ID number of contributing federal political committee. C			<input type="checkbox"/> Memo Item CONTRIBUTION										
Name of Employer (for Individual) NONE		Occupation (for Individual) RETIRED											
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ <table border="1"> <tr> <td>581.00</td> </tr> </table>		581.00										
581.00													

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name C. WILLIAMSON, FRED, , ,			Date of Receipt <table border="1"> <tr> <td>M M</td> <td>/</td> <td>D D</td> <td>/</td> <td>Y Y Y Y</td> </tr> <tr> <td>10</td> <td></td> <td>21</td> <td></td> <td>2016</td> </tr> </table>	M M	/	D D	/	Y Y Y Y	10		21		2016
M M	/	D D	/	Y Y Y Y									
10		21		2016									
Mailing Address 7833 VALDERRAMA WAY			Transaction ID : SA11A.444192										
City LAKEWOOD RANCH	State FL	Zip Code 34202-5651	Amount of Each Receipt this Period <table border="1"> <tr> <td>100.00</td> </tr> </table>	100.00									
100.00													
FEC ID number of contributing federal political committee. C			<input type="checkbox"/> Memo Item CONTRIBUTION										
Name of Employer (for Individual) NONE		Occupation (for Individual) RETIRED											
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Aggregate Year-to-Date ▼ <table border="1"> <tr> <td>581.00</td> </tr> </table>		581.00										
581.00													

SUBTOTAL of Receipts This Page (optional).....▶	<table border="1"> <tr> <td>450.00</td> </tr> </table>	450.00
450.00		
TOTAL This Period (last page this line number only).....▶	<table border="1"> <tr> <td></td> </tr> </table>	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3984 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. WILLIAMSON, FRED, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 7833 VALDERRAMA WAY
 City LAKEWOOD RANCH State FL Zip Code 34202-5651
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 581.00

Date of Receipt 10 / 21 / 2016
Transaction ID : SA11A.444193
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

B. WILLIFORD, GAYLE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 6453 BAYOU GLEN RD.
 City HOUSTON State TX Zip Code 77057-1068
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt 10 / 27 / 2016
Transaction ID : SA11A.453892
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

C. WILLIFORD, GAYLE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 6453 BAYOU GLEN RD.
 City HOUSTON State TX Zip Code 77057-1068
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt 11 / 04 / 2016
Transaction ID : SA11A.474254
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	200.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3985 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. WILLIFORD, GAYLE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 6453 BAYOU GLEN RD.
 City HOUSTON State TX Zip Code 77057-1068
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt 11 / 07 / 2016
Transaction ID : SA11A.475742
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

B. WILLIFORD, GAYLE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 6453 BAYOU GLEN RD.
 City HOUSTON State TX Zip Code 77057-1068
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt 11 / 07 / 2016
Transaction ID : SA11A.475755
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

C. WILLIFORD, GAYLE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 6453 BAYOU GLEN RD.
 City HOUSTON State TX Zip Code 77057-1068
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt 11 / 05 / 2016
Transaction ID : SA11A.479096
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	150.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3986 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
Team Ryan

A. WILLIFORD, GAYLE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 6453 BAYOU GLEN RD.
 City HOUSTON State TX Zip Code 77057-1068
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt
 11 / 05 / 2016
Transaction ID : SA11A.479109
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

B. WILLIFORD, GAYLE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 6453 BAYOU GLEN RD.
 City HOUSTON State TX Zip Code 77057-1068
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt
 11 / 05 / 2016
Transaction ID : SA11A.479111
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

C. WILLIAMS, GENELLE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5430 SHETLAND CT.
 City LITTLETON State CO Zip Code 80130-3902
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 354.00

Date of Receipt
 10 / 30 / 2016
Transaction ID : SA11A.460129
 Amount of Each Receipt this Period 59.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	109.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3987 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. WILLIAMS, GENELLE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5430 SHETLAND CT.
 City LITTLETON State CO Zip Code 80130-3902
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 354.00

Date of Receipt **11 / 04 / 2016**
Transaction ID : SA11A.472961
 Amount of Each Receipt this Period 59.00
 Memo Item CONTRIBUTION

B. WILLIAMS, GERALD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1107 CANNON VALLEY DRIVE
 City NORTHFIELD State MN Zip Code 55057-1303
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 280.00

Date of Receipt **10 / 26 / 2016**
Transaction ID : SA11A.450511
 Amount of Each Receipt this Period 30.00
 Memo Item CONTRIBUTION

C. WILLIAMS, GERALD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1107 CANNON VALLEY DRIVE
 City NORTHFIELD State MN Zip Code 55057-1303
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 280.00

Date of Receipt **10 / 31 / 2016**
Transaction ID : SA11A.458066
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶ 114.00
TOTAL This Period (last page this line number only).....▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3988 OF 4311
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. WILLIAMS, GERALD, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1107 CANNON VALLEY DRIVE

City NORTHFIELD	State MN	Zip Code 55057-1303
--------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
280.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	02	/	2016

Transaction ID : SA11A.466397

Amount of Each Receipt this Period
25.00

Memo Item CONTRIBUTION

B. WILLIS, H., , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 210 CORINTHIAN

City AUSSTIN	State TX	Zip Code 78734-4311
-----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	28	/	2016

Transaction ID : SA11A.455600

Amount of Each Receipt this Period
100.00

Memo Item CONTRIBUTION

C. WILLIS, H., , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 210 CORINTHIAN

City AUSSTIN	State TX	Zip Code 78734-4311
-----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	31	/	2016

Transaction ID : SA11A.459068

Amount of Each Receipt this Period
100.00

Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	225.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3989 OF 4311
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/>	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. WILLIAMS, J, F., , III
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 3328 W FRANKLIN STREET

City RICHMOND	State VA	Zip Code 23221-1514
------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) INFORMATION REQUESTED PER BEST EFFORTS	Occupation (for Individual) INFORMATION REQUESTED PER BE
---	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	20	/	2016

Transaction ID : SA11A.433516

Amount of Each Receipt this Period
500.00

Memo Item
CONTRIBUTION

B. WILLIAMS, JEAN, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 32005 SCAPPOOSE VERNONIA HIGHWAY

City SCAPPOOSE	State OR	Zip Code 97056-2318
-------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
300.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	01	/	2016

Transaction ID : SA11A.461648

Amount of Each Receipt this Period
300.00

Memo Item
CONTRIBUTION

C. WILLIAMSON, JOHN, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 608 EUCLID AVENUE

City MOUNTAIN BRK	State AL	Zip Code 35213-2518
----------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
300.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	06	/	2016

Transaction ID : SA11A.477391

Amount of Each Receipt this Period
100.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	900.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3990 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. WILLIS, JONATHAN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5021 MAGNOLIA BAY CIR
 City PALM BEACH GARDENS State FL Zip Code 33418-6732
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 950.00

Date of Receipt 10 / 31 / 2016
Transaction ID : SA11A.458004
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

B. WILLIS, JONATHAN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5021 MAGNOLIA BAY CIR
 City PALM BEACH GARDENS State FL Zip Code 33418-6732
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 950.00

Date of Receipt 11 / 07 / 2016
Transaction ID : SA11A.474663
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

C. WILLIS, JONATHAN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5021 MAGNOLIA BAY CIR
 City PALM BEACH GARDENS State FL Zip Code 33418-6732
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 950.00

Date of Receipt 11 / 07 / 2016
Transaction ID : SA11A.474689
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	750.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3991 OF 4311
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. WILLINGHAM, JOSEPH, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 2512 ETNA ST.

City BERKELEY	State CA	Zip Code 94704-3115
------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1300.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		25		2016

Transaction ID : SA11A.448299

Amount of Each Receipt this Period
500.00

Memo Item
CONTRIBUTION

B. WILLINGHAM, JOSEPH, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 2512 ETNA ST.

City BERKELEY	State CA	Zip Code 94704-3115
------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1300.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		25		2016

Transaction ID : SA11A.448329

Amount of Each Receipt this Period
250.00

Memo Item
CONTRIBUTION

C. WILLINGHAM, JOSEPH, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 2512 ETNA ST.

City BERKELEY	State CA	Zip Code 94704-3115
------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
1300.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		25		2016

Transaction ID : SA11A.448331

Amount of Each Receipt this Period
250.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	1000.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3992 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. WILLIAMS, KATHLEEN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 502 NW 107TH STREET
 City VANCOUVER State WA Zip Code 98685-4325
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 305.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 20 / 2016
Transaction ID : SA11A.442118
 Amount of Each Receipt this Period
 25.00
 Memo Item
 CONTRIBUTION

B. WILLIAMS, KATHLEEN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 502 NW 107TH STREET
 City VANCOUVER State WA Zip Code 98685-4325
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 305.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 28 / 2016
Transaction ID : SA11A.45277
 Amount of Each Receipt this Period
 25.00
 Memo Item
 CONTRIBUTION

C. WILLIAMS, KATHLEEN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 502 NW 107TH STREET
 City VANCOUVER State WA Zip Code 98685-4325
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 305.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 28 / 2016
Transaction ID : SA11A.45286
 Amount of Each Receipt this Period
 25.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	75.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3993 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
Team Ryan

A. WILLIAMS, KATHLEEN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 502 NW 107TH STREET
 City VANCOUVER State WA Zip Code 98685-4325
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 305.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 04 / 2016
Transaction ID : SA11A.470401
 Amount of Each Receipt this Period
 25.00
 Memo Item CONTRIBUTION

B. WILLIAMS, LEAH, A., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 322 HORSESHOE RD``
 City MORGANTOWN State WV Zip Code 26508-5308
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 860.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 27 / 2016
Transaction ID : SA11A.453940
 Amount of Each Receipt this Period
 50.00
 Memo Item CONTRIBUTION

C. WILLIAMS, LEAH, A., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 322 HORSESHOE RD``
 City MORGANTOWN State WV Zip Code 26508-5308
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 860.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 31 / 2016
Transaction ID : SA11A.457713
 Amount of Each Receipt this Period
 25.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	100.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3994 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. WILLIAMS, LEAH, A., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 322 HORSESHOE RD``
 City MORGANTOWN State WV Zip Code 26508-5308
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 860.00

Date of Receipt 10 / 31 / 2016
Transaction ID : SA11A.457731
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

B. WILLIAMS, LEAH, A., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 322 HORSESHOE RD``
 City MORGANTOWN State WV Zip Code 26508-5308
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 860.00

Date of Receipt 11 / 04 / 2016
Transaction ID : SA11A.471554
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

C. WILLIAMS, LEAH, A., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 322 HORSESHOE RD``
 City MORGANTOWN State WV Zip Code 26508-5308
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 860.00

Date of Receipt 11 / 04 / 2016
Transaction ID : SA11A.473767
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	125.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3995 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. WILLIAMS, LETICIA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2024 FISHERMENS BEND
 City PALM HARBOR State FL Zip Code 34685-2355
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) KNOWBE4 INC Occupation (for Individual) VP SALES
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 11 / 03 / 2016
Transaction ID : SA11A.465397
 Amount of Each Receipt this Period 200.00
 Memo Item CONTRIBUTION

B. WILLIAMS, LINDA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4678 E. FOOTHILL DR.
 City PARADISE VALLEY State AZ Zip Code 85253-2916
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) NETWORK MRKG
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 11 / 04 / 2016
Transaction ID : SA11A.473928
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

C. WILLIS, LLOY, T., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 12039 STONE CROSSING CIRCLE
 City TAMPA State FL Zip Code 33635-6228
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) ACSI Occupation (for Individual) CONTRACTOR
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 475.00

Date of Receipt 10 / 20 / 2016
Transaction ID : SA11A.442164
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	275.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3996 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. WILLIS, LLOY, T., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 12039 STONE CROSSING CIRCLE
 City TAMPA State FL Zip Code 33635-6228
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) ACSI Occupation (for Individual) CONTRACTOR
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 475.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 20 / 2016
Transaction ID : SA11A.442165
 Amount of Each Receipt this Period
 50.00
 Memo Item
 CONTRIBUTION

B. WILLIS, LLOY, T., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 12039 STONE CROSSING CIRCLE
 City TAMPA State FL Zip Code 33635-6228
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) ACSI Occupation (for Individual) CONTRACTOR
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 475.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 04 / 2016
Transaction ID : SA11A.470416
 Amount of Each Receipt this Period
 25.00
 Memo Item
 CONTRIBUTION

C. WILLIS, LLOY, T., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 12039 STONE CROSSING CIRCLE
 City TAMPA State FL Zip Code 33635-6228
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) ACSI Occupation (for Individual) CONTRACTOR
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 475.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 04 / 2016
Transaction ID : SA11A.470417
 Amount of Each Receipt this Period
 25.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	100.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3997 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. WILLIAMS, LOUIS, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 25 AUTUMN OAKS
 City AUSTIN State TX Zip Code 78738-1412
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 10 / 31 / 2016
Transaction ID : SA11A.457504
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

B. WILLIS, MARK, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 11 EAST WEATOGUE ST.
 City SIMSBURY State CT Zip Code 06070-2501
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 10 / 23 / 2016
Transaction ID : SA11A.446388
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

C. WILLIAMSON, MICHAEL, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1205 PALM VIEW AVE.
 City BELLEAIR State FL Zip Code 33756-1019
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 600.00

Date of Receipt 11 / 02 / 2016
Transaction ID : SA11A.465971
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	600.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3998 OF 4311
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
Team Ryan

A. WILLIAMSON, MICHAEL, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1205 PALM VIEW AVE.

City BELLEAIR	State FL	Zip Code 33756-1019
------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
600.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	02	/	2016

Transaction ID : SA11A.465975

Amount of Each Receipt this Period
250.00

Memo Item
CONTRIBUTION

B. WILLIAMS, PAM, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 23598 LAKE VALLEY DRIVE

City MORENO VALLEY	State CA	Zip Code 92557-3950
-----------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) RICKY STERLING	Occupation (for Individual) IHSS
---	-------------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
645.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	27	/	2016

Transaction ID : SA11A.452673

Amount of Each Receipt this Period
100.00

Memo Item
CONTRIBUTION

C. WILLIAMS, PAM, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 23598 LAKE VALLEY DRIVE

City MORENO VALLEY	State CA	Zip Code 92557-3950
-----------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) RICKY STERLING	Occupation (for Individual) IHSS
---	-------------------------------------

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
645.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	27	/	2016

Transaction ID : SA11A.452675

Amount of Each Receipt this Period
100.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	450.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3999 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
Team Ryan

A. WILLIAMS, PAMELA, B., MRS.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 272 OAKWOOD ROAD
 City ENGLEWOOD State NJ Zip Code 07631-2026
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 900.00

Date of Receipt
 11 / 07 / 2016
Transaction ID : SA11A.474985
 Amount of Each Receipt this Period
 50.00
 Memo Item
 CONTRIBUTION

B. WILLIAMS, PAMELA, B., MRS.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 272 OAKWOOD ROAD
 City ENGLEWOOD State NJ Zip Code 07631-2026
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 900.00

Date of Receipt
 11 / 06 / 2016
Transaction ID : SA11A.480868
 Amount of Each Receipt this Period
 50.00
 Memo Item
 CONTRIBUTION

C. WILLIAMS, PAMELA, B., MRS.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 272 OAKWOOD ROAD
 City ENGLEWOOD State NJ Zip Code 07631-2026
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 900.00

Date of Receipt
 11 / 06 / 2016
Transaction ID : SA11A.480887
 Amount of Each Receipt this Period
 50.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	150.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 4000 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. WILLIAMS, PETER, V., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 9338 CARRIAGE RUN CIRCLE
 City LOVELAND State OH Zip Code 45140-5552
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 285.00

Date of Receipt 10 / 22 / 2016
Transaction ID : SA11A.446678
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

B. WILLIAMS, REBECCA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 105 REDBUDDR
 City CLINTON State TN Zip Code 37716-3305
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt 10 / 22 / 2016
Transaction ID : SA11A.446980
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

C. WILLIAMS, REBECCA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 105 REDBUDDR
 City CLINTON State TN Zip Code 37716-3305
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt 11 / 04 / 2016
Transaction ID : SA11A.472812
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 225.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 4001 OF 4311
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name A. WILLIAMS, RICHARD, , ,		Date of Receipt M M M / D D D / Y Y Y Y Y Y 10 / 24 / 2016
Mailing Address 401 N MICHIGAN AVE. SUITE 1930		Transaction ID : SA11A.446088
City CHICAGO	State IL	Zip Code 60611-5287
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 25.00
Name of Employer (for Individual) KECK & ASSOCKATES. P.C.	Occupation (for Individual) ATTORNEY	<input type="checkbox"/> Memo Item CONTRIBUTION
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name B. WILLIAMS, RICHARD, , ,		Date of Receipt M M M / D D D / Y Y Y Y Y Y 10 / 27 / 2016
Mailing Address 401 N MICHIGAN AVE. SUITE 1930		Transaction ID : SA11A.453981
City CHICAGO	State IL	Zip Code 60611-5287
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 25.00
Name of Employer (for Individual) KECK & ASSOCKATES. P.C.	Occupation (for Individual) ATTORNEY	<input type="checkbox"/> Memo Item CONTRIBUTION
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name C. WILLIAMS, RICHARD, , ,		Date of Receipt M M M / D D D / Y Y Y Y Y Y 10 / 29 / 2016
Mailing Address 401 N MICHIGAN AVE. SUITE 1930		Transaction ID : SA11A.460574
City CHICAGO	State IL	Zip Code 60611-5287
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 25.00
Name of Employer (for Individual) KECK & ASSOCKATES. P.C.	Occupation (for Individual) ATTORNEY	<input type="checkbox"/> Memo Item CONTRIBUTION
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Aggregate Year-to-Date ▼ 250.00	

SUBTOTAL of Receipts This Page (optional).....▶	75.00
TOTAL This Period (last page this line number only).....▶	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 4002 OF 4311
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Team Ryan

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name A. WILLIAMS, RICHARD, , ,		Date of Receipt MM / DD / YYYY 11 / 01 / 2016 Transaction ID : SA11A.462444
Mailing Address 401 N MICHIGAN AVE. SUITE 1930		Amount of Each Receipt this Period 25.00
City CHICAGO	State IL	Zip Code 60611-5287
FEC ID number of contributing federal political committee. C		<input type="checkbox"/> Memo Item CONTRIBUTION
Name of Employer (for Individual) KECK & ASSOCKATES. P.C.	Occupation (for Individual) ATTORNEY	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name B. WILLIAMS, RICHARD, , ,		Date of Receipt MM / DD / YYYY 11 / 05 / 2016 Transaction ID : SA11A.478779
Mailing Address 401 N MICHIGAN AVE. SUITE 1930		Amount of Each Receipt this Period 25.00
City CHICAGO	State IL	Zip Code 60611-5287
FEC ID number of contributing federal political committee. C		<input type="checkbox"/> Memo Item CONTRIBUTION
Name of Employer (for Individual) KECK & ASSOCKATES. P.C.	Occupation (for Individual) ATTORNEY	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name C. WILLIAMS, RICHARD, , ,		Date of Receipt MM / DD / YYYY 11 / 05 / 2016 Transaction ID : SA11A.478807
Mailing Address 401 N MICHIGAN AVE. SUITE 1930		Amount of Each Receipt this Period 25.00
City CHICAGO	State IL	Zip Code 60611-5287
FEC ID number of contributing federal political committee. C		<input type="checkbox"/> Memo Item CONTRIBUTION
Name of Employer (for Individual) KECK & ASSOCKATES. P.C.	Occupation (for Individual) ATTORNEY	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Aggregate Year-to-Date ▼ 250.00	

SUBTOTAL of Receipts This Page (optional).....	75.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 4003 OF 4311
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. WILLIAMS, RICHARD, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 401 N MICHIGAN AVE.
SUITE 1930

City CHICAGO State IL Zip Code 60611-5287

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) KECK & ASSOCKATES. P.C. Occupation (for Individual) ATTORNEY

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt 11 / 07 / 2016
Transaction ID : SA11A.480493

Amount of Each Receipt this Period 25.00

Memo Item CONTRIBUTION

B. WILLIAMS JR., ROBERT, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address WWW.CROCODILEBAY.COM

City PETALUMA State CA Zip Code 94954-

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 1050.00

Date of Receipt 10 / 20 / 2016
Transaction ID : SA11A.444855

Amount of Each Receipt this Period 100.00

Memo Item CONTRIBUTION

C. WILLIAMS, ROBERT, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1949 POPULAR STREET

City LELAND State NC Zip Code 28451-8181

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) WALEX Occupation (for Individual) MGR

Receipt For: Primary General Other (specify)

Aggregate Year-to-Date ▼ 730.00

Date of Receipt 10 / 28 / 2016
Transaction ID : SA11A.456346

Amount of Each Receipt this Period 25.00

Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 150.00

TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 4004 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. WILLIAMS, ROBERT, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2350 LOSTWOOD COURT
 City XENIA State OH Zip Code 45385-9592
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 10 / 31 / 2016
Transaction ID : SA11A.459023
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

B. WILLIAMS, ROBERT, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1949 POPULAR STREET
 City LELAND State NC Zip Code 28451-8181
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) WALEX Occupation (for Individual) MGR
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 730.00

Date of Receipt 10 / 29 / 2016
Transaction ID : SA11A.461057
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

C. WILLIAMS, ROBERT, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1949 POPULAR STREET
 City LELAND State NC Zip Code 28451-8181
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) WALEX Occupation (for Individual) MGR
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 730.00

Date of Receipt 11 / 04 / 2016
Transaction ID : SA11A.472175
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	150.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 4005 OF 4311
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. WILLIAMS, STEVE, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 41 N ROSCOE BLVD

City PONTE VEDRA BEACH	State FL	Zip Code 32082-3625
---------------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		25		2016

Transaction ID : SA11A.448533

Amount of Each Receipt this Period
50.00

Memo Item
CONTRIBUTION

B. WILLIAMS, STEVE, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 41 N ROSCOE BLVD

City PONTE VEDRA BEACH	State FL	Zip Code 32082-3625
---------------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		25		2016

Transaction ID : SA11A.448536

Amount of Each Receipt this Period
50.00

Memo Item
CONTRIBUTION

C. WILLIAMS, STEVE, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 41 N ROSCOE BLVD

City PONTE VEDRA BEACH	State FL	Zip Code 32082-3625
---------------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11		07		2016

Transaction ID : SA11A.476171

Amount of Each Receipt this Period
25.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	125.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 4006 OF 4311
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. WILLIAMS, STEVE, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 41 N ROSCOE BLVD

City PONTE VEDRA BEACH	State FL	Zip Code 32082-3625
---------------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	07	/	2016

Transaction ID : SA11A.476185

Amount of Each Receipt this Period
25.00

Memo Item CONTRIBUTION

B. WILLIAMS, THOMAS, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 300 OVERLAND DR

City MCKINNEY	State TX	Zip Code 75069-0972
------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
237.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	27	/	2016

Transaction ID : SA11A.453837

Amount of Each Receipt this Period
27.00

Memo Item CONTRIBUTION

C. WILLIAMS, THOMAS, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 300 OVERLAND DR

City MCKINNEY	State TX	Zip Code 75069-0972
------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
237.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	04	/	2016

Transaction ID : SA11A.473526

Amount of Each Receipt this Period
27.00

Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	79.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 4007 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
Team Ryan

A. WILLIAMSON, TRACY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 300 MAIN STREET
 City SHELBY State MT Zip Code 59474-1970
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) SECRETARY
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 450.00

Date of Receipt **11 / 02 / 2016**
Transaction ID : SA11A.466438
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

B. WILLOUGHBY, JAMES, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2216 WENTWORTH DRIVE
 City MONTGOMERY State AL Zip Code 36106-3235
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt **10 / 31 / 2016**
Transaction ID : SA11A.458286
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

C. WILLSON, JOHN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 30 BOKUM ROAD, APT. 339
 City ESSEX State CT Zip Code 06426-1543
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 325.00

Date of Receipt **11 / 02 / 2016**
Transaction ID : SA11A.466516
 Amount of Each Receipt this Period 75.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	375.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 4008 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. WILMOT, JOHN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3301 LERITZ LANE
 City EDGEWATER State MD Zip Code 21037-3102
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) JOHN WILMOT Occupation (for Individual) ARCHITECT
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 10 / 26 / 2016
Transaction ID : SA11A.450061
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

B. WILMOT, JOHN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3301 LERITZ LANE
 City EDGEWATER State MD Zip Code 21037-3102
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) JOHN WILMOT Occupation (for Individual) ARCHITECT
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 10 / 26 / 2016
Transaction ID : SA11A.450077
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

C. WILMOT, JOHN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3301 LERITZ LANE
 City EDGEWATER State MD Zip Code 21037-3102
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) JOHN WILMOT Occupation (for Individual) ARCHITECT
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 10 / 26 / 2016
Transaction ID : SA11A.450078
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 150.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 4009 OF 4311		
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14	<input type="checkbox"/> 11c <input type="checkbox"/> 15	<input type="checkbox"/> 12 <input type="checkbox"/> 16

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NAME OF COMMITTEE (In Full)
Team Ryan

A. WILMOT, JOHN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3301 LERITZ LANE
 City EDGEWATER State MD Zip Code 21037-3102
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) JOHN WILMOT Occupation (for Individual) ARCHITECT
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 11 / 03 / 2016
Transaction ID : SA11A.469138
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

B. WILSON, BARBARA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 208 W. MISSOURI ST.
 City OBLONG State IL Zip Code 62449-1258
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 295.00

Date of Receipt 10 / 25 / 2016
Transaction ID : SA11A.447824
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

C. WILSON, BARBARA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 208 W. MISSOURI ST.
 City OBLONG State IL Zip Code 62449-1258
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 295.00

Date of Receipt 10 / 25 / 2016
Transaction ID : SA11A.447830
 Amount of Each Receipt this Period 30.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	105.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 4010 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
Team Ryan

A. WILSON, BARBARA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 208 W. MISSOURI ST.
 City OBLONG State IL Zip Code 62449-1258
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 295.00

Date of Receipt **10 / 24 / 2016**
Transaction ID : SA11A.449235
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

B. WILSON, BARBARA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 208 W. MISSOURI ST.
 City OBLONG State IL Zip Code 62449-1258
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 295.00

Date of Receipt **11 / 04 / 2016**
Transaction ID : SA11A.471877
 Amount of Each Receipt this Period 10.00
 Memo Item CONTRIBUTION

C. WILSON, BARBARA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 208 W. MISSOURI ST.
 City OBLONG State IL Zip Code 62449-1258
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 295.00

Date of Receipt **11 / 07 / 2016**
Transaction ID : SA11A.476316
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	60.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 4011 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. WILSON, BARBARA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 208 W. MISSOURI ST.
 City OBLONG State IL Zip Code 62449-1258
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 295.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 04 / 2016
Transaction ID : SA11A.479504
 Amount of Each Receipt this Period
 25.00
 Memo Item
 CONTRIBUTION

B. WILSON, BARBARA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 208 W. MISSOURI ST.
 City OBLONG State IL Zip Code 62449-1258
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 295.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 04 / 2016
Transaction ID : SA11A.479505
 Amount of Each Receipt this Period
 25.00
 Memo Item
 CONTRIBUTION

C. WILSON, BEVELY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 27 SCHOONER WAY
 City SACO State ME Zip Code 04072-2152
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 365.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 27 / 2016
Transaction ID : SA11A.453030
 Amount of Each Receipt this Period
 25.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	75.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 4012 OF 4311
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. WILSON, BEVELY, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 27 SCHOONER WAY

City SACO	State ME	Zip Code 04072-2152
--------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
365.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		29		2016

Transaction ID : SA11A.460809

Amount of Each Receipt this Period
25.00

Memo Item
CONTRIBUTION

B. WILSON, BEVELY, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 27 SCHOONER WAY

City SACO	State ME	Zip Code 04072-2152
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
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Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
365.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		29		2016

Transaction ID : SA11A.460815

Amount of Each Receipt this Period
25.00

Memo Item
CONTRIBUTION

C. WILSON, BEVELY, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 27 SCHOONER WAY

City SACO	State ME	Zip Code 04072-2152
--------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
365.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11		07		2016

Transaction ID : SA11A.475813

Amount of Each Receipt this Period
25.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	75.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 4013 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. WILSON, BRUCE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5 EAGLE POINTE DRIVE
 City BARRINGTON State IL Zip Code 60010-9393
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) KERNOW CAPITAL CORPORATION Occupation (for Individual) INSURANCE BROKER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 31 / 2016
Transaction ID : SA11A.458138
 Amount of Each Receipt this Period
 100.00
 Memo Item
CONTRIBUTION

B. WILSON, BRUCE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5 EAGLE POINTE DRIVE
 City BARRINGTON State IL Zip Code 60010-9393
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) KERNOW CAPITAL CORPORATION Occupation (for Individual) INSURANCE BROKER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 31 / 2016
Transaction ID : SA11A.458141
 Amount of Each Receipt this Period
 100.00
 Memo Item
CONTRIBUTION

C. WILSON, BRUCE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5 EAGLE POINTE DRIVE
 City BARRINGTON State IL Zip Code 60010-9393
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) KERNOW CAPITAL CORPORATION Occupation (for Individual) INSURANCE BROKER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 31 / 2016
Transaction ID : SA11A.458142
 Amount of Each Receipt this Period
 100.00
 Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	300.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 4014 OF 4311
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. WILSON, CAROL, R., MS.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 2197 SUTTER VIEW LANE

City LINCOLN	State CA	Zip Code 95648-7718
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
850.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		26		2016

Transaction ID : SA11A.450352

Amount of Each Receipt this Period
100.00

Memo Item
CONTRIBUTION

B. WILSON, CRAIG, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 6001 GARDEN LANE

City TUSCALOOSA	State AL	Zip Code 35405-5684
--------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) SELF EMPLOYED	Occupation (for Individual) SALES
--	--------------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		24		2016

Transaction ID : SA11A.445960

Amount of Each Receipt this Period
250.00

Memo Item
CONTRIBUTION

C. WILSON, DAVID, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address ONE POINT DRIVE 120

City BREA	State CA	Zip Code 92821-7626
--------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) PRAM	Occupation (for Individual) FOUNDER & CHAIRMAN
---	---

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
300.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		27		2016

Transaction ID : SA11A.452696

Amount of Each Receipt this Period
100.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	450.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 4015 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
Team Ryan

A. WILSON, DAVID, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address ONE POINT DRIVE 120
 City BREA State CA Zip Code 92821-7626
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) PRAM Occupation (for Individual) FOUNDER & CHAIRMAN
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date **300.00**

Date of Receipt **10 / 27 / 2016**
Transaction ID : SA11A.452697
 Amount of Each Receipt this Period **100.00**
 Memo Item CONTRIBUTION

B. WILSON, DONALD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5441 AUCKLAND AVENUE
 City NORTH HOLLYWOOD State CA Zip Code 91601-2911
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date **260.00**

Date of Receipt **10 / 29 / 2016**
Transaction ID : SA11A.460716
 Amount of Each Receipt this Period **25.00**
 Memo Item CONTRIBUTION

C. WILSON, DONALD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5441 AUCKLAND AVENUE
 City NORTH HOLLYWOOD State CA Zip Code 91601-2911
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date **260.00**

Date of Receipt **10 / 31 / 2016**
Transaction ID : SA11A.464026
 Amount of Each Receipt this Period **25.00**
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	150.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 4016 OF 4311
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. WILSON, DONALD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5441 AUCKLAND AVENUE
 City NORTH HOLLYWOOD State CA Zip Code 91601-2911
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 260.00

Date of Receipt **10 / 31 / 2016**
Transaction ID : SA11A.464027
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

B. WILSON, E, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2687 SPANISH RIVER RD
 City BOCA RATON State FL Zip Code 33432-8132
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SEAGATE DEVELOPMENT Occupation (for Individual) REAL ESTATE
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1600.00

Date of Receipt **11 / 06 / 2016**
Transaction ID : SA11A.476949
 Amount of Each Receipt this Period 1000.00
 Memo Item CONTRIBUTION

C. WILSON, FREDERICK, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 618 WESTON POINTE CT
 City LONGBOAT KEY State FL Zip Code 34228-3139
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 651.75

Date of Receipt **10 / 21 / 2016**
Transaction ID : SA11A.444368
 Amount of Each Receipt this Period 75.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	1100.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 4017 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. WILSON, FREDERICK, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 618 WESTON POINTE CT
 City LONGBOAT KEY State FL Zip Code 34228-3139
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 651.75

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 26 / 2016
Transaction ID : SA11A.450641
 Amount of Each Receipt this Period
 75.75
 Memo Item CONTRIBUTION

B. WILSON, FREDERICK, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 618 WESTON POINTE CT
 City LONGBOAT KEY State FL Zip Code 34228-3139
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 651.75

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 07 / 2016
Transaction ID : SA11A.475556
 Amount of Each Receipt this Period
 50.00
 Memo Item CONTRIBUTION

C. WILSON, FREDERICK, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 618 WESTON POINTE CT
 City LONGBOAT KEY State FL Zip Code 34228-3139
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 651.75

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 07 / 2016
Transaction ID : SA11A.475564
 Amount of Each Receipt this Period
 50.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 175.75
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 4018 OF 4311
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. WILSON, FRED, A., MR.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 3900 WINDSOR HALL DRIVE
APT C-233

City WILLIAMSBURG State VA Zip Code 23188-2877

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
300.00

Date of Receipt
10 / 25 / 2016
Transaction ID : SA11A.447356

Amount of Each Receipt this Period
200.00

Memo Item CONTRIBUTION

B. WILSON, HAROLD, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 141 CAVE SPRING RD.

City HUNT State TX Zip Code 78024-

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) BANK OF THE HILLS Occupation (for Individual) BANKER

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
405.00

Date of Receipt
10 / 25 / 2016
Transaction ID : SA11A.448230

Amount of Each Receipt this Period
30.00

Memo Item CONTRIBUTION

C. WILSON, HAROLD, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 141 CAVE SPRING RD.

City HUNT State TX Zip Code 78024-

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) BANK OF THE HILLS Occupation (for Individual) BANKER

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
405.00

Date of Receipt
11 / 04 / 2016
Transaction ID : SA11A.473174

Amount of Each Receipt this Period
25.00

Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 255.00

TOTAL This Period (last page this line number only)..... ▶

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 4019 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. WILSON, JAMES, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2551 VISTA DR. E-302
 City JUNEAU State AK Zip Code 99801-2057
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1375.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 20 / 2016
Transaction ID : SA11A.444682
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION

B. WILSON, JAMES, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2551 VISTA DR. E-302
 City JUNEAU State AK Zip Code 99801-2057
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1375.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 02 / 2016
Transaction ID : SA11A.467148
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION

C. WILSON, JAMES, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2551 VISTA DR. E-302
 City JUNEAU State AK Zip Code 99801-2057
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1375.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 03 / 2016
Transaction ID : SA11A.469294
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	300.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 4020 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. WILSON, JAMES, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2551 VISTA DR. E-302
 City JUNEAU State AK Zip Code 99801-2057
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1375.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 06 / 2016
Transaction ID : SA11A.477841
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION

B. WILSON, JOANNE, G., MS.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 27 E BRIAR HOLLOW LANE
 City HOUSTON State TX Zip Code 77027-2919
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RIVER OAKS FINANCIAL Occupation (for Individual) DIRECTOR
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1850.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 24 / 2016
Transaction ID : SA11A.443488
 Amount of Each Receipt this Period
 1000.00
 Memo Item
 CONTRIBUTION

C. WILSON, JOANNE, G., MS.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 27 E BRIAR HOLLOW LANE
 City HOUSTON State TX Zip Code 77027-2919
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RIVER OAKS FINANCIAL Occupation (for Individual) DIRECTOR
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1850.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 08 / 2016
Transaction ID : SA11A.468149
 Amount of Each Receipt this Period
 150.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	1250.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 4021 OF 4311
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. WILSON, JUSTIN, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 2571 BAYSHORE DRIVE

City NEWPORT BEACH	State CA	Zip Code 92663-5606
-----------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) URBAN GROUP, INC.	Occupation (for Individual) REAL ESTATE
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
375.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		21		2016

Transaction ID : SA11A.444224

Amount of Each Receipt this Period
50.00

Memo Item
CONTRIBUTION

B. WILSON, JUSTIN, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 2571 BAYSHORE DRIVE

City NEWPORT BEACH	State CA	Zip Code 92663-5606
-----------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) URBAN GROUP, INC.	Occupation (for Individual) REAL ESTATE
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
375.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11		04		2016

Transaction ID : SA11A.470443

Amount of Each Receipt this Period
50.00

Memo Item
CONTRIBUTION

C. WILSON, KATHERINE, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 125 TALLASSEE OAKS TRAIL

City ATHENS	State GA	Zip Code 30606-1370
----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
275.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		31		2016

Transaction ID : SA11A.457659

Amount of Each Receipt this Period
25.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	125.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 4022 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. WILSON, KATHERINE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 125 TALLASSEE OAKS TRAIL
 City ATHENS State GA Zip Code 30606-1370
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 275.00

Date of Receipt 10 / 30 / 2016
Transaction ID : SA11A.464872
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

B. WILSON, KURT, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3601 FOX RUN RD
 City MATTHEWS State NC Zip Code 28104-7930
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) UNION COUNTY PUBLIC SCHOOLS Occupation (for Individual) AFTER SCHOOL GROUP LEADER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 10 / 26 / 2016
Transaction ID : SA11A.454564
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

C. WILSON, KURT, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3601 FOX RUN RD
 City MATTHEWS State NC Zip Code 28104-7930
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) UNION COUNTY PUBLIC SCHOOLS Occupation (for Individual) AFTER SCHOOL GROUP LEADER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 10 / 26 / 2016
Transaction ID : SA11A.454568
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶ 125.00
TOTAL This Period (last page this line number only).....▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 4023 OF 4311
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. WILSON, LEE, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 11802 ONION HOLLOW RUN

City AUSTIN	State TX	Zip Code 78739-7602
----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) SECURITY INNOVATION	Occupation (for Individual) ELECTRICAL ENGINEER
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
220.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		22		2016

Transaction ID : SA11A.447064

Amount of Each Receipt this Period
50.00

Memo Item CONTRIBUTION

B. WILSON, LEE, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 11802 ONION HOLLOW RUN

City AUSTIN	State TX	Zip Code 78739-7602
----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) SECURITY INNOVATION	Occupation (for Individual) ELECTRICAL ENGINEER
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
220.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		22		2016

Transaction ID : SA11A.447065

Amount of Each Receipt this Period
50.00

Memo Item CONTRIBUTION

C. WILSON, LEONARD, J., MR.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 4601 BROOKSIDE DRIVE

City ALEXANDRIA	State VA	Zip Code 22312-1408
--------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
800.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		25		2016

Transaction ID : SA11A.447406

Amount of Each Receipt this Period
500.00

Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	600.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 4024 OF 4311
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. WILSON, MARSHA, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 1700 OLD MINDEN RD SUITE 104

City BOSSIER CITY	State LA	Zip Code 71111-4851
----------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) T.B ENTERPRISES	Occupation (for Individual) REAL ESTATE MANAGEMENT
--	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		20		2016

Transaction ID : SA11A.442345

Amount of Each Receipt this Period
250.00

Memo Item
CONTRIBUTION

B. WILSON, RANSOM, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 1050 PARK AVENUE 12C

City NEW YORK	State NY	Zip Code 10028-1031
------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
350.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		25		2016

Transaction ID : SA11A.448509

Amount of Each Receipt this Period
100.00

Memo Item
CONTRIBUTION

C. WILSON, SANDRA, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 200 EAST CRESTMONT DRIVE

City ALVIN	State TX	Zip Code 77511-5204
---------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11		02		2016

Transaction ID : SA11A.470028

Amount of Each Receipt this Period
50.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	400.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 4025 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
Team Ryan

A. WILSON, SANDRA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 200 EAST CRESTMONT DRIVE
 City ALVIN State TX Zip Code 77511-5204
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt
 11 / 06 / 2016
Transaction ID : SA11A.476926
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

B. WILSON, THOMAS, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 400 W JOLYN DR
 City SIOUX FALLS State SD Zip Code 57108-3802
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 550.00

Date of Receipt
 10 / 27 / 2016
Transaction ID : SA11A.453700
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

C. WILSON, THOMAS, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 400 W JOLYN DR
 City SIOUX FALLS State SD Zip Code 57108-3802
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 550.00

Date of Receipt
 10 / 27 / 2016
Transaction ID : SA11A.453704
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	250.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 4026 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
Team Ryan

A. WILSON, THOMAS, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 400 W JOLYN DR
 City SIOUX FALLS State SD Zip Code 57108-3802
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 550.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 27 / 2016
Transaction ID : SA11A.453723
 Amount of Each Receipt this Period
 50.00
 Memo Item
 CONTRIBUTION

B. WILSON, THOMAS, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 400 W JOLYN DR
 City SIOUX FALLS State SD Zip Code 57108-3802
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 550.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 27 / 2016
Transaction ID : SA11A.453725
 Amount of Each Receipt this Period
 50.00
 Memo Item
 CONTRIBUTION

C. WILSON, THOMAS, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 400 W JOLYN DR
 City SIOUX FALLS State SD Zip Code 57108-3802
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 550.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 27 / 2016
Transaction ID : SA11A.453726
 Amount of Each Receipt this Period
 50.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	150.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 4027 OF 4311
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. WILSON, THOMAS, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 400 W JOLYN DR
 City SIOUX FALLS State SD Zip Code 57108-3802
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 550.00

Date of Receipt 10 / 27 / 2016
Transaction ID : SA11A.453760
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

B. WILSON, THOMAS, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 400 W JOLYN DR
 City SIOUX FALLS State SD Zip Code 57108-3802
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 550.00

Date of Receipt 10 / 27 / 2016
Transaction ID : SA11A.453790
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

C. WILSON, TINA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 10433 WILSHIRE BLVD. #902
 City LOS ANGELES State CA Zip Code 90024-4629
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 225.00

Date of Receipt 11 / 07 / 2016
Transaction ID : SA11A.475600
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	225.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 4028 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
Team Ryan

A. WILT, DONALD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 19 BOUTWELL HILL ROAD
 City WESTFORD State MA Zip Code 01886-2435
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 350.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 20 / 2016
Transaction ID : SA11A.442625
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION

B. WILT, DONALD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 19 BOUTWELL HILL ROAD
 City WESTFORD State MA Zip Code 01886-2435
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 350.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 02 / 2016
Transaction ID : SA11A.466907
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION

C. WILT, DONALD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 19 BOUTWELL HILL ROAD
 City WESTFORD State MA Zip Code 01886-2435
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 350.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 02 / 2016
Transaction ID : SA11A.466925
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	300.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 4029 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
Team Ryan

A. WILT, DONALD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 19 BOUTWELL HILL ROAD
 City WESTFORD State MA Zip Code 01886-2435
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 350.00

Date of Receipt
 11 / 06 / 2016
Transaction ID : SA11A.477032
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

B. WIMER, WILLIAM, J., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 11 DOE RUN LANE
 City LANCASTER State PA Zip Code 17603-9113
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt
 10 / 20 / 2016
Transaction ID : SA11A.442201
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

C. WIMER, WILLIAM, J., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 11 DOE RUN LANE
 City LANCASTER State PA Zip Code 17603-9113
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt
 10 / 24 / 2016
Transaction ID : SA11A.445897
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	250.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 4030 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. WIMMER, CYNTHIA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3540 VAN NESS STREET NW
 City WASHINGTON State DC Zip Code 20008-3004
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 31 / 2016
Transaction ID : SA11A.457808
 Amount of Each Receipt this Period
 250.00
 Memo Item
 CONTRIBUTION

B. WINCKLER, SUSAN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1350 OLDE TOWNE ROAD
 City ALEXANDRIA State VA Zip Code 22307-1419
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) LEAVITT PARTNERS Occupation (for Individual) CONSULTANT
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 05 / 2016
Transaction ID : SA11A.479277
 Amount of Each Receipt this Period
 500.00
 Memo Item
 CONTRIBUTION

C. WINDER, CAROLE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3725 ROHLFFS WAY
 City NAPA State CA Zip Code 94558-4485
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 305.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 05 / 2016
Transaction ID : SA11A.478669
 Amount of Each Receipt this Period
 33.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	783.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 4031 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
Team Ryan

A. WINDERS, JON, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 31021 N. 154TH ST
 City SCOTTSDALE State AZ Zip Code 85262-6990
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RIDGELINE CONSTRUCTION Occupation (for Individual) SUPERVISOR
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 03 / 2016
Transaction ID : SA11A.474489
 Amount of Each Receipt this Period
 250.00
 Memo Item
 CONTRIBUTION

B. WINIARSKI, WARREN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address P. O. BOX 3327
 City YOUNTVILLE State CA Zip Code 94599-3327
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) GRAPEGROWER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1500.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 26 / 2016
Transaction ID : SA11A.454558
 Amount of Each Receipt this Period
 1000.00
 Memo Item
 CONTRIBUTION

C. WINKLEY, DONALD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 6317 BOCA RATON DR.
 City CORP CHRISTI State TX Zip Code 78413-2617
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 06 / 2016
Transaction ID : SA11A.478012
 Amount of Each Receipt this Period
 250.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	1500.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 4032 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
Team Ryan

A. WINN, DAVID, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3325 CAMINO VALLAREAL
 City ESCONDIDO State CA Zip Code 92029-7456
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 325.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 27 / 2016
Transaction ID : SA11A.456822
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION

B. WINN, DAVID, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3325 CAMINO VALLAREAL
 City ESCONDIDO State CA Zip Code 92029-7456
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 325.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 02 / 2016
Transaction ID : SA11A.469659
 Amount of Each Receipt this Period
 25.00
 Memo Item
 CONTRIBUTION

C. WINNGDER, THOMAS, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1470 URANIA STREET
 City NEW ORLEANS State LA Zip Code 70130-5239
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) REAL ESTATE
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 14 / 2016
Transaction ID : SA11A.468281
 Amount of Each Receipt this Period
 1000.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	1125.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 4033 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
Team Ryan

A. WINNOWSKI, TED, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 557 SECOND ST.
 City LAKE OSWEGO State OR Zip Code 97034-3128
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt **10 / 26 / 2016**
Transaction ID : SA11A.449916
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

B. WINNOWSKI, TED, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 557 SECOND ST.
 City LAKE OSWEGO State OR Zip Code 97034-3128
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt **11 / 07 / 2016**
Transaction ID : SA11A.475354
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

C. WINOGRADOFF, ALEX, P., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 7 BLUEBERRY LN
 City PUTNAM VALLEY State NY Zip Code 10579-3302
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt **11 / 04 / 2016**
Transaction ID : SA11A.471865
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	525.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 4034 OF 4311
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. WINQUIST, CHRISTA, M., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1004 C STREET
 City ROCKFORD State IL Zip Code 61107-3119
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Occupation (for Individual)
 INFORMATION REQUESTED PER BEST EFFORTS INFORMATION REQUESTED PER BE
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 450.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 21 / 2016
Transaction ID : SA11A.443626
 Amount of Each Receipt this Period 50.00
 Memo Item
 CONTRIBUTION

B. WINSLOW, ALICE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 128 CYPRESS ROAD
 City MERRY HILL State NC Zip Code 27957-9515
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Occupation (for Individual)
 SOUNDSIDE GROUP BUSINESS OWNER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1010.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 21 / 2016
Transaction ID : SA11A.444361
 Amount of Each Receipt this Period 50.00
 Memo Item
 CONTRIBUTION

C. WINSLOW, ALICE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 128 CYPRESS ROAD
 City MERRY HILL State NC Zip Code 27957-9515
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Occupation (for Individual)
 SOUNDSIDE GROUP BUSINESS OWNER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1010.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 24 / 2016
Transaction ID : SA11A.446081
 Amount of Each Receipt this Period 100.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	200.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 4035 OF 4311
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. WINSTON, GERALD, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 8306 PARTLOW

City HOUSTON	State TX	Zip Code 77040-1519
-----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) CLCM INC	Occupation (for Individual) PRES
---	-------------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
318.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		21		2016

Transaction ID : SA11A.444591

Amount of Each Receipt this Period
25.00

Memo Item
CONTRIBUTION

B. WINSTON, GERALD, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 8306 PARTLOW

City HOUSTON	State TX	Zip Code 77040-1519
-----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) CLCM INC	Occupation (for Individual) PRES
---	-------------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
318.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11		04		2016

Transaction ID : SA11A.472135

Amount of Each Receipt this Period
25.00

Memo Item
CONTRIBUTION

C. WINSTON, JOHN, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 16 GRIFFITHS DRIVE

City DURHAM	State NH	Zip Code 03824-3128
----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
525.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		23		2016

Transaction ID : SA11A.446481

Amount of Each Receipt this Period
25.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	75.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 4036 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. WINSTON, JOHN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 16 GRIFFITHS DRIVE
 City DURHAM State NH Zip Code 03824-3128
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 525.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 26 / 2016
Transaction ID : SA11A.451034
 Amount of Each Receipt this Period
 25.00
 Memo Item
 CONTRIBUTION

B. WINSTON, JOHN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 16 GRIFFITHS DRIVE
 City DURHAM State NH Zip Code 03824-3128
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 525.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 27 / 2016
Transaction ID : SA11A.454034
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION

C. WINSTON, JOHN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 16 GRIFFITHS DRIVE
 City DURHAM State NH Zip Code 03824-3128
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 525.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 04 / 2016
Transaction ID : SA11A.472109
 Amount of Each Receipt this Period
 25.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	150.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 4037 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
Team Ryan

A. WINSTON, JOHN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 16 GRIFFITHS DRIVE
 City DURHAM State NH Zip Code 03824-3128
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 525.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 06 / 2016
Transaction ID : SA11A.477585
 Amount of Each Receipt this Period
 25.00
 Memo Item
 CONTRIBUTION

B. WINTERS, DONNA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2 HICKORY GROVE WAY
 City SAVANNAH State GA Zip Code 31405-1027
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 475.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 22 / 2016
Transaction ID : SA11A.446961
 Amount of Each Receipt this Period
 50.00
 Memo Item
 CONTRIBUTION

C. WINTERS, DONNA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2 HICKORY GROVE WAY
 City SAVANNAH State GA Zip Code 31405-1027
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 475.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 26 / 2016
Transaction ID : SA11A.450404
 Amount of Each Receipt this Period
 50.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	125.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 4038 OF 4311
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. WINTERS, DONNA, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 2 HICKORY GROVE WAY

City SAVANNAH	State GA	Zip Code 31405-1027
------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
475.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	04	/	2016

Transaction ID : SA11A.471029

Amount of Each Receipt this Period
50.00

Memo Item
CONTRIBUTION

B. WINTERS, DONNA, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 2 HICKORY GROVE WAY

City SAVANNAH	State GA	Zip Code 31405-1027
------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
475.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	04	/	2016

Transaction ID : SA11A.472565

Amount of Each Receipt this Period
50.00

Memo Item
CONTRIBUTION

C. WINTERS, HARRY, J., MR., JR.
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 2845 NORTH SANTA YNEZ PLACE

City TUCSON	State AZ	Zip Code 85715-3141
----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) SELF EMPLOYED	Occupation (for Individual) ENGR
--	-------------------------------------

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
875.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	25	/	2016

Transaction ID : SA11A.448891

Amount of Each Receipt this Period
150.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	250.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 4039 OF 4311
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. WINTERS, HARRY, J., MR., JR.
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 2845 NORTH SANTA YNEZ PLACE

City TUCSON	State AZ	Zip Code 85715-3141
----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) SELF EMPLOYED	Occupation (for Individual) ENGR
--	-------------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
875.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		31		2016

Transaction ID : SA11A.457664

Amount of Each Receipt this Period
25.00

Memo Item
CONTRIBUTION

B. WINTERS, HARRY, J., MR., JR.
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 2845 NORTH SANTA YNEZ PLACE

City TUCSON	State AZ	Zip Code 85715-3141
----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) SELF EMPLOYED	Occupation (for Individual) ENGR
--	-------------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
875.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11		04		2016

Transaction ID : SA11A.472532

Amount of Each Receipt this Period
150.00

Memo Item
CONTRIBUTION

C. WINTERS, JOEL, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 850 CHERRY TREE RD

City UPPER CHICHESTER	State PA	Zip Code 19014-2412
--------------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) MINISTER	Occupation (for Individual) CHURCH
---	---------------------------------------

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
227.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11		04		2016

Transaction ID : SA11A.472147

Amount of Each Receipt this Period
25.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	200.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 4040 OF 4311
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. WINTER, M., , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1025 5TH STREET
 City BOULDER State CO Zip Code 80302-7122
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) INFORMATION REQUESTED PER BEST EFFORTS Occupation (for Individual) INFORMATION REQUESTED PER BE
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 1000.00

Date of Receipt 11 / 01 / 2016
Transaction ID : SA11A.461848
 Amount of Each Receipt this Period 1000.00
 Memo Item CONTRIBUTION

B. WINTERER, VICTORIA, T., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO BOX 1009
 City BOCA GRANDE State FL Zip Code 33921-1009
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 1000.00

Date of Receipt 10 / 25 / 2016
Transaction ID : SA11A.447343
 Amount of Each Receipt this Period 500.00
 Memo Item CONTRIBUTION

C. WIRT, CHARLES, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 6175 NW 167 ST G35
 City MIAMI State FL Zip Code 33015-
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) INSURANCE AGENT
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 700.00

Date of Receipt 11 / 04 / 2016
Transaction ID : SA11A.472415
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 1600.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 4041 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
-----------------------------	-----------------------------	-----------------------------

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NAME OF COMMITTEE (In Full)
Team Ryan

A. WIRTH, DONALD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 31144 WIRTH RD
 City TANGENT State OR Zip Code 97389-9768
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 700.00

Date of Receipt **10 / 27 / 2016**
Transaction ID : SA11A.453793
 Amount of Each Receipt this Period 300.00
 Memo Item CONTRIBUTION

B. WISE, DIANE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2560 COBBLE CREEK LANE
 City GRAYSON State GA Zip Code 30017-1552
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 225.00

Date of Receipt **11 / 02 / 2016**
Transaction ID : SA11A.469600
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

C. WISE, DIANE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2560 COBBLE CREEK LANE
 City GRAYSON State GA Zip Code 30017-1552
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 225.00

Date of Receipt **11 / 07 / 2016**
Transaction ID : SA11A.480719
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	400.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 4042 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. WISE, DIANE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2560 COBBLE CREEK LANE
 City GRAYSON State GA Zip Code 30017-1552
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 225.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 11 / 07 / 2016
Transaction ID : SA11A.480749
 Amount of Each Receipt this Period
 25.00
 Memo Item
 CONTRIBUTION

B. WISE, DIANE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2560 COBBLE CREEK LANE
 City GRAYSON State GA Zip Code 30017-1552
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 225.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 11 / 07 / 2016
Transaction ID : SA11A.480762
 Amount of Each Receipt this Period
 25.00
 Memo Item
 CONTRIBUTION

C. WISE, DIANE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2560 COBBLE CREEK LANE
 City GRAYSON State GA Zip Code 30017-1552
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 225.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 11 / 07 / 2016
Transaction ID : SA11A.480763
 Amount of Each Receipt this Period
 25.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	75.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 4043 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
Team Ryan

A. WISE, HARRY, H., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 56 CATSKILL COURT
 City BELLE MEAD State NJ Zip Code 08502-4527
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) MFS INC. Occupation (for Individual) EXECUTIVE
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1200.00

Date of Receipt 10 / 27 / 2016
Transaction ID : SA11A.452329
 Amount of Each Receipt this Period 1000.00
 Memo Item CONTRIBUTION

B. WISE, ROBERT, H., , JR
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2348 RIVER GRAND DRIVE
 City BIRMINGHAM State AL Zip Code 35243-2324
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 275.00

Date of Receipt 10 / 21 / 2016
Transaction ID : SA11A.443582
 Amount of Each Receipt this Period 75.00
 Memo Item CONTRIBUTION

C. WISE, ROBERT, H., , JR
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2348 RIVER GRAND DRIVE
 City BIRMINGHAM State AL Zip Code 35243-2324
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 275.00

Date of Receipt 10 / 23 / 2016
Transaction ID : SA11A.446286
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	1125.00
TOTAL This Period (last page this line number only).....	

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 4044 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
Team Ryan

A. WISEMAN, DENISE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 9810 STATE HEY 220
 City CASPER State WY Zip Code 82604-
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1410.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 21 / 2016
Transaction ID : SA11A.444554
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION

B. WISEMAN, DENISE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 9810 STATE HEY 220
 City CASPER State WY Zip Code 82604-
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1410.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 01 / 2016
Transaction ID : SA11A.467235
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION

C. WISEMAN, DENISE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 9810 STATE HEY 220
 City CASPER State WY Zip Code 82604-
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1410.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 04 / 2016
Transaction ID : SA11A.472504
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	300.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 4045 OF 4311
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. WISEMAN, MARIE, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 2030 KRISTI COURT

City FALLBROOK	State CA	Zip Code 92028-7850
-------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		25		2016

Transaction ID : SA11A.451665

Amount of Each Receipt this Period
100.00

Memo Item
CONTRIBUTION

B. WISMAR, NATALIE, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 26231 MIRA WAY

City BONITA SPRINGS	State FL	Zip Code 34134-1638
------------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
2000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		25		2016

Transaction ID : SA11A.448872

Amount of Each Receipt this Period
1000.00

Memo Item
CONTRIBUTION

C. WITTE, RICHARD, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 69 FROG HOLLOW RD

City CALIFON	State NJ	Zip Code 07830-3212
-----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) THE WITTE CO., INC.	Occupation (for Individual) PRESIDENT
--	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
300.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		25		2016

Transaction ID : SA11A.448314

Amount of Each Receipt this Period
50.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	1150.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 4046 OF 4311
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. WITTE, RICHARD, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 69 FROG HOLLOW RD
City CALIFON State NJ Zip Code 07830-3212
FEC ID number of contributing federal political committee. **C**
Name of Employer (for Individual) THE WITTE CO., INC. Occupation (for Individual) PRESIDENT
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 300.00

Date of Receipt 11 / 04 / 2016
Transaction ID : SA11A.473544
Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

B. WITTMAN, ROBERT, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 5105 FEAGAN ST.
City HOUSTON State TX Zip Code 77007-7221
FEC ID number of contributing federal political committee. **C**
Name of Employer (for Individual) FLOTEK INDUSTRIES INC. Occupation (for Individual) MANAGER
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 250.00

Date of Receipt 10 / 25 / 2016
Transaction ID : SA11A.451448
Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

C. WITTS, JUDITH, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 1408 J JOPPA FOREST DRIVE J
City JOPPA State MD Zip Code 21085-3427
FEC ID number of contributing federal political committee. **C**
Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
Receipt For: Primary General Other (specify)
Aggregate Year-to-Date ▼ 625.00

Date of Receipt 11 / 04 / 2016
Transaction ID : SA11A.472010
Amount of Each Receipt this Period 30.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶ 330.00
TOTAL This Period (last page this line number only).....▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 4047 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
Team Ryan

A. WIXSON, HOWARD, , MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4801 GREEN OAKS DR
 City COLLEYVILLE State TX Zip Code 76034-4769
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) DEALER INSURANCE AGENCY Occupation (for Individual) INSURANCE AGENT
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 10 / 26 / 2016
Transaction ID : SA11A.450919
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

B. WODMAN, DEAN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 233 MOCKINGBIRD TRAIL
 City PALM BEACH State FL Zip Code 33480-3117
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 3000.00

Date of Receipt 10 / 28 / 2016
Transaction ID : SA11A.455936
 Amount of Each Receipt this Period 1000.00
 Memo Item CONTRIBUTION

C. WODMAN, DEAN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 233 MOCKINGBIRD TRAIL
 City PALM BEACH State FL Zip Code 33480-3117
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 3000.00

Date of Receipt 11 / 04 / 2016
Transaction ID : SA11A.470682
 Amount of Each Receipt this Period 1000.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	2250.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 4048 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name A. WOJCIECHOWSKI, CHRISTOPHER, , ,			Date of Receipt MM / DD / YYYY 11 / 04 / 2016
Mailing Address 1123 ASHFORD PLACE DR.			Transaction ID : SA11A.479596
City O FALLON	State MO	Zip Code 63366-2003	Amount of Each Receipt this Period 25.00
FEC ID number of contributing federal political committee. C			<input type="checkbox"/> Memo Item CONTRIBUTION
Name of Employer (for Individual) DOJ		Occupation (for Individual) LE	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 207.00	

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name B. WOJCIK, EDMUND, , ,			Date of Receipt MM / DD / YYYY 10 / 22 / 2016
Mailing Address 8732 KENDALL BROOK CIRCLE			Transaction ID : SA11A.446952
City LAS VEGAS	State NV	Zip Code 89149-4144	Amount of Each Receipt this Period 50.00
FEC ID number of contributing federal political committee. C			<input type="checkbox"/> Memo Item CONTRIBUTION
Name of Employer (for Individual) NONE		Occupation (for Individual) RETIRED	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 250.00	

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name C. WOJCIK, EDMUND, , ,			Date of Receipt MM / DD / YYYY 11 / 04 / 2016
Mailing Address 8732 KENDALL BROOK CIRCLE			Transaction ID : SA11A.471986
City LAS VEGAS	State NV	Zip Code 89149-4144	Amount of Each Receipt this Period 50.00
FEC ID number of contributing federal political committee. C			<input type="checkbox"/> Memo Item CONTRIBUTION
Name of Employer (for Individual) NONE		Occupation (for Individual) RETIRED	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		Aggregate Year-to-Date ▼ 250.00	

SUBTOTAL of Receipts This Page (optional).....▶	125.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 4049 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
Team Ryan

A. WOLANSKY, DANIEL, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 12910 OLEANDER RD
 City NORTH MIAMI State FL Zip Code 33181-2356
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) AMG Occupation (for Individual) SALES
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 04 / 2016
Transaction ID : SA11A.473745
 Amount of Each Receipt this Period
 100.00
 Memo Item
CONTRIBUTION

B. WOLCOTT, EDWARD, , MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4624 NW 17TH PLACE
 City GAINESVILLE State FL Zip Code 32605-3418
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 800.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 04 / 2016
Transaction ID : SA11A.473190
 Amount of Each Receipt this Period
 100.00
 Memo Item
CONTRIBUTION

C. WOLD, PHILIP, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 25 BROWNS COURT
 City MANKATO State MN Zip Code 56001-6166
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 30 / 2016
Transaction ID : SA11A.459636
 Amount of Each Receipt this Period
 50.00
 Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	250.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 4050 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
Team Ryan

A. WOLF, BEVERLY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2981 SILVER LAKE BLVD
 City SILVER LAKE State OH Zip Code 44224-3021
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 26 / 2016
Transaction ID : SA11A.451013
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION

B. WOLF, BEVERLY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2981 SILVER LAKE BLVD
 City SILVER LAKE State OH Zip Code 44224-3021
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 04 / 2016
Transaction ID : SA11A.472163
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION

C. WOLF, JEANNINE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address HCR 3 BOX 13056
 City KEAAU State HI Zip Code 96749-9216
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 03 / 2016
Transaction ID : SA11A.468589
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	300.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 4051 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. WOLFE, CLARENCE, C., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 11040 VINE COURT
 City MANASSAS State VA Zip Code 20111-2941
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 24 / 2016
Transaction ID : SA11A.443866
 Amount of Each Receipt this Period
 75.00
 Memo Item
 CONTRIBUTION

B. WOLFE, RONALD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5222 SCOTT ROBERTSON ROAD
 City HIDDEN HILLS State CA Zip Code 91302-1168
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) METROPOLITAN MARKETING, INC. Occupation (for Individual) CFO
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 750.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 31 / 2016
Transaction ID : SA11A.458123
 Amount of Each Receipt this Period
 250.00
 Memo Item
 CONTRIBUTION

C. WOLFE, TERENCE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 6800 SW 40TH ST #475
 City MIAMI State FL Zip Code 33155-3708
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NCGA Occupation (for Individual) PRINCIPAL
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 26 / 2016
Transaction ID : SA11A.447762
 Amount of Each Receipt this Period
 500.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	825.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 4052 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. WOLFF, WILLIAM, F., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 16023 AVENIDA LAMEGO
 City SAN DIEGO State CA Zip Code 92128-3151
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 450.00

Date of Receipt 10 / 25 / 2016
Transaction ID : SA11A.451763
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

B. WOLSTENHOLME , RALPH, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 121 PRITCHARD HOLLOW RD
 City WESTFIELD State PA Zip Code 16950-1416
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) MEDPLAST Occupation (for Individual) PROJECT MANAGEMENT
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt 10 / 31 / 2016
Transaction ID : SA11A.458979
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

C. WOLSTENHOLME , RALPH, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 121 PRITCHARD HOLLOW RD
 City WESTFIELD State PA Zip Code 16950-1416
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) MEDPLAST Occupation (for Individual) PROJECT MANAGEMENT
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt 11 / 02 / 2016
Transaction ID : SA11A.469984
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	450.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 4053 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. WOLTER, DANIEL, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 851 O'KEEFFE AVE
 42
 City SUN PRAIRIE State WI Zip Code 53590-4109
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) HALLMARK DRYWALL INC Occupation (for Individual) CARPENTER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 470.00

Date of Receipt 11 / 03 / 2016
Transaction ID : SA11A.469036
 Amount of Each Receipt this Period 59.00
 Memo Item CONTRIBUTION

B. WOLTER, OTTO, J., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 240 MONASTERY HILL DRIVE
 City OCONOMOWOC State WI Zip Code 53066-1524
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) WISCONSIN LIFT TRUCK CORP Occupation (for Individual) CEO
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1685.00

Date of Receipt 10 / 31 / 2016
Transaction ID : SA11A.463971
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

C. WOLTER, OTTO, J., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 240 MONASTERY HILL DRIVE
 City OCONOMOWOC State WI Zip Code 53066-1524
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) WISCONSIN LIFT TRUCK CORP Occupation (for Individual) CEO
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1685.00

Date of Receipt 10 / 31 / 2016
Transaction ID : SA11A.463972
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	259.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 4054 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. WOLTER, OTTO, J., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 240 MONASTERY HILL DRIVE
 City OCONOMOWOC State WI Zip Code 53066-1524
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) WISCONSIN LIFT TRUCK CORP Occupation (for Individual) CEO
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1685.00

Date of Receipt 11 / 02 / 2016
Transaction ID : SA11A.470171
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

B. WOMACK, CLYDE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2917 HARLANWOOD DRIVE
 City FORT WORTH State TX Zip Code 76109-1602
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 10 / 31 / 2016
Transaction ID : SA11A.458073
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

C. WOMACK, CLYDE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2917 HARLANWOOD DRIVE
 City FORT WORTH State TX Zip Code 76109-1602
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 10 / 31 / 2016
Transaction ID : SA11A.458090
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	300.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 4055 OF 4311
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. WONG, ANNE, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 12 CURIE COURT

City IRVINE	State CA	Zip Code 92617-4026
----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
502.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		23		2016

Transaction ID : SA11A.446331

Amount of Each Receipt this Period
100.00

Memo Item CONTRIBUTION

B. WONHAM, FREDERICK, S., MR.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 501 RIVER DRIVE

City VERO BEACH	State FL	Zip Code 32963-2127
--------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11		01		2016

Transaction ID : SA11A.461668

Amount of Each Receipt this Period
1500.00

Memo Item CONTRIBUTION

C. WOOD, BRISON, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 146 ANCHOR DRIVE

City VERO BEACH	State FL	Zip Code 32963-2941
--------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) INFORMATION REQUESTED PER BEST EFFORTS	Occupation (for Individual) INFORMATION REQUESTED PER BES
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
750.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		25		2016

Transaction ID : SA11A.447573

Amount of Each Receipt this Period
750.00

Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	2350.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 4056 OF 4311
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. WOOD, CARLTON, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 10245 HASTINGS PLACE

City HARRISBURG	State NC	Zip Code 28075-6621
--------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
300.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		21		2016

Transaction ID : SA11A.444107

Amount of Each Receipt this Period
100.00

Memo Item CONTRIBUTION

B. WOOD, CARLTON, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 10245 HASTINGS PLACE

City HARRISBURG	State NC	Zip Code 28075-6621
--------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
300.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		21		2016

Transaction ID : SA11A.444110

Amount of Each Receipt this Period
100.00

Memo Item CONTRIBUTION

C. WOOD, CARLTON, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 10245 HASTINGS PLACE

City HARRISBURG	State NC	Zip Code 28075-6621
--------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
300.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11		04		2016

Transaction ID : SA11A.472056

Amount of Each Receipt this Period
100.00

Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	300.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 4057 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. WOOD, CYNTHIA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2015 RUSSELL DR
 City ZANESVILLE State OH Zip Code 43701-7912
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 325.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 02 / 2016
Transaction ID : SA11A.470176
 Amount of Each Receipt this Period
 50.00
 Memo Item
 CONTRIBUTION

B. WOOD, CYNTHIA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2015 RUSSELL DR
 City ZANESVILLE State OH Zip Code 43701-7912
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 325.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 02 / 2016
Transaction ID : SA11A.470178
 Amount of Each Receipt this Period
 50.00
 Memo Item
 CONTRIBUTION

C. WOOD, CYNTHIA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2015 RUSSELL DR
 City ZANESVILLE State OH Zip Code 43701-7912
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 325.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 04 / 2016
Transaction ID : SA11A.470358
 Amount of Each Receipt this Period
 25.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 125.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 4058 OF 4311
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. WOOD, DOROTHY, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 46227 KOAENA PLACE

City KANEEOHE	State HI	Zip Code 96744-4134
------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
660.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		25		2016

Transaction ID : SA11A.448319

Amount of Each Receipt this Period
30.00

Memo Item CONTRIBUTION

B. WOOD, DOROTHY, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 46227 KOAENA PLACE

City KANEEOHE	State HI	Zip Code 96744-4134
------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
660.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		25		2016

Transaction ID : SA11A.448341

Amount of Each Receipt this Period
30.00

Memo Item CONTRIBUTION

C. WOOD, DOROTHY, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 46227 KOAENA PLACE

City KANEEOHE	State HI	Zip Code 96744-4134
------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
660.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		31		2016

Transaction ID : SA11A.458001

Amount of Each Receipt this Period
25.00

Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	85.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 4059 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. WOOD, DOROTHY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 46227 KOAENA PLACE
 City KANEEOHE State HI Zip Code 96744-4134
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 660.00

Date of Receipt 10 / 31 / 2016
Transaction ID : SA11A.458028
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

B. WOOD, DOROTHY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 46227 KOAENA PLACE
 City KANEEOHE State HI Zip Code 96744-4134
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 660.00

Date of Receipt 10 / 31 / 2016
Transaction ID : SA11A.458029
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

C. WOOD, DOROTHY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 46227 KOAENA PLACE
 City KANEEOHE State HI Zip Code 96744-4134
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 660.00

Date of Receipt 10 / 29 / 2016
Transaction ID : SA11A.460630
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 75.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 4060 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. WOOD, GERALD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3844 LAKE BONAPARTE DR
 City HARVEY State LA Zip Code 70058-5578
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 299.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 20 / 2016
Transaction ID : SA11A.442603
 Amount of Each Receipt this Period
 50.00
 Memo Item
 CONTRIBUTION

B. WOOD, GERALD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3844 LAKE BONAPARTE DR
 City HARVEY State LA Zip Code 70058-5578
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 299.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 01 / 2016
Transaction ID : SA11A.463053
 Amount of Each Receipt this Period
 50.00
 Memo Item
 CONTRIBUTION

C. WOOD, JOHN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5905 W MEADOWPARK LANE
 City CRYSTAL RIVER State FL Zip Code 34429-2701
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 354.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 30 / 2016
Transaction ID : SA11A.460132
 Amount of Each Receipt this Period
 59.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	159.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 4061 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. WOOD, JOHN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5905 W MEADOWPARK LANE
 City CRYSTAL RIVER State FL Zip Code 34429-2701
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 354.00

Date of Receipt 11 / 04 / 2016
Transaction ID : SA11A.472718
 Amount of Each Receipt this Period 59.00
 Memo Item CONTRIBUTION

B. WOOD, MARGARET, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 6790 REEDER MESA RD
 City WHITEWATER State CO Zip Code 81527-9507
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 350.00

Date of Receipt 10 / 28 / 2016
Transaction ID : SA11A.456383
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

C. WOOD, RICHARD, L., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3775 WEST D. AVE
 City KALAMAZOO State MI Zip Code 49009-9080
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1250.00

Date of Receipt 11 / 02 / 2016
Transaction ID : SA11A.470120
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	409.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 4062 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. WOOD, RICHARD, L., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3775 WEST D. AVE
 City KALAMAZOO State MI Zip Code 49009-9080
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 04 / 2016
Transaction ID : SA11A.472078
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION

B. WOOD, RICHARD, L., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3775 WEST D. AVE
 City KALAMAZOO State MI Zip Code 49009-9080
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 04 / 2016
Transaction ID : SA11A.473998
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION

C. WOOD, WILL, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 212 FELTON DRIVE
 City MENLO PARK State CA Zip Code 94025-3004
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 2000.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 04 / 2016
Transaction ID : SA11A.467469
 Amount of Each Receipt this Period
 1000.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	1200.00
TOTAL This Period (last page this line number only).....▶	

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 4063 OF 4311
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. WOODBURY, BRUCE, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1501 SAN FELIPE DRIVE

City BOULDER CITY	State NV	Zip Code 89005-3408
----------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) SELF EMPLOYED	Occupation (for Individual) ATTORNEY
--	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
400.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
11		03		2016

Transaction ID : SA11A.465271

Amount of Each Receipt this Period
200.00

Memo Item CONTRIBUTION

B. WOODHULL, BARBARA, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 121 JADE AVENUE

City NEWPORT BEACH	State CA	Zip Code 92662-1321
-----------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) HOMEMAKER
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
2000.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
10		25		2016

Transaction ID : SA11A.447279

Amount of Each Receipt this Period
1000.00

Memo Item CONTRIBUTION

C. WOODIS, CAROLINE, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1201 WHITE HORSE TRAIL

City METAMORA	State IL	Zip Code 61548-8313
------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
300.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
11		07		2016

Transaction ID : SA11A.474678

Amount of Each Receipt this Period
25.00

Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	1225.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 4064 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. WOODWARD, ALBERT, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 26 NARBROOK PARK
 City NARBERTH State PA Zip Code 19072-2124
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 375.00

Date of Receipt 11 / 03 / 2016
Transaction ID : SA11A.469342
 Amount of Each Receipt this Period 200.00
 Memo Item CONTRIBUTION

B. WOODWARD, ALBERT, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 26 NARBROOK PARK
 City NARBERTH State PA Zip Code 19072-2124
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 375.00

Date of Receipt 11 / 06 / 2016
Transaction ID : SA11A.476800
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

C. WOOLSEY, RICK, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 234 VENTURE ST. 100
 City SAN MARCOS State CA Zip Code 92078-4399
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RICHARD & RICHARD CONSTRUCTION Occupation (for Individual) GEN.CONTRACTOR
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 530.00

Date of Receipt 10 / 21 / 2016
Transaction ID : SA11A.444523
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	275.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 4065 OF 4311
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. WOOLSEY, RICK, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 234 VENTURE ST.
 100
 City SAN MARCOS State CA Zip Code 92078-4399
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RICHARD & RICHARD CONSTRUCTION Occupation (for Individual) GEN.CONTRACTOR
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 530.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 04 / 2016
Transaction ID : SA11A.473328
 Amount of Each Receipt this Period
 50.00
 Memo Item
 CONTRIBUTION

B. WOOLSEY, ROY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 26649 SNELL LANE
 City LOS ALTOS HILLS State CA Zip Code 94022-2039
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 305.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 29 / 2016
Transaction ID : SA11A.460940
 Amount of Each Receipt this Period
 30.00
 Memo Item
 CONTRIBUTION

C. WORONOFF, NOGA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 28 WILLIAM J. HEIGHTS
 City FRAMINGHAM State MA Zip Code 01702-6134
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) CENGAGE LEARNING Occupation (for Individual) SOFTWARE ENGINEER
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 26 / 2016
Transaction ID : SA11A.451086
 Amount of Each Receipt this Period
 50.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶ 130.00
TOTAL This Period (last page this line number only).....▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 4066 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
Team Ryan

A. WORONOFF, NOGA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 28 WILLIAM J. HEIGHTS
 City FRAMINGHAM State MA Zip Code 01702-6134
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) CENGAGE LEARNING Occupation (for Individual) SOFTWARE ENGINEER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt 11 / 04 / 2016
Transaction ID : SA11A.472328
 Amount of Each Receipt this Period 50.00
 Memo Item
 CONTRIBUTION

B. WORTH, BERNARD, , DR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1775 LEXINGTON AVE S 14
 City SAINT PAUL State MN Zip Code 55118-3624
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 750.00

Date of Receipt 10 / 29 / 2016
Transaction ID : SA11A.460654
 Amount of Each Receipt this Period 50.00
 Memo Item
 CONTRIBUTION

C. WOTIPKA, LINDA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1205 DICKENSON STREET
 City WAYZATA State MN Zip Code 55391-9532
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) CONSULTANT
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt 10 / 28 / 2016
Transaction ID : SA11A.456369
 Amount of Each Receipt this Period 25.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	125.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 4067 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. WOTIPKA, LINDA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1205 DICKENSON STREET
 City WAYZATA State MN Zip Code 55391-9532
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) CONSULTANT
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt 11 / 03 / 2016
Transaction ID : SA11A.469042
 Amount of Each Receipt this Period 75.00
 Memo Item CONTRIBUTION

B. WRAY, BRUCE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 15156 N. RUGGED LARK D
 City TUCSON State AZ Zip Code 85739-8306
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) BRUCE WRAY Occupation (for Individual) MR.
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 350.00

Date of Receipt 11 / 02 / 2016
Transaction ID : SA11A.466070
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

C. WRIGHT, BRADLEY, C., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 12804 ROSE GROVE DRIVE
 City OAK HILL State VA Zip Code 20171-1753
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) BANNER & WITCOFF, LTD Occupation (for Individual) ATTORNEY
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 450.00

Date of Receipt 10 / 26 / 2016
Transaction ID : SA11A.451207
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	375.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 4068 OF 4311		
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14	<input type="checkbox"/> 11c <input type="checkbox"/> 15	<input type="checkbox"/> 12 <input type="checkbox"/> 16

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NAME OF COMMITTEE (In Full)
Team Ryan

A. WRIGHT, BROOKS, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 16 HIGHLAND PARK PLACE
 City RYE State NY Zip Code 10580-1736
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) MARINE & INDUSTRIAL Occupation (for Individual) VICE PRESIDENT
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 2275.00

Date of Receipt 10 / 24 / 2016
Transaction ID : SA11A.445818
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

B. WRIGHT, BROOKS, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 16 HIGHLAND PARK PLACE
 City RYE State NY Zip Code 10580-1736
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) MARINE & INDUSTRIAL Occupation (for Individual) VICE PRESIDENT
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 2275.00

Date of Receipt 10 / 25 / 2016
Transaction ID : SA11A.448540
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

C. WRIGHT, BROOKS, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 16 HIGHLAND PARK PLACE
 City RYE State NY Zip Code 10580-1736
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) MARINE & INDUSTRIAL Occupation (for Individual) VICE PRESIDENT
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 2275.00

Date of Receipt 10 / 26 / 2016
Transaction ID : SA11A.450554
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	300.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 4069 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
Team Ryan

A. WRIGHT, BROOKS, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 16 HIGHLAND PARK PLACE
 City RYE State NY Zip Code 10580-1736
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) MARINE & INDUSTRIAL Occupation (for Individual) VICE PRESIDENT
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 2275.00

Date of Receipt 10 / 27 / 2016
Transaction ID : SA11A.453619
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

B. WRIGHT, BROOKS, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 16 HIGHLAND PARK PLACE
 City RYE State NY Zip Code 10580-1736
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) MARINE & INDUSTRIAL Occupation (for Individual) VICE PRESIDENT
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 2275.00

Date of Receipt 10 / 28 / 2016
Transaction ID : SA11A.455624
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

C. WRIGHT, BROOKS, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 16 HIGHLAND PARK PLACE
 City RYE State NY Zip Code 10580-1736
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) MARINE & INDUSTRIAL Occupation (for Individual) VICE PRESIDENT
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 2275.00

Date of Receipt 10 / 31 / 2016
Transaction ID : SA11A.458727
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	150.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 4070 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. WRIGHT, BROOKS, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 16 HIGHLAND PARK PLACE
 City RYE State NY Zip Code 10580-1736
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) MARINE & INDUSTRIAL Occupation (for Individual) VICE PRESIDENT
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 2275.00

Date of Receipt 11 / 01 / 2016
Transaction ID : SA11A.462358
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

B. WRIGHT, BROOKS, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 16 HIGHLAND PARK PLACE
 City RYE State NY Zip Code 10580-1736
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) MARINE & INDUSTRIAL Occupation (for Individual) VICE PRESIDENT
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 2275.00

Date of Receipt 11 / 02 / 2016
Transaction ID : SA11A.466763
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

C. WRIGHT, BROOKS, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 16 HIGHLAND PARK PLACE
 City RYE State NY Zip Code 10580-1736
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) MARINE & INDUSTRIAL Occupation (for Individual) VICE PRESIDENT
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 2275.00

Date of Receipt 11 / 03 / 2016
Transaction ID : SA11A.469020
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	200.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 4071 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
Team Ryan

A. WRIGHT, BROOKS, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 16 HIGHLAND PARK PLACE
 City RYE State NY Zip Code 10580-1736
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) MARINE & INDUSTRIAL Occupation (for Individual) VICE PRESIDENT
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 2275.00

Date of Receipt
 11 / 07 / 2016
Transaction ID : SA11A.475981
 Amount of Each Receipt this Period
 50.00
 Memo Item
 CONTRIBUTION

B. WRIGHT, GAYLE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 433 WINDSOR PARK DRIVE
 City DAYTON State OH Zip Code 45459-4131
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) DON WRIGHT REALTY LLC Occupation (for Individual) EXECUTIVR
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 255.00

Date of Receipt
 10 / 28 / 2016
Transaction ID : SA11A.456437
 Amount of Each Receipt this Period
 30.00
 Memo Item
 CONTRIBUTION

C. WRIGHT, GAYLE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 433 WINDSOR PARK DRIVE
 City DAYTON State OH Zip Code 45459-4131
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) DON WRIGHT REALTY LLC Occupation (for Individual) EXECUTIVR
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 255.00

Date of Receipt
 10 / 30 / 2016
Transaction ID : SA11A.464937
 Amount of Each Receipt this Period
 30.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	110.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 4072 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. WRIGHT, GAYLE, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 433 WINDSOR PARK DRIVE

City DAYTON	State OH	Zip Code 45459-4131
----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) DON WRIGHT REALTY LLC	Occupation (for Individual) EXECUTIVR
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
255.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11		02		2016

Transaction ID : SA11A.466021

Amount of Each Receipt this Period
25.00

Memo Item
CONTRIBUTION

B. WRIGHT, GAYLE, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 433 WINDSOR PARK DRIVE

City DAYTON	State OH	Zip Code 45459-4131
----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) DON WRIGHT REALTY LLC	Occupation (for Individual) EXECUTIVR
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
255.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11		04		2016

Transaction ID : SA11A.471450

Amount of Each Receipt this Period
30.00

Memo Item
CONTRIBUTION

C. WRIGHT, GAYLE, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 433 WINDSOR PARK DRIVE

City DAYTON	State OH	Zip Code 45459-4131
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) DON WRIGHT REALTY LLC	Occupation (for Individual) EXECUTIVR
--	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
255.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11		04		2016

Transaction ID : SA11A.471456

Amount of Each Receipt this Period
30.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	85.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 4073 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
Team Ryan

A. WRIGHT, GAYLE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 433 WINDSOR PARK DRIVE
 City DAYTON State OH Zip Code 45459-4131
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) DON WRIGHT REALTY LLC Occupation (for Individual) EXECUTIVR
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 255.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 04 / 2016
Transaction ID : SA11A.473551
 Amount of Each Receipt this Period
 25.00
 Memo Item
 CONTRIBUTION

B. WRIGHT, GEORGE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5 GLEBE CLOSE
 City RICHMOND State VA Zip Code 23227-3334
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 350.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 31 / 2016
Transaction ID : SA11A.464390
 Amount of Each Receipt this Period
 50.00
 Memo Item
 CONTRIBUTION

C. WRIGHT, JAMES, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 410 TERRACE TRAIL EAST
 City LAKE QUIVIRA State KS Zip Code 66217-8505
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 05 / 2016
Transaction ID : SA11A.478960
 Amount of Each Receipt this Period
 500.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	575.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 4074 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. WRIGHT, KATHLEEN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 16 LAKESIDE WAY
 City PALM COAST State FL Zip Code 32137-1636
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 10 / 20 / 2016
Transaction ID : SA11A.441936
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

B. WRIGHT, KENNETH, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2009 RUSTIC DRIVE
 City CASPER State WY Zip Code 82609-3407
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 950.00

Date of Receipt 10 / 23 / 2016
Transaction ID : SA11A.449592
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

C. WRIGHT, KENNETH, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2009 RUSTIC DRIVE
 City CASPER State WY Zip Code 82609-3407
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 950.00

Date of Receipt 10 / 27 / 2016
Transaction ID : SA11A.453551
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶ 100.00
TOTAL This Period (last page this line number only).....▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 4075 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
Team Ryan

A. WRIGHT, KENNETH, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2009 RUSTIC DRIVE
 City CASPER State WY Zip Code 82609-3407
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 950.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 31 / 2016
Transaction ID : SA11A.458876
 Amount of Each Receipt this Period
 50.00
 Memo Item
 CONTRIBUTION

B. WRIGHT, KENNETH, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2009 RUSTIC DRIVE
 City CASPER State WY Zip Code 82609-3407
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 950.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 29 / 2016
Transaction ID : SA11A.460497
 Amount of Each Receipt this Period
 50.00
 Memo Item
 CONTRIBUTION

C. WRIGHT, KENNETH, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2009 RUSTIC DRIVE
 City CASPER State WY Zip Code 82609-3407
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 950.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 02 / 2016
Transaction ID : SA11A.465999
 Amount of Each Receipt this Period
 50.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	150.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 4076 OF 4311
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
Team Ryan

A. WRIGHT, KENNETH, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 2009 RUSTIC DRIVE

City CASPER	State WY	Zip Code 82609-3407
----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
950.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	07	/	2016

Transaction ID : SA11A.474844

Amount of Each Receipt this Period
25.00

Memo Item CONTRIBUTION

B. WRIGHT, LARRY, F., MR.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address PO BOX 300

City LONDON	State TX	Zip Code 76854-0300
----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
400.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	27	/	2016

Transaction ID : SA11A.452300

Amount of Each Receipt this Period
200.00

Memo Item CONTRIBUTION

C. WRIGHT, NANCY, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 10111 N. COMANCHE DR.

City SPOKANE	State WA	Zip Code 99208-9367
-----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
205.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	28	/	2016

Transaction ID : SA11A.456121

Amount of Each Receipt this Period
25.00

Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	250.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 4077 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
Team Ryan

A. WRIGHT, NANCY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 10111 N. COMANCHE DR.
 City SPOKANE State WA Zip Code 99208-9367
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 205.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 04 / 2016
Transaction ID : SA11A.470883
 Amount of Each Receipt this Period
 25.00
 Memo Item
 CONTRIBUTION

B. WRIGHT, ROBERT, C., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 610 FIFTH AVE APT 605
 City NEW YORK State NY Zip Code 10020-2403
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) ONE& Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 10000.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 01 / 2016
Transaction ID : SA11A.461916
 Amount of Each Receipt this Period
 5000.00
 Memo Item
 CONTRIBUTION

C. WRIGHT, SAMUEL, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO BOX 620954
 City WOODSIDE State CA Zip Code 94062-0954
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) WRIGHT & CO. Occupation (for Individual) PROPERTY MGT.
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 04 / 2016
Transaction ID : SA11A.471917
 Amount of Each Receipt this Period
 25.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	5050.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 4078 OF 4311
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
Team Ryan

A. WRIGHT, VALERIE, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 340 HIGHLAND AVENUE

City MEDIA	State PA	Zip Code 19063-2208
---------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
318.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	20	/	2016

Transaction ID : SA11A.441987

Amount of Each Receipt this Period
159.00

Memo Item CONTRIBUTION

B. WRIGHT, VALERIE, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 340 HIGHLAND AVENUE

City MEDIA	State PA	Zip Code 19063-2208
---------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
318.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	04	/	2016

Transaction ID : SA11A.472909

Amount of Each Receipt this Period
159.00

Memo Item CONTRIBUTION

C. WROTEN, CYNDA, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 308 RIDGEWOOD ROAD

City FORT WORTH	State TX	Zip Code 76107-1076
--------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) TEXAS HEALTH CARE, PLLC	Occupation (for Individual) MANAGER
--	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
350.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	30	/	2016

Transaction ID : SA11A.460324

Amount of Each Receipt this Period
100.00

Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	418.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 4079 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. WRUBLE, LAWRENCE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 324 WINTER OAK LANE
 City MEMPHIS State TN Zip Code 38120-2473
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) GASTRO1 Occupation (for Individual) PHYSICIAN
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 385.00

Date of Receipt 10 / 29 / 2016
Transaction ID : SA11A.460994
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

B. WRUBLE, LAWRENCE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 324 WINTER OAK LANE
 City MEMPHIS State TN Zip Code 38120-2473
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) GASTRO1 Occupation (for Individual) PHYSICIAN
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 385.00

Date of Receipt 11 / 04 / 2016
Transaction ID : SA11A.471658
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

C. WRYE, EDRA, S., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2866 SGODA RD
 City MACON State GA Zip Code 31217-8253
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 610.00

Date of Receipt 10 / 21 / 2016
Transaction ID : SA11A.444671
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 125.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 4080 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. WRYE, EDRA, S., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2866 SGODA RD
 City MACON State GA Zip Code 31217-8253
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 610.00

Date of Receipt 10 / 23 / 2016
Transaction ID : SA11A.446409
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

B. WRYE, EDRA, S., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2866 SGODA RD
 City MACON State GA Zip Code 31217-8253
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 610.00

Date of Receipt 10 / 25 / 2016
Transaction ID : SA11A.448123
 Amount of Each Receipt this Period 30.00
 Memo Item CONTRIBUTION

C. WRYE, EDRA, S., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2866 SGODA RD
 City MACON State GA Zip Code 31217-8253
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 610.00

Date of Receipt 10 / 25 / 2016
Transaction ID : SA11A.448126
 Amount of Each Receipt this Period 30.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 85.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 4081 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. WRYE, EDRA, S., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2866 SGODA RD
 City MACON State GA Zip Code 31217-8253
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 610.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 28 / 2016
Transaction ID : SA11A.455646
 Amount of Each Receipt this Period
 25.00
 Memo Item
 CONTRIBUTION

B. WRYE, EDRA, S., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2866 SGODA RD
 City MACON State GA Zip Code 31217-8253
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 610.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 28 / 2016
Transaction ID : SA11A.455650
 Amount of Each Receipt this Period
 25.00
 Memo Item
 CONTRIBUTION

C. WRYE, EDRA, S., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2866 SGODA RD
 City MACON State GA Zip Code 31217-8253
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 610.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 02 / 2016
Transaction ID : SA11A.467153
 Amount of Each Receipt this Period
 25.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	75.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 4082 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
Team Ryan

A. WU, C., , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1914 ISLA DE PALMA CIRCLE
 City NAPLES State FL Zip Code 34119-3402
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 850.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 26 / 2016
Transaction ID : SA11A.450724
 Amount of Each Receipt this Period
 250.00
 Memo Item
 CONTRIBUTION

B. WU, C., , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1914 ISLA DE PALMA CIRCLE
 City NAPLES State FL Zip Code 34119-3402
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 850.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 27 / 2016
Transaction ID : SA11A.452967
 Amount of Each Receipt this Period
 250.00
 Memo Item
 CONTRIBUTION

C. WULF, JEROLD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 17 BUCKSKIN CIRCLE
 City SANTA FE State NM Zip Code 87506-0107
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 05 / 2016
Transaction ID : SA11A.478994
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	600.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 4083 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. WURZER, DOROTHY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 18430 DOTY AVE.
 City TORRANCE State CA Zip Code 90504-4823
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 275.00

Date of Receipt **10 / 30 / 2016**
Transaction ID : SA11A.460143
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

B. WURZER, DOROTHY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 18430 DOTY AVE.
 City TORRANCE State CA Zip Code 90504-4823
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 275.00

Date of Receipt **11 / 04 / 2016**
Transaction ID : SA11A.473615
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

C. WUTHIER, ROY, E., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 714 VINTAGE LANE
 City COLUMBIA State SC Zip Code 29210-5109
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 850.00

Date of Receipt **10 / 29 / 2016**
Transaction ID : SA11A.460529
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶ 150.00
TOTAL This Period (last page this line number only).....▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 4084 OF 4311
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Team Ryan

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name A. WUTKE, MARY, , ,		Date of Receipt M M M / D D D / Y Y Y Y Y Y 10 / 26 / 2016
Mailing Address 6666 ODANA RD STE 215		Transaction ID : SA11A.450734
City MADISON	State WI	Zip Code 53719-1012
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 250.00
Name of Employer (for Individual) SELF EMPLOYED	Occupation (for Individual) FINANCE	<input type="checkbox"/> Memo Item CONTRIBUTION
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name B. WYATT, M.D., CREED, , ,		Date of Receipt M M M / D D D / Y Y Y Y Y Y 10 / 31 / 2016
Mailing Address 5445 CARUTH HAVEN LN. #1521		Transaction ID : SA11A.458367
City DALLAS	State TX	Zip Code 75225-8162
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 25.00
Name of Employer (for Individual) SELF EMPLOYED	Occupation (for Individual) PHYSICIAN	<input type="checkbox"/> Memo Item CONTRIBUTION
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 375.00	

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name C. WYATT, M.D., CREED, , ,		Date of Receipt M M M / D D D / Y Y Y Y Y Y 11 / 02 / 2016
Mailing Address 5445 CARUTH HAVEN LN. #1521		Transaction ID : SA11A.466341
City DALLAS	State TX	Zip Code 75225-8162
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 25.00
Name of Employer (for Individual) SELF EMPLOYED	Occupation (for Individual) PHYSICIAN	<input type="checkbox"/> Memo Item CONTRIBUTION
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Aggregate Year-to-Date ▼ 375.00	

SUBTOTAL of Receipts This Page (optional).....▶	300.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 4085 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. WYMAN, MARY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 218 HILLSIDE RD.
 City WESTFIELD State MA Zip Code 01085-4108
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 235.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 31 / 2016
Transaction ID : SA11A.457676
 Amount of Each Receipt this Period
 10.00
 Memo Item
 CONTRIBUTION

B. XIONG, SHANJI, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3525 DEL MAR HEIGHTS RD, 362
 City SAN DIEGO State CA Zip Code 92130-2199
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) EXPERIAN Occupation (for Individual) SCIENTIST
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1500.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 29 / 2016
Transaction ID : SA11A.460525
 Amount of Each Receipt this Period
 500.00
 Memo Item
 CONTRIBUTION

C. XIONG, SHANJI, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3525 DEL MAR HEIGHTS RD, 362
 City SAN DIEGO State CA Zip Code 92130-2199
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) EXPERIAN Occupation (for Individual) SCIENTIST
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 1500.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 28 / 2016
Transaction ID : SA11A.461433
 Amount of Each Receipt this Period
 1000.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	1510.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 4086 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. YACKEL, MARY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3946 N PONY DR
 City BEVERLY HILLS State FL Zip Code 34465-4438
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 06 / 2016
Transaction ID : SA11A.477884
 Amount of Each Receipt this Period
 250.00
 Memo Item
 CONTRIBUTION

B. YANEZ, ROGER, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4637 N.56TH LANE
 City PHOENIX State AZ Zip Code 85031-1609
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 31 / 2016
Transaction ID : SA11A.458221
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION

C. YANG, JIANLI, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 658 WASHINGTON ST
 City BROOKLINE State MA Zip Code 02446-4564
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) INFORMATION REQUESTED PER BEST EFFORTS Occupation (for Individual) INFORMATION REQUESTED PER BEST EFFORTS
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 2700.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 01 / 2016
Transaction ID : SA11A.461914
 Amount of Each Receipt this Period
 2700.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	3050.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 4087 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
Team Ryan

A. YANG, JIAN, HUA, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 141 MONUMENT ST
 City ROCKVILLE State MD Zip Code 20850-2821
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) INFORMATION REQUESTED PER BEST EFFORTS Occupation (for Individual) INFORMATION REQUESTED PER BE
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 2700.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 01 / 2016
Transaction ID : SA11A.461912
 Amount of Each Receipt this Period
 2700.00
 Memo Item
 CONTRIBUTION

B. YANKUS, BILL, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 120 PARK AVENUE
 City BRONXVILLE State NY Zip Code 10708-1733
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 225.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 31 / 2016
Transaction ID : SA11A.458079
 Amount of Each Receipt this Period
 25.00
 Memo Item
 CONTRIBUTION

C. YANTZER, STEPHEN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1415 REMONT CIRCLE
 City OAK PARK State CA Zip Code 91377-4739
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 300.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 31 / 2016
Transaction ID : SA11A.464728
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	2825.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 4088 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. YANTZER, STEPHEN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1415 REMONT CIRCLE
 City OAK PARK State CA Zip Code 91377-4739
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 11 / 04 / 2016
Transaction ID : SA11A.470456
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

B. YANTZER, STEPHEN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1415 REMONT CIRCLE
 City OAK PARK State CA Zip Code 91377-4739
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 11 / 06 / 2016
Transaction ID : SA11A.477076
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

C. YATES, LINDA, , MRS.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 149 LEISURE COURT
 City WYOMISSING State PA Zip Code 19610-1969
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) CARLINO CAPITAL MANAGEMENT Occupation (for Individual) CLIENT ADVISOR
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 875.00

Date of Receipt 10 / 29 / 2016
Transaction ID : SA11A.461109
 Amount of Each Receipt this Period 75.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	275.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 4089 OF 4311
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. YATES, LINDA, , MRS.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 149 LEISURE COURT

City WYOMISSING	State PA	Zip Code 19610-1969
--------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) CARLINO CAPITAL MANAGEMENT	Occupation (for Individual) CLIENT ADVISOR
---	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
875.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
11		04		2016

Transaction ID : SA11A.471363

Amount of Each Receipt this Period
75.00

Memo Item
CONTRIBUTION

B. YATES, PAUL, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 6310 LAKEHURST AVE.

City DALLAS	State TX	Zip Code 75230-5129
----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) SUNRISE EQUITY INVESTORS	Occupation (for Individual) BUSINESS OWNER/PRIVATE EQUITY
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
500.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
10		25		2016

Transaction ID : SA11A.452157

Amount of Each Receipt this Period
250.00

Memo Item
CONTRIBUTION

C. YATES, PAUL, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 6310 LAKEHURST AVE.

City DALLAS	State TX	Zip Code 75230-5129
----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) SUNRISE EQUITY INVESTORS	Occupation (for Individual) BUSINESS OWNER/PRIVATE EQUITY
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
500.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
10		30		2016

Transaction ID : SA11A.459515

Amount of Each Receipt this Period
250.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	575.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 4090 OF 4311
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
Team Ryan

A. YATES, STACY, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 2804 STONEGATE DR

City TEXARKANA	State TX	Zip Code 7503-5414
-------------------	-------------	-----------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) E-Z MART STORES, INC.	Occupation (for Individual) EXECUTIVE
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
10000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		24		2016

Transaction ID : SA11A.443473

Amount of Each Receipt this Period
10000.00

Memo Item
CONTRIBUTION

B. YEAGER, ANTON, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 186 EAST NICKLAUS AVE.

City KALISPELL	State MT	Zip Code 59901-2783
-------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
350.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		25		2016

Transaction ID : SA11A.448882

Amount of Each Receipt this Period
25.00

Memo Item
CONTRIBUTION

C. YEN, LILY, H., ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 132 HOLLYWOOD DR

City COPPELL	State TX	Zip Code 75019-7300
-----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
607.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		24		2016

Transaction ID : SA11A.443437

Amount of Each Receipt this Period
500.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	10525.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 4091 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
-----------------------------	-----------------------------	-----------------------------

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NAME OF COMMITTEE (In Full)
Team Ryan

A. YERINGTON, MICHAEL, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 100 COMMONS RD
 SUITE 7-109
 City DRIPPING SPRINGS State TX Zip Code 78620-4400
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) HILLSIDE ACRES Occupation (for Individual) PRESIDENT
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 10 / 26 / 2016
Transaction ID : SA11A.449945
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

B. YEROSHALMI, RUDI, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5143 BIRDWOOD RD
 City HOUSTON State TX Zip Code 77096-2601
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) REAL ESTATE
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 260.00

Date of Receipt 10 / 30 / 2016
Transaction ID : SA11A.459820
 Amount of Each Receipt this Period 260.00
 Memo Item CONTRIBUTION

C. YODER, LOWEL, , MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO BOX 444
 City HOLLAND State OH Zip Code 43528-0444
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 350.00

Date of Receipt 11 / 04 / 2016
Transaction ID : SA11A.467462
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	610.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 4092 OF 4311
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Team Ryan

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
A. YODER, LOWEL, , MR.,

Mailing Address **PO BOX 444**

City HOLLAND	State OH	Zip Code 43528-0444
------------------------	--------------------	-------------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
--	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
350.00

Date of Receipt
11 / 08 / 2016

Transaction ID : SA11A.467907

Amount of Each Receipt this Period
100.00

Memo Item
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
B. YODER, LOWEL, , MR.,

Mailing Address **PO BOX 444**

City HOLLAND	State OH	Zip Code 43528-0444
------------------------	--------------------	-------------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
--	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
350.00

Date of Receipt
11 / 08 / 2016

Transaction ID : SA11A.468012

Amount of Each Receipt this Period
50.00

Memo Item
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
C. YODER, RICHARD, , ,

Mailing Address **1642 LAKE PARK DR.**

City LAUREL	State MS	Zip Code 39440-2248
-----------------------	--------------------	-------------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) GILCHRIST SUMRALL YODER YODER & LEGGET	Occupation (for Individual) ATTORNEY
--	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
500.00

Date of Receipt
11 / 03 / 2016

Transaction ID : SA11A.468645

Amount of Each Receipt this Period
250.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	400.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 4093 OF 4311
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. YODER, RICHARD, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1642 LAKE PARK DR.

City LAUREL	State MS	Zip Code 39440-2248
----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) GILCHRIST SUMRALL YODER YODER & LEGGET	Occupation (for Individual) ATTORNEY
---	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	03	/	2016

Transaction ID : SA11A.468647

Amount of Each Receipt this Period
250.00

Memo Item
CONTRIBUTION

B. YOON, CHIJA, K., ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 100 PAINTED MOUNTAIN DR,

City LAS VEGAS	State NV	Zip Code 89148-2724
-------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) CCLV	Occupation (for Individual) CHRISTIAN WORKER
---	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
368.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	21	/	2016

Transaction ID : SA11A.444581

Amount of Each Receipt this Period
25.00

Memo Item
CONTRIBUTION

C. YOON, CHIJA, K., ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 100 PAINTED MOUNTAIN DR,

City LAS VEGAS	State NV	Zip Code 89148-2724
-------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) CCLV	Occupation (for Individual) CHRISTIAN WORKER
---	---

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
368.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	25	/	2016

Transaction ID : SA11A.448432

Amount of Each Receipt this Period
30.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	305.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 4094 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. YOON, CHIJA, K., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 100 PAINTED MOUNTAIN DR,
 City LAS VEGAS State NV Zip Code 89148-2724
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) CCLV Occupation (for Individual) CHRISTIAN WORKER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 368.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 04 / 2016
Transaction ID : SA11A.472411
 Amount of Each Receipt this Period
 25.00
 Memo Item
 CONTRIBUTION

B. YOON, CHIJA, K., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 100 PAINTED MOUNTAIN DR,
 City LAS VEGAS State NV Zip Code 89148-2724
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) CCLV Occupation (for Individual) CHRISTIAN WORKER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 368.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 04 / 2016
Transaction ID : SA11A.474106
 Amount of Each Receipt this Period
 5.00
 Memo Item
 CONTRIBUTION

C. YOON, CHIJA, K., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 100 PAINTED MOUNTAIN DR,
 City LAS VEGAS State NV Zip Code 89148-2724
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) CCLV Occupation (for Individual) CHRISTIAN WORKER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 368.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 07 / 2016
Transaction ID : SA11A.475242
 Amount of Each Receipt this Period
 10.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	40.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 4095 OF 4311
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. YOON, CHIJA, K., ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 100 PAINTED MOUNTAIN DR,

City LAS VEGAS	State NV	Zip Code 89148-2724
-------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) CCLV	Occupation (for Individual) CHRISTIAN WORKER
---	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
368.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	08	/	2016

Transaction ID : SA11A.479720

Amount of Each Receipt this Period
10.00

Memo Item
CONTRIBUTION

B. YORIO, FRANCIS, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 435 W. THORNAPPLE LANE

City MEQUON	State WI	Zip Code 53092-6242
----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) CONTROL SALES INC	Occupation (for Individual) SALES
--	--------------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
300.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	21	/	2016

Transaction ID : SA11A.444525

Amount of Each Receipt this Period
50.00

Memo Item
CONTRIBUTION

C. YORIO, FRANCIS, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 435 W. THORNAPPLE LANE

City MEQUON	State WI	Zip Code 53092-6242
----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) CONTROL SALES INC	Occupation (for Individual) SALES
--	--------------------------------------

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
300.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	04	/	2016

Transaction ID : SA11A.471825

Amount of Each Receipt this Period
50.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	110.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 4096 OF 4311
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
Team Ryan

A. YOUELL, KATHERINE, J., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3910 BALDWIN ROAD
 City CHESTER State VA Zip Code 23831-4703
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 11 / 08 / 2016
Transaction ID : SA11A.467955
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

B. YOUNGBLOOD, ALICE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2016 MAIN #2606
 City HOUSTON State TX Zip Code 77002-8948
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 10 / 24 / 2016
Transaction ID : SA11A.449250
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

C. YOUNGBLOOD, ALICE, M., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 121 N POST OAK LANE APT 505
 City HOUSTON State TX Zip Code 77024-7710
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt 10 / 25 / 2016
Transaction ID : SA11A.447545
 Amount of Each Receipt this Period 1000.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶ 1300.00
TOTAL This Period (last page this line number only).....▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 4097 OF 4311
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Team Ryan

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
A. YOUNG, BILL, , ,

Mailing Address 22440 HOGEYE RD

City MANOR	State TX	Zip Code 78653-5202
---------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NORTH HOUSTON POLE LINE	Occupation (for Individual) SUPERINTENDANT
--	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	03	/	2016

Transaction ID : SA11A.469000

Amount of Each Receipt this Period
250.00

Memo Item CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
B. YOUNG, JAMES, , ,

Mailing Address 822 HERITAGE ROAD

City CINNAMINSON	State NJ	Zip Code 08077-3704
---------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
225.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	30	/	2016

Transaction ID : SA11A.460263

Amount of Each Receipt this Period
75.00

Memo Item CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
C. YOUNG, JAMES, , ,

Mailing Address 822 HERITAGE ROAD

City CINNAMINSON	State NJ	Zip Code 08077-3704
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
225.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	04	/	2016

Transaction ID : SA11A.470756

Amount of Each Receipt this Period
75.00

Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	400.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 4098 OF 4311
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. YOUNGER, LEON, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 31 HOLLOWAY BLVD

City BROWNSBURG	State IN	Zip Code 46112-8356
--------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) PROS CONSULTING	Occupation (for Individual) CONSULTANT
--	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
375.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		31		2016

Transaction ID : SA11A.458858

Amount of Each Receipt this Period
25.00

Memo Item
CONTRIBUTION

B. YOUNGER, LEON, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 31 HOLLOWAY BLVD

City BROWNSBURG	State IN	Zip Code 46112-8356
--------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) PROS CONSULTING	Occupation (for Individual) CONSULTANT
--	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
375.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		31		2016

Transaction ID : SA11A.458860

Amount of Each Receipt this Period
25.00

Memo Item
CONTRIBUTION

C. YOUNGER, LEON, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 31 HOLLOWAY BLVD

City BROWNSBURG	State IN	Zip Code 46112-8356
--------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) PROS CONSULTING	Occupation (for Individual) CONSULTANT
--	---

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
375.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11		07		2016

Transaction ID : SA11A.476339

Amount of Each Receipt this Period
25.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	75.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 4099 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
Team Ryan

A. YOUNG, LINDA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 6624 LAMPE DR
 City WATAUGA State TX Zip Code 76148-2624
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 215.00

Date of Receipt 11 / 06 / 2016
Transaction ID : SA11A.478310
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

B. YOUNG, LINDA, A., MS.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2040 CEDAR POINT LN
 City CUMMING State GA Zip Code 30041-7255
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) FORSYTH COUNTY BOE Occupation (for Individual) PARAPROFESSIONAL
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 485.00

Date of Receipt 10 / 30 / 2016
Transaction ID : SA11A.459929
 Amount of Each Receipt this Period 30.00
 Memo Item CONTRIBUTION

C. YOUNG, MARK, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 750 E BRIDLE WAY
 City GILBERT State AZ Zip Code 85295-5957
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NATIONAL BANK OF ARIZONA Occupation (for Individual) BANKING
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 11 / 02 / 2016
Transaction ID : SA11A.469455
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	155.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 4100 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. YOUNG, NORMA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2114 YOSEMITE DR.
 City LEBANON State IN Zip Code 46052-3146
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 440.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 11 / 02 / 2016
Transaction ID : SA11A.470015
 Amount of Each Receipt this Period
 25.00
 Memo Item
 CONTRIBUTION

B. YOUNG, NORMA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2114 YOSEMITE DR.
 City LEBANON State IN Zip Code 46052-3146
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 440.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 11 / 02 / 2016
Transaction ID : SA11A.470017
 Amount of Each Receipt this Period
 25.00
 Memo Item
 CONTRIBUTION

C. YOUNG, NORMA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2114 YOSEMITE DR.
 City LEBANON State IN Zip Code 46052-3146
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 440.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 11 / 02 / 2016
Transaction ID : SA11A.470018
 Amount of Each Receipt this Period
 25.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	75.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 4101 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. YOUNG, NORMA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2114 YOSEMITE DR.
 City LEBANON State IN Zip Code 46052-3146
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 440.00

Date of Receipt 11 / 04 / 2016
Transaction ID : SA11A.472316
 Amount of Each Receipt this Period 30.00
 Memo Item CONTRIBUTION

B. YOUNG, NORMA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2114 YOSEMITE DR.
 City LEBANON State IN Zip Code 46052-3146
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 440.00

Date of Receipt 11 / 05 / 2016
Transaction ID : SA11A.478363
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

C. YOUNG, RICHARD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1423 TRAVIS CIRCLE NORTH
 City IRVING State TX Zip Code 75038-6238
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF-EMPLOYED Occupation (for Individual) SELF-EMPLOYED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 11 / 03 / 2016
Transaction ID : SA11A.474576
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	330.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 4102 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
A. YOUNG, RICHARD, A., MR.,

Mailing Address 301 WEST LYON FARM DRIVE

City GREENWICH	State CT	Zip Code 06831-4356
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
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Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		31		2016

Transaction ID : SA11A.464800

Amount of Each Receipt this Period
100.00

Memo Item CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
B. YOUNG, RICHARD, A., MR.,

Mailing Address 301 WEST LYON FARM DRIVE

City GREENWICH	State CT	Zip Code 06831-4356
-------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		31		2016

Transaction ID : SA11A.464805

Amount of Each Receipt this Period
100.00

Memo Item CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
C. YOUNG, RICHARD, A., MR.,

Mailing Address 301 WEST LYON FARM DRIVE

City GREENWICH	State CT	Zip Code 06831-4356
-------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11		04		2016

Transaction ID : SA11A.470581

Amount of Each Receipt this Period
50.00

Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	250.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 4103 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. YOUNG, THOMAS, L., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 8967 BLOOMFIELD BLVD
 City SARASOTA State FL Zip Code 34238-4452
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 3500.00

Date of Receipt 10 / 24 / 2016
Transaction ID : SA11A.445633
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

B. YOUNG, THOMAS, L., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 8967 BLOOMFIELD BLVD
 City SARASOTA State FL Zip Code 34238-4452
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 3500.00

Date of Receipt 11 / 02 / 2016
Transaction ID : SA11A.470113
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

C. YOUNG, THOMAS, L., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 8967 BLOOMFIELD BLVD
 City SARASOTA State FL Zip Code 34238-4452
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 3500.00

Date of Receipt 11 / 02 / 2016
Transaction ID : SA11A.470114
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	750.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 4104 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. YOUNG, THOMAS, L., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 8967 BLOOMFIELD BLVD
 City SARASOTA State FL Zip Code 34238-4452
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 3500.00

Date of Receipt 11 / 07 / 2016
Transaction ID : SA11A.474841
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

B. YOUNIS, ANTOINE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 11403 MEMORIAL CIRCLE
 City HOUSTON State TX Zip Code 77024-7512
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) PHYSICIAN
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 600.00

Date of Receipt 10 / 27 / 2016
Transaction ID : SA11A.452781
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

C. YOUNIS, ANTOINE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 11403 MEMORIAL CIRCLE
 City HOUSTON State TX Zip Code 77024-7512
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) PHYSICIAN
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 600.00

Date of Receipt 10 / 27 / 2016
Transaction ID : SA11A.453894
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 450.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 4105 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. YOUNIS, ANTOINE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 11403 MEMORIAL CIRCLE
 City HOUSTON State TX Zip Code 77024-7512
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) PHYSICIAN
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 600.00

Date of Receipt 11 / 04 / 2016
Transaction ID : SA11A.470992
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

B. YSURSA, GENEVIEVE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2846 S. TRAILWOOD WAY
 City BOISE State ID Zip Code 83716-5742
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) GENEVIEVE YSURSA Occupation (for Individual) TEACHER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 425.00

Date of Receipt 10 / 20 / 2016
Transaction ID : SA11A.442095
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

C. YSURSA, GENEVIEVE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2846 S. TRAILWOOD WAY
 City BOISE State ID Zip Code 83716-5742
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) GENEVIEVE YSURSA Occupation (for Individual) TEACHER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 425.00

Date of Receipt 10 / 28 / 2016
Transaction ID : SA11A.456077
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶ 150.00
TOTAL This Period (last page this line number only).....▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 4106 OF 4311
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
Team Ryan

A. YSURSA, GENEVIEVE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2846 S. TRAILWOOD WAY
 City BOISE State ID Zip Code 83716-5742
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) GENEVIEVE YSURSA Occupation (for Individual) TEACHER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 425.00

Date of Receipt 11 / 04 / 2016
Transaction ID : SA11A.470723
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

B. YU, FRANK, K., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 12003 BROOKGLEN DRIVE
 City SARATOGA State CA Zip Code 95070-3403
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) ACBEL POLYTECH (USA) INC. Occupation (for Individual) EXECUTIVE
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 11 / 03 / 2016
Transaction ID : SA11A.465447
 Amount of Each Receipt this Period 125.00
 Memo Item CONTRIBUTION

C. YUNDDT, JAMES, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 841 INVERNESS DR
 City LA CANADA State CA Zip Code 91011-4152
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) ROOFMASTER Occupation (for Individual) CEO
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 10 / 30 / 2016
Transaction ID : SA11A.460276
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶ 250.00
TOTAL This Period (last page this line number only).....▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 4107 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. YUNDDT, JAMES, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 841 INVERNESS DR
 City LA CANADA State CA Zip Code 91011-4152
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) ROOFMASTER Occupation (for Individual) CEO
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt **11 / 04 / 2016**
Transaction ID : SA11A.471428
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

B. ZACHARIAS, MARGARET, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 780 BUTTERCUP TRACE
 City ALPHARETTA State GA Zip Code 30022-5174
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RZIM Occupation (for Individual) VP
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt **10 / 25 / 2016**
Transaction ID : SA11A.452058
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

C. ZACHARIASEN, MOREEN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 21 TIMBER LANE
 City AVON State CT Zip Code 06001-2315
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 229.00

Date of Receipt **11 / 04 / 2016**
Transaction ID : SA11A.470319
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	375.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 4108 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. ZACHRY, EILENE, M., MRS.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 9818 - 63RD DR. NE
 City MARYSVILLE State WA Zip Code 98270-2416
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 279.00

Date of Receipt 11 / 08 / 2016
Transaction ID : SA11A.468087
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

B. ZACHRY, EILENE, M., MRS.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 9818 - 63RD DR. NE
 City MARYSVILLE State WA Zip Code 98270-2416
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 279.00

Date of Receipt 11 / 05 / 2016
Transaction ID : SA11A.478387
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

C. ZAKS, MARY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 45 MAYFLOWER DRIVE
 City TENAFLY State NJ Zip Code 07670-3131
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) INFORMATION REQUESTED PER BEST EFFORTS Occupation (for Individual) INFORMATION REQUESTED PER BES
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt 11 / 03 / 2016
Transaction ID : SA11A.465602
 Amount of Each Receipt this Period 1000.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	1050.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 4109 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. ZAMBONI, RICHARD, F., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 15714 COLORADO AVENUE
 City PARAMOUNT State CA Zip Code 90723-4211
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 10 / 27 / 2016
Transaction ID : SA11A.452868
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

B. ZAMPELL, RICHARD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 17810 VALLE VERDE ROAD
 City POWAY State CA Zip Code 92064-1006
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 10 / 29 / 2016
Transaction ID : SA11A.460489
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

C. ZAMRZLA, JOHNNY, , MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2229 EAST AVENUE Q
 City PALMDALE State CA Zip Code 93550-4140
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) WESTERN PACIFIC Occupation (for Individual) ROOFING & SHEETMETAL CONTRAC
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 1075.00

Date of Receipt 11 / 02 / 2016
Transaction ID : SA11A.466112
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	400.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 4110 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. ZAMRZLA, JOHNNY, , MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2229 EAST AVENUE Q
 City PALMDALE State CA Zip Code 93550-4140
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) WESTERN PACIFIC Occupation (for Individual) ROOFING & SHEETMETAL CONTRAC
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 1075.00

Date of Receipt 11 / 04 / 2016
Transaction ID : SA11A.471440
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

B. ZANDER, GWENDOLYN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1383 POPLAR POINTE, SE
 City SMYRNA State GA Zip Code 30082-2217
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RISK MANAAGEMENT PROVIDERS, INC. Occupation (for Individual) INSURANCE SALES
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 300.00

Date of Receipt 11 / 04 / 2016
Transaction ID : SA11A.471864
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

C. ZAR, JOHN, A., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 952 MANHATTAN BEACH BLVD. SUITE 220
 City MANHATTAN BEACH State CA Zip Code 90266-5130
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) Aggregate Year-to-Date ▼ 600.00

Date of Receipt 11 / 04 / 2016
Transaction ID : SA11A.472911
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	375.00
TOTAL This Period (last page this line number only).....▶	

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 4111 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
Team Ryan

A. ZARETZKA, JUDITH, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 529 STARLIGHT LN
 City ARROYO GRANDE State CA Zip Code 93420-4157
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 450.00

Date of Receipt **10 / 24 / 2016**
Transaction ID : SA11A.446241
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

B. ZARETZKA, JUDITH, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 529 STARLIGHT LN
 City ARROYO GRANDE State CA Zip Code 93420-4157
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 450.00

Date of Receipt **11 / 04 / 2016**
Transaction ID : SA11A.473620
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

C. ZAZI, ALEXANDER, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 7440 NORTH WASHTENAW
 City CHICAGO State IL Zip Code 60645-1437
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) ALEXANDER ZAZI Occupation (for Individual) DATA CLERK
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 360.00

Date of Receipt **10 / 20 / 2016**
Transaction ID : SA11A.441928
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	175.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 4112 OF 4311
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. ZAZI, ALEXANDER, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 7440 NORTH WASHTENAW
 City CHICAGO State IL Zip Code 60645-1437
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) ALEXANDER ZAZI Occupation (for Individual) DATA CLERK
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 360.00

Date of Receipt 10 / 26 / 2016
Transaction ID : SA11A.450776
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

B. ZAZI, ALEXANDER, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 7440 NORTH WASHTENAW
 City CHICAGO State IL Zip Code 60645-1437
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) ALEXANDER ZAZI Occupation (for Individual) DATA CLERK
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 360.00

Date of Receipt 10 / 26 / 2016
Transaction ID : SA11A.450782
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

C. ZAZI, ALEXANDER, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 7440 NORTH WASHTENAW
 City CHICAGO State IL Zip Code 60645-1437
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) ALEXANDER ZAZI Occupation (for Individual) DATA CLERK
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 360.00

Date of Receipt 10 / 27 / 2016
Transaction ID : SA11A.453598
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 75.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 4113 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
Team Ryan

A. ZAZI, ALEXANDER, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 7440 NORTH WASHTENAW
 City CHICAGO State IL Zip Code 60645-1437
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) ALEXANDER ZAZI Occupation (for Individual) DATA CLERK
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 360.00

Date of Receipt 10 / 30 / 2016
Transaction ID : SA11A.459878
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

B. ZAZI, ALEXANDER, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 7440 NORTH WASHTENAW
 City CHICAGO State IL Zip Code 60645-1437
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) ALEXANDER ZAZI Occupation (for Individual) DATA CLERK
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 360.00

Date of Receipt 11 / 02 / 2016
Transaction ID : SA11A.466977
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

C. ZAZI, ALEXANDER, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 7440 NORTH WASHTENAW
 City CHICAGO State IL Zip Code 60645-1437
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) ALEXANDER ZAZI Occupation (for Individual) DATA CLERK
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 360.00

Date of Receipt 11 / 02 / 2016
Transaction ID : SA11A.466979
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 75.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 4114 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. ZAZI, ALEXANDER, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 7440 NORTH WASHTENAW
 City CHICAGO State IL Zip Code 60645-1437
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) ALEXANDER ZAZI Occupation (for Individual) DATA CLERK
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 360.00

Date of Receipt 11 / 02 / 2016
Transaction ID : SA11A.467002
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

B. ZAZI, ALEXANDER, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 7440 NORTH WASHTENAW
 City CHICAGO State IL Zip Code 60645-1437
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) ALEXANDER ZAZI Occupation (for Individual) DATA CLERK
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 360.00

Date of Receipt 11 / 07 / 2016
Transaction ID : SA11A.474695
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

C. ZAZI, ALEXANDER, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 7440 NORTH WASHTENAW
 City CHICAGO State IL Zip Code 60645-1437
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) ALEXANDER ZAZI Occupation (for Individual) DATA CLERK
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 360.00

Date of Receipt 11 / 06 / 2016
Transaction ID : SA11A.478136
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 125.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 4115 OF 4311
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. ZAZI, ALEXANDER, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 7440 NORTH WASHTENAW

City CHICAGO	State IL	Zip Code 60645-1437
-----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) ALEXANDER ZAZI	Occupation (for Individual) DATA CLERK
---	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
360.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	04	/	2016

Transaction ID : SA11A.479489

Amount of Each Receipt this Period
35.00

Memo Item
CONTRIBUTION

B. ZAZI, ALEXANDER, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 7440 NORTH WASHTENAW

City CHICAGO	State IL	Zip Code 60645-1437
-----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) ALEXANDER ZAZI	Occupation (for Individual) DATA CLERK
---	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
360.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	07	/	2016

Transaction ID : SA11A.480482

Amount of Each Receipt this Period
25.00

Memo Item
CONTRIBUTION

C. ZBIHLEY, JOHN, J., MR.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 2513 MINTON DRIVE

City MOON TOWNSHIP	State PA	Zip Code 15108-9207
-----------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) ONDEMAND ENERGY	Occupation (for Individual) PRESIDENT
--	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
2600.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	25	/	2016

Transaction ID : SA11A.452001

Amount of Each Receipt this Period
2000.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	2060.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 4116 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. ZBIHLEY, JOHN, J., MR.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 2513 MINTON DRIVE

City MOON TOWNSHIP	State PA	Zip Code 15108-9207
-----------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) ONDEMAND ENERGY	Occupation (for Individual) PRESIDENT
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
2600.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	04	/	2016

Transaction ID : SA11A.473130

Amount of Each Receipt this Period
100.00

Memo Item
CONTRIBUTION

B. ZEIGLER, JUNE, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 739 E 2ND ST. N
APT.142

City MORRISTOWN	State TN	Zip Code 37814-
--------------------	-------------	--------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
2550.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	24	/	2016

Transaction ID : SA11A.445700

Amount of Each Receipt this Period
100.00

Memo Item
CONTRIBUTION

C. ZEIGLER, JUNE, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 739 E 2ND ST. N
APT.142

City MORRISTOWN	State TN	Zip Code 37814-
--------------------	-------------	--------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
2550.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	24	/	2016

Transaction ID : SA11A.445702

Amount of Each Receipt this Period
100.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	300.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 4117 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. ZEIGLER, JUNE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 739 E 2ND ST. N
 APT.142
 City MORRISTOWN State TN Zip Code 37814-
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 2550.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 26 / 2016
Transaction ID : SA11A.450377
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION

B. ZEIGLER, JUNE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 739 E 2ND ST. N
 APT.142
 City MORRISTOWN State TN Zip Code 37814-
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 2550.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 27 / 2016
Transaction ID : SA11A.453342
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION

C. ZEIGLER, JUNE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 739 E 2ND ST. N
 APT.142
 City MORRISTOWN State TN Zip Code 37814-
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 2550.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 28 / 2016
Transaction ID : SA11A.455396
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	300.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 4118 OF 4311
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. ZEIGLER, JUNE, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 739 E 2ND ST. N
APT.142

City MORRISTOWN State TN Zip Code 37814-

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 2550.00

Date of Receipt
10 / 28 / 2016
Transaction ID : SA11A.455401

Amount of Each Receipt this Period
100.00

Memo Item CONTRIBUTION

B. ZEIGLER, JUNE, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 739 E 2ND ST. N
APT.142

City MORRISTOWN State TN Zip Code 37814-

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 2550.00

Date of Receipt
10 / 28 / 2016
Transaction ID : SA11A.455412

Amount of Each Receipt this Period
100.00

Memo Item CONTRIBUTION

C. ZEIGLER, JUNE, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 739 E 2ND ST. N
APT.142

City MORRISTOWN State TN Zip Code 37814-

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 2550.00

Date of Receipt
11 / 01 / 2016
Transaction ID : SA11A.462722

Amount of Each Receipt this Period
100.00

Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 300.00

TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 4119 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
-----------------------------	-----------------------------	-----------------------------

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NAME OF COMMITTEE (In Full)
Team Ryan

A. ZEIGLER, JUNE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 739 E 2ND ST. N
 APT.142
 City MORRISTOWN State TN Zip Code 37814-
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 2550.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 02 / 2016
Transaction ID : SA11A.469605
 Amount of Each Receipt this Period
 25.00
 Memo Item
 CONTRIBUTION

B. ZEIGLER, JUNE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 739 E 2ND ST. N
 APT.142
 City MORRISTOWN State TN Zip Code 37814-
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 2550.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 06 / 2016
Transaction ID : SA11A.480864
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION

C. ZEMMELS, IVAR, , MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 7600 GOLDEN VALLEY RD, UNIT 611
 APT 611
 City GOLDEN VALLEY State MN Zip Code 55427-4560
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 495.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 31 / 2016
Transaction ID : SA11A.458869
 Amount of Each Receipt this Period
 25.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	150.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 4120 OF 4311
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. ZEMMELS, IVAR, , MR.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 7600 GOLDEN VALLEY RD, UNIT 611
APT 611

City GOLDEN VALLEY State MN Zip Code 55427-4560

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
495.00

Date of Receipt
MM / DD / YYYY
11 / 01 / 2016

Transaction ID : SA11A.461766

Amount of Each Receipt this Period
35.00

Memo Item CONTRIBUTION

B. ZEMMELS, IVAR, , MR.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 7600 GOLDEN VALLEY RD, UNIT 611
APT 611

City GOLDEN VALLEY State MN Zip Code 55427-4560

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
495.00

Date of Receipt
MM / DD / YYYY
10 / 31 / 2016

Transaction ID : SA11A.463203

Amount of Each Receipt this Period
25.00

Memo Item CONTRIBUTION

C. ZEMMELS, IVAR, , MR.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 7600 GOLDEN VALLEY RD, UNIT 611
APT 611

City GOLDEN VALLEY State MN Zip Code 55427-4560

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
495.00

Date of Receipt
MM / DD / YYYY
10 / 31 / 2016

Transaction ID : SA11A.463207

Amount of Each Receipt this Period
25.00

Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 85.00

TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 4121 OF 4311
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. ZEMMELS, IVAR, , MR.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 7600 GOLDEN VALLEY RD, UNIT 611
APT 611

City GOLDEN VALLEY State MN Zip Code 55427-4560

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
495.00

Date of Receipt
MM / DD / YYYY
11 / 01 / 2016

Transaction ID : SA11A.467174

Amount of Each Receipt this Period
25.00

Memo Item CONTRIBUTION

B. ZEMMELS, IVAR, , MR.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 7600 GOLDEN VALLEY RD, UNIT 611
APT 611

City GOLDEN VALLEY State MN Zip Code 55427-4560

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
495.00

Date of Receipt
MM / DD / YYYY
11 / 01 / 2016

Transaction ID : SA11A.467175

Amount of Each Receipt this Period
25.00

Memo Item CONTRIBUTION

C. ZEMMELS, IVAR, , MR.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 7600 GOLDEN VALLEY RD, UNIT 611
APT 611

City GOLDEN VALLEY State MN Zip Code 55427-4560

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
495.00

Date of Receipt
MM / DD / YYYY
11 / 01 / 2016

Transaction ID : SA11A.467179

Amount of Each Receipt this Period
25.00

Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 75.00

TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 4122 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
Team Ryan

A. ZEMMELS, IVAR, , MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 7600 GOLDEN VALLEY RD, UNIT 611
 APT 611
 City GOLDEN VALLEY State MN Zip Code 55427-4560
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 495.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 01 / 2016
Transaction ID : SA11A.467180
 Amount of Each Receipt this Period
 25.00
 Memo Item
 CONTRIBUTION

B. ZEMMELS, IVAR, , MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 7600 GOLDEN VALLEY RD, UNIT 611
 APT 611
 City GOLDEN VALLEY State MN Zip Code 55427-4560
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 495.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 07 / 2016
Transaction ID : SA11A.476281
 Amount of Each Receipt this Period
 25.00
 Memo Item
 CONTRIBUTION

C. ZEMMELS, IVAR, , MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 7600 GOLDEN VALLEY RD, UNIT 611
 APT 611
 City GOLDEN VALLEY State MN Zip Code 55427-4560
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 495.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 07 / 2016
Transaction ID : SA11A.476283
 Amount of Each Receipt this Period
 25.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	75.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 4123 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
Team Ryan

A. ZHANG, ZHONGYANG, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 465 PARKCHESTER ROAD
 City BUFFALO GROVE State IL Zip Code 60089-6412
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) LEYARD AMERICAN CORP Occupation (for Individual) MANAGER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 900.00

Date of Receipt 10 / 27 / 2016
Transaction ID : SA11A.453944
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

B. ZHANG, ZHONGYANG, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 465 PARKCHESTER ROAD
 City BUFFALO GROVE State IL Zip Code 60089-6412
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) LEYARD AMERICAN CORP Occupation (for Individual) MANAGER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 900.00

Date of Receipt 11 / 04 / 2016
Transaction ID : SA11A.471404
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

C. ZHANG, ZHONGYANG, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 465 PARKCHESTER ROAD
 City BUFFALO GROVE State IL Zip Code 60089-6412
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) LEYARD AMERICAN CORP Occupation (for Individual) MANAGER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 900.00

Date of Receipt 11 / 04 / 2016
Transaction ID : SA11A.473336
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	300.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 4124 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. ZIEGLER, EDWARD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2015 CLAREMONT LANE
 City HOUSTON State TX Zip Code 77019-5803
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) CONSULTING ENGINEER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 10 / 22 / 2016
Transaction ID : SA11A.449641
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

B. ZIEGLER, EDWARD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2015 CLAREMONT LANE
 City HOUSTON State TX Zip Code 77019-5803
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) CONSULTING ENGINEER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 10 / 31 / 2016
Transaction ID : SA11A.457777
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

C. ZIEGLER, EDWARD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2015 CLAREMONT LANE
 City HOUSTON State TX Zip Code 77019-5803
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) CONSULTING ENGINEER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 10 / 31 / 2016
Transaction ID : SA11A.457779
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	300.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 4125 OF 4311		
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14	<input type="checkbox"/> 11c <input type="checkbox"/> 15	<input type="checkbox"/> 12 <input type="checkbox"/> 16

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NAME OF COMMITTEE (In Full)
Team Ryan

A. ZIEGLER, KARL, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 37 ARLINGTON AVE
 City PROVIDENCE State RI Zip Code 02906-3203
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SWISHER INTERNATIONAL INC. Occupation (for Individual) EXECUTIVE
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 25000.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 24 / 2016
Transaction ID : SA11A.443464
 Amount of Each Receipt this Period
 25000.00
 Memo Item
 CONTRIBUTION

B. ZIEGLER, M., J., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 20 THORNDAL CIR
 City DARIEN State CT Zip Code 06820-5421
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SWISHER INTERNATIONAL Occupation (for Individual) EXECUTIVE
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 25000.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 24 / 2016
Transaction ID : SA11A.443456
 Amount of Each Receipt this Period
 25000.00
 Memo Item
 CONTRIBUTION

C. ZIEGLER, PETER, M., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 20 THORNDAL CIR
 City DARIEN State CT Zip Code 06820-5421
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SWISHER INTERNATIONAL Occupation (for Individual) EXECUTIVE
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 25000.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 24 / 2016
Transaction ID : SA11A.443455
 Amount of Each Receipt this Period
 25000.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	75000.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 4126 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
Team Ryan

A. ZIEGLER, WILLIAM, T., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1267 PONTE VEDRA BLVD
 City PONTE VEDRA BEACH State FL Zip Code 32082-4402
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SWISHER INTERNATIONAL INC. Occupation (for Individual) EXECUTIVE
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 25000.00

Date of Receipt 10 / 24 / 2016
Transaction ID : SA11A.443465
 Amount of Each Receipt this Period 25000.00
 Memo Item CONTRIBUTION

B. ZIMMERMAN, BRUCE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 7 MANGROVE COURT WEST
 City HOMOSASSA State FL Zip Code 34446-4513
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) PCL CONSTRUCTION Occupation (for Individual) SAFETY ENGINEER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 610.00

Date of Receipt 10 / 22 / 2016
Transaction ID : SA11A.446833
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

C. ZIMMERMAN, BRUCE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 7 MANGROVE COURT WEST
 City HOMOSASSA State FL Zip Code 34446-4513
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) PCL CONSTRUCTION Occupation (for Individual) SAFETY ENGINEER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 610.00

Date of Receipt 11 / 01 / 2016
Transaction ID : SA11A.462492
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	25100.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 4127 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. ZIMMERMAN, JEAN, ANN, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 60 SEAGATE DR
 1101
 City NAPLES State FL Zip Code 34103-2402
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 350.00

Date of Receipt 11 / 04 / 2016
Transaction ID : SA11A.470488
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

B. ZIMMERMAN, SCOTT, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 46 MINNEHAHA CIRCLE
 City MAITLAND State FL Zip Code 32751-4539
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) REAL ESTATE
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1600.00

Date of Receipt 10 / 24 / 2016
Transaction ID : SA11A.446063
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

C. ZINKE, ERNEST, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1909 ARMOND LANE
 City SILVER SPRING State MD Zip Code 20905-3925
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 750.00

Date of Receipt 11 / 02 / 2016
Transaction ID : SA11A.469718
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	750.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 4128 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
Team Ryan

A. ZINKE, ERNEST, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1909 ARMOND LANE
 City SILVER SPRING State MD Zip Code 20905-3925
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 750.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 02 / 2016
Transaction ID : SA11A.470217
 Amount of Each Receipt this Period
 250.00
 Memo Item
 CONTRIBUTION

B. ZION, VICTOR, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3700 ISLAND BLVD PH5
 City AVENTURA State FL Zip Code 33160-4933
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 550.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 29 / 2016
Transaction ID : SA11A.460408
 Amount of Each Receipt this Period
 50.00
 Memo Item
 CONTRIBUTION

C. ZISCH, DEBORAH, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4284 PEBBLE BEACH DR
 City LONGMONT State CO Zip Code 80503-8360
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 02 / 2016
Transaction ID : SA11A.466000
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	400.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 4129 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. ZISCH, DEBORAH, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 4284 PEBBLE BEACH DR

City LONGMONT	State CO	Zip Code 80503-8360
------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
400.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	08	/	2016

Transaction ID : SA11A.479870

Amount of Each Receipt this Period
100.00

Memo Item CONTRIBUTION

B. ZISES, DAVID, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 20 PATTEN CIRCLE

City NEWTON CENTRE	State MA	Zip Code 02459-2921
-----------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	31	/	2016

Transaction ID : SA11A.458317

Amount of Each Receipt this Period
100.00

Memo Item CONTRIBUTION

C. ZISES, DAVID, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 20 PATTEN CIRCLE

City NEWTON CENTRE	State MA	Zip Code 02459-2921
-----------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	01	/	2016

Transaction ID : SA11A.462361

Amount of Each Receipt this Period
50.00

Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	250.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 4130 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
Team Ryan

A. ZITMAN, JUDY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5350 ALCOVE AVE
 City VALLEY VILLAGE State CA Zip Code 91607-2328
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 21 / 2016
Transaction ID : SA11A.444257
 Amount of Each Receipt this Period
 25.00
 Memo Item
 CONTRIBUTION

B. ZITMAN, JUDY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5350 ALCOVE AVE
 City VALLEY VILLAGE State CA Zip Code 91607-2328
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 21 / 2016
Transaction ID : SA11A.444258
 Amount of Each Receipt this Period
 25.00
 Memo Item
 CONTRIBUTION

C. ZITMAN, JUDY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5350 ALCOVE AVE
 City VALLEY VILLAGE State CA Zip Code 91607-2328
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 01 / 2016
Transaction ID : SA11A.462420
 Amount of Each Receipt this Period
 25.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	75.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 4131 OF 4311
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. ZITMAN, JUDY, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 5350 ALCOVE AVE

City VALLEY VILLAGE	State CA	Zip Code 91607-2328
------------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	01	/	2016

Transaction ID : SA11A.462421

Amount of Each Receipt this Period
25.00

Memo Item
CONTRIBUTION

B. ZITMAN, JUDY, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 5350 ALCOVE AVE

City VALLEY VILLAGE	State CA	Zip Code 91607-2328
------------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	04	/	2016

Transaction ID : SA11A.470386

Amount of Each Receipt this Period
25.00

Memo Item
CONTRIBUTION

C. ZITO, MICHAEL, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 4369 48TH AVE. S

City ST PETERSBURG	State FL	Zip Code 33711-4611
-----------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
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Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
205.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	31	/	2016

Transaction ID : SA11A.459121

Amount of Each Receipt this Period
25.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	75.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 4132 OF 4311
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. ZITO, MICHAEL, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 4369 48TH AVE. S

City ST PETERSBURG	State FL	Zip Code 33711-4611
-----------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
205.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	04	/	2016

Transaction ID : SA11A.471154

Amount of Each Receipt this Period
25.00

Memo Item CONTRIBUTION

B. ZMRHAL, TOBY, R., ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 703 LINDSAY CIRCLE

City NORTH AURORA	State IL	Zip Code 60542-9060
----------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
290.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	20	/	2016

Transaction ID : SA11A.442515

Amount of Each Receipt this Period
25.00

Memo Item CONTRIBUTION

C. ZMRHAL, TOBY, R., ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 703 LINDSAY CIRCLE

City NORTH AURORA	State IL	Zip Code 60542-9060
----------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
290.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	01	/	2016

Transaction ID : SA11A.467194

Amount of Each Receipt this Period
25.00

Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	75.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 4133 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
ZMRHAL, TOBY, R., ,

Mailing Address **703 LINDSAY CIRCLE**

City NORTH AURORA	State IL	Zip Code 60542-9060
-----------------------------	--------------------	-------------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
--	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
290.00

Date of Receipt
11 / 01 / 2016

Transaction ID : SA11A.467201

Amount of Each Receipt this Period
25.00

Memo Item CONTRIBUTION

B. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
ZMRHAL, TOBY, R., ,

Mailing Address **703 LINDSAY CIRCLE**

City NORTH AURORA	State IL	Zip Code 60542-9060
-----------------------------	--------------------	-------------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
--	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
290.00

Date of Receipt
11 / 07 / 2016

Transaction ID : SA11A.475219

Amount of Each Receipt this Period
25.00

Memo Item CONTRIBUTION

C. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
ZMRHAL, TOBY, R., ,

Mailing Address **703 LINDSAY CIRCLE**

City NORTH AURORA	State IL	Zip Code 60542-9060
-----------------------------	--------------------	-------------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
--	---

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
290.00

Date of Receipt
11 / 07 / 2016

Transaction ID : SA11A.475220

Amount of Each Receipt this Period
25.00

Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	75.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 4134 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
ZMRHAL, TOBY, R., ,

Mailing Address **703 LINDSAY CIRCLE**

City NORTH AURORA	State IL	Zip Code 60542-9060
-----------------------------	--------------------	-------------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
--	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
290.00

Date of Receipt
11 / 07 / 2016

Transaction ID : SA11A.475226

Amount of Each Receipt this Period
25.00

Memo Item CONTRIBUTION

B. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
ZMRHAL, TOBY, R., ,

Mailing Address **703 LINDSAY CIRCLE**

City NORTH AURORA	State IL	Zip Code 60542-9060
-----------------------------	--------------------	-------------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
--	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
290.00

Date of Receipt
11 / 06 / 2016

Transaction ID : SA11A.476929

Amount of Each Receipt this Period
20.00

Memo Item CONTRIBUTION

C. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
ZOBA, CARL, , ,

Mailing Address **4301 GULF SHORE BLVD N
UNIT 1804**

City NAPLES	State FL	Zip Code 34103-3483
-----------------------	--------------------	-------------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
--	---

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
250.00

Date of Receipt
10 / 31 / 2016

Transaction ID : SA11A.463955

Amount of Each Receipt this Period
250.00

Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	295.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 4135 OF 4311
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. ZOFFER, LINDA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 150 MEADOW RUN DRIVE
 City CHAPEL HILL State NC Zip Code 27517-7786
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 280.00

Date of Receipt 10 / 25 / 2016
Transaction ID : SA11A.448368
 Amount of Each Receipt this Period 30.00
 Memo Item CONTRIBUTION

B. ZOLINTAKIS, PETER, , MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4200 CANYON ROAD
 City LAFAYETTE State CA Zip Code 94549-2751
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) LIBERTY MEDIA Occupation (for Individual) ACCOUNTANT
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 11 / 01 / 2016
Transaction ID : SA11A.461541
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

C. ZUCHERMAN, JAMES, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3145 GEARY BLVD # 519
 City SAN FRANCISCO State CA Zip Code 94118-3316
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SFSS Occupation (for Individual) DOC
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt 10 / 22 / 2016
Transaction ID : SA11A.446900
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	380.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 4136 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. ZUCHERMAN, JAMES, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3145 GEARY BLVD # 519
 City SAN FRANCISCO State CA Zip Code 94118-3316
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SFSS Occupation (for Individual) DOC
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt 11 / 04 / 2016
Transaction ID : SA11A.472235
 Amount of Each Receipt this Period 100.00
 Memo Item
CONTRIBUTION

B. ZUENDT, JOHN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 55 AXBRIDGE LANE
 City DELMAR State NY Zip Code 12054-3823
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt 10 / 24 / 2016
Transaction ID : SA11A.445847
 Amount of Each Receipt this Period 100.00
 Memo Item
CONTRIBUTION

C. ZUENDT, JOHN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 55 AXBRIDGE LANE
 City DELMAR State NY Zip Code 12054-3823
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt 10 / 22 / 2016
Transaction ID : SA11A.446818
 Amount of Each Receipt this Period 100.00
 Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	300.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 4137 OF 4311
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. ZYCK, THOMAS, W., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 11539 BURR OAK LANE
 City BURR RIDGE State IL Zip Code 60527-8010
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt 10 / 24 / 2016
Transaction ID : SA11A.443844
 Amount of Each Receipt this Period 100.00
 Memo Item
CONTRIBUTION

B. ZYTNIOWSKI, MICHAEL, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address W878 EAU CLAIRE ROAD
 City GENOA CITY State WI Zip Code 53128-1633
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) MAB ENGINEERING Occupation (for Individual) CEO / FIELD SERVICE ENGINEER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 10 / 27 / 2016
Transaction ID : SA11A.452872
 Amount of Each Receipt this Period 250.00
 Memo Item
CONTRIBUTION

C. BREWSTER/JORY ASSOCIATES, LLC
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 499 S CAPITOL STREET SW
 City WASHINGTON State DC Zip Code 20003-4013
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Occupation (for Individual)
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 7500.00

Date of Receipt 11 / 08 / 2016
Transaction ID : SA11A.468131
 Amount of Each Receipt this Period 7500.00
 Memo Item
CONTRIBUTION
 SEE ATTRIBUTION BELOW

SUBTOTAL of Receipts This Page (optional).....	7850.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 4138 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name A. JORY, DAVID, C., MR.,			Date of Receipt										
Mailing Address 4528 MACOMB ST NW			<table border="1"> <tr> <td>M M M</td> <td>/</td> <td>D D D</td> <td>/</td> <td>Y Y Y Y Y Y</td> </tr> <tr> <td>11</td> <td></td> <td>08</td> <td></td> <td>2016</td> </tr> </table>	M M M	/	D D D	/	Y Y Y Y Y Y	11		08		2016
M M M	/	D D D	/	Y Y Y Y Y Y									
11		08		2016									
City WASHINGTON	State DC	Zip Code 20016-2753	Transaction ID : SA11A.481371										
FEC ID number of contributing federal political committee. C			Amount of Each Receipt this Period 2500.00										
Name of Employer (for Individual) THE CAPITOL HILL GROUP		Occupation (for Individual) PRESIDENT	<input checked="" type="checkbox"/> Memo Item CONTRIBUTION										
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 2500.00												

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name B. VICTORY, JACK, , MR.,			Date of Receipt										
Mailing Address 4012 ETHAN THOMAS DR			<table border="1"> <tr> <td>M M M</td> <td>/</td> <td>D D D</td> <td>/</td> <td>Y Y Y Y Y Y</td> </tr> <tr> <td>11</td> <td></td> <td>08</td> <td></td> <td>2016</td> </tr> </table>	M M M	/	D D D	/	Y Y Y Y Y Y	11		08		2016
M M M	/	D D D	/	Y Y Y Y Y Y									
11		08		2016									
City CLINTON	State MD	Zip Code 20735-4420	Transaction ID : SA11A.481372										
FEC ID number of contributing federal political committee. C			Amount of Each Receipt this Period 5000.00										
Name of Employer (for Individual) THE CAPITOL HILL GROUP		Occupation (for Individual) CEO	<input checked="" type="checkbox"/> Memo Item CONTRIBUTION										
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 5000.00												

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name C. HUNTON & WILLIAMS LLP			Date of Receipt										
Mailing Address 2200 PENNSYLVANIA AVENUE NW			<table border="1"> <tr> <td>M M M</td> <td>/</td> <td>D D D</td> <td>/</td> <td>Y Y Y Y Y Y</td> </tr> <tr> <td>10</td> <td></td> <td>25</td> <td></td> <td>2016</td> </tr> </table>	M M M	/	D D D	/	Y Y Y Y Y Y	10		25		2016
M M M	/	D D D	/	Y Y Y Y Y Y									
10		25		2016									
City WASHINGTON	State DC	Zip Code 20037-1709	Transaction ID : SA11A.445028										
FEC ID number of contributing federal political committee. C			Amount of Each Receipt this Period 2000.00										
Name of Employer (for Individual)		Occupation (for Individual)	<input type="checkbox"/> Memo Item CONTRIBUTION										
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Aggregate Year-to-Date ▼ 4500.00												

SUBTOTAL of Receipts This Page (optional).....▶	2000.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 4139 OF 4311
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	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. AHMAD, SYED, S., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2200 PENNSYLVANIA AVE NW
 City WASHINGTON State DC Zip Code 20037-1709
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) HUNTON & WILLIAMS Occupation (for Individual) PARTNER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 20.80

Date of Receipt 10 / 25 / 2016
Transaction ID : SA11A.461957
 Amount of Each Receipt this Period 9.22
 Memo Item CONTRIBUTION
 PARTNERSHIP ATTRIBUTION

B. ALBERS, MICHAEL, F., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2200 PENNSYLVANIA AVE NW
 City WASHINGTON State DC Zip Code 20037-1709
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) HUNTON & WILLIAMS Occupation (for Individual) PARTNER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 20.80

Date of Receipt 10 / 25 / 2016
Transaction ID : SA11A.461958
 Amount of Each Receipt this Period 9.22
 Memo Item CONTRIBUTION
 PARTNERSHIP ATTRIBUTION

C. ALCOTT, KENNETH, J., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2200 PENNSYLVANIA AVE NW
 City WASHINGTON State DC Zip Code 20037-1709
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) HUNTON & WILLIAMS Occupation (for Individual) PARTNER
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 20.80

Date of Receipt 10 / 25 / 2016
Transaction ID : SA11A.461959
 Amount of Each Receipt this Period 9.22
 Memo Item CONTRIBUTION
 PARTNERSHIP ATTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 0.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 4140 OF 4311
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	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. AUSTIN, L., S., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2200 PENNSYLVANIA AVE NW
 City WASHINGTON State DC Zip Code 20037-1709
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) HUNTON & WILLIAMS Occupation (for Individual) PARTNER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 20.80

Date of Receipt 10 / 25 / 2016
Transaction ID : SA11A.461960
 Amount of Each Receipt this Period 9.22
 Memo Item CONTRIBUTION
 PARTNERSHIP ATTRIBUTION

B. BEARDSWORTH, JOHN, J., , JR.
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2200 PENNSYLVANIA AVE NW
 City WASHINGTON State DC Zip Code 20037-1709
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) HUNTON & WILLIAMS Occupation (for Individual) PARTNER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 20.80

Date of Receipt 10 / 25 / 2016
Transaction ID : SA11A.461961
 Amount of Each Receipt this Period 9.22
 Memo Item CONTRIBUTION
 PARTNERSHIP ATTRIBUTION

C. BECKER, RYAN, A., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2200 PENNSYLVANIA AVE NW
 City WASHINGTON State DC Zip Code 20037-1709
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) HUNTON & WILLIAMS Occupation (for Individual) PARTNER
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 20.80

Date of Receipt 10 / 25 / 2016
Transaction ID : SA11A.461962
 Amount of Each Receipt this Period 9.22
 Memo Item CONTRIBUTION
 PARTNERSHIP ATTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 0.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 4141 OF 4311
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<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
Team Ryan

A. BECKER, STEVEN, H., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2200 PENNSYLVANIA AVE NW
 City WASHINGTON State DC Zip Code 20037-1709
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) HUNTON & WILLIAMS Occupation (for Individual) PARTNER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 20.80

Date of Receipt 10 / 25 / 2016
Transaction ID : SA11A.461963
 Amount of Each Receipt this Period 9.22
 Memo Item CONTRIBUTION
 PARTNERSHIP ATTRIBUTION

B. BERES, MELINDA, R., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2200 PENNSYLVANIA AVE NW
 City WASHINGTON State DC Zip Code 20037-1709
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) HUNTON & WILLIAMS Occupation (for Individual) PARTNER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 20.80

Date of Receipt 10 / 25 / 2016
Transaction ID : SA11A.461964
 Amount of Each Receipt this Period 9.22
 Memo Item CONTRIBUTION
 PARTNERSHIP ATTRIBUTION

C. BIERBOWER, MARK, B., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2200 PENNSYLVANIA AVE NW
 City WASHINGTON State DC Zip Code 20037-1709
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) HUNTON & WILLIAMS Occupation (for Individual) PARTNER
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 20.80

Date of Receipt 10 / 25 / 2016
Transaction ID : SA11A.461965
 Amount of Each Receipt this Period 9.22
 Memo Item CONTRIBUTION
 PARTNERSHIP ATTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	0.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 4142 OF 4311
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<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
Team Ryan

A. BLAIR, JEFFRY, M., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2200 PENNSYLVANIA AVE NW
 City WASHINGTON State DC Zip Code 20037-1709
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) HUNTON & WILLIAMS Occupation (for Individual) PARTNER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 20.80

Date of Receipt 10 / 25 / 2016
Transaction ID : SA11A.461966
 Amount of Each Receipt this Period 9.22
 Memo Item CONTRIBUTION
 PARTNERSHIP ATTRIBUTION

B. BLANCHARD, ANDREW, J., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2200 PENNSYLVANIA AVE NW
 City WASHINGTON State DC Zip Code 20037-1709
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) HUNTON & WILLIAMS Occupation (for Individual) PARTNER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 20.80

Date of Receipt 10 / 25 / 2016
Transaction ID : SA11A.461967
 Amount of Each Receipt this Period 9.22
 Memo Item CONTRIBUTION
 PARTNERSHIP ATTRIBUTION

C. BOER, JOEL THOMAS, L., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2200 PENNSYLVANIA AVE NW
 City WASHINGTON State DC Zip Code 20037-1709
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) HUNTON & WILLIAMS Occupation (for Individual) PARTNER
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 9.22

Date of Receipt 10 / 25 / 2016
Transaction ID : SA11A.461968
 Amount of Each Receipt this Period 9.22
 Memo Item CONTRIBUTION
 PARTNERSHIP ATTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	0.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 4143 OF 4311
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NAME OF COMMITTEE (In Full)
Team Ryan

A. BOSHER, MATTHEW, P., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2200 PENNSYLVANIA AVE NW
 City WASHINGTON State DC Zip Code 20037-1709
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) HUNTON & WILLIAMS Occupation (for Individual) PARTNER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 20.80

Date of Receipt 10 / 25 / 2016
Transaction ID : SA11A.461969
 Amount of Each Receipt this Period 9.22
 Memo Item CONTRIBUTION
 PARTNERSHIP ATTRIBUTION

B. BOWEN, JAMES, W., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2200 PENNSYLVANIA AVE NW
 City WASHINGTON State DC Zip Code 20037-1709
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) HUNTON & WILLIAMS Occupation (for Individual) PARTNER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 20.80

Date of Receipt 10 / 25 / 2016
Transaction ID : SA11A.461970
 Amount of Each Receipt this Period 9.22
 Memo Item CONTRIBUTION
 PARTNERSHIP ATTRIBUTION

C. BRADLEY, JAMES, P., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2200 PENNSYLVANIA AVE NW
 City WASHINGTON State DC Zip Code 20037-1709
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) HUNTON & WILLIAMS Occupation (for Individual) PARTNER
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 9.22

Date of Receipt 10 / 25 / 2016
Transaction ID : SA11A.461971
 Amount of Each Receipt this Period 9.22
 Memo Item CONTRIBUTION
 PARTNERSHIP ATTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 0.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 4144 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. BRANDLEY, DAVID, F., , JR.
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2200 PENNSYLVANIA AVE NW
 City WASHINGTON State DC Zip Code 20037-1709
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) HUNTON & WILLIAMS Occupation (for Individual) PARTNER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 20.80

Date of Receipt 10 / 25 / 2016
Transaction ID : SA11A.461972
 Amount of Each Receipt this Period 9.22
 Memo Item CONTRIBUTION
 PARTNERSHIP ATTRIBUTION

B. BROOME, SHANNON, S., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2200 PENNSYLVANIA AVE NW
 City WASHINGTON State DC Zip Code 20037-1709
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) HUNTON & WILLIAMS Occupation (for Individual) PARTNER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 20.80

Date of Receipt 10 / 25 / 2016
Transaction ID : SA11A.461973
 Amount of Each Receipt this Period 9.22
 Memo Item CONTRIBUTION
 PARTNERSHIP ATTRIBUTION

C. BROWDER, BENJAMIN, P., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2200 PENNSYLVANIA AVE NW
 City WASHINGTON State DC Zip Code 20037-1709
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) HUNTON & WILLIAMS Occupation (for Individual) PARTNER
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 20.80

Date of Receipt 10 / 25 / 2016
Transaction ID : SA11A.461974
 Amount of Each Receipt this Period 9.22
 Memo Item CONTRIBUTION
 PARTNERSHIP ATTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	0.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 4145 OF 4311
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. BROWN, ANTHONY, T., , SR.
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 2200 PENNSYLVANIA AVE NW

City WASHINGTON	State DC	Zip Code 20037-1709
--------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) HUNTON & WILLIAMS	Occupation (for Individual) PARTNER
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
20.80

Date of Receipt
10 / 25 / 2016
Transaction ID : SA11A.461975

Amount of Each Receipt this Period
9.22

Memo Item CONTRIBUTION

PARTNERSHIP ATTRIBUTION

B. BROWNELL, F, W., ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 2200 PENNSYLVANIA AVE NW

City WASHINGTON	State DC	Zip Code 20037-1709
--------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) HUNTON & WILLIAMS	Occupation (for Individual) PARTNER
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
20.80

Date of Receipt
10 / 25 / 2016
Transaction ID : SA11A.461977

Amount of Each Receipt this Period
9.22

Memo Item CONTRIBUTION

PARTNERSHIP ATTRIBUTION

C. BROWN, TYLER, P., ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 2200 PENNSYLVANIA AVE NW

City WASHINGTON	State DC	Zip Code 20037-1709
--------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) HUNTON & WILLIAMS	Occupation (for Individual) PARTNER
--	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
20.80

Date of Receipt
10 / 25 / 2016
Transaction ID : SA11A.461976

Amount of Each Receipt this Period
9.22

Memo Item CONTRIBUTION

PARTNERSHIP ATTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	0.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 4146 OF 4311
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	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. BULLEIT, KRISTY, N.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 2200 PENNSYLVANIA AVE NW

City WASHINGTON	State DC	Zip Code 20037-1709
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) HUNTON & WILLIAMS	Occupation (for Individual) PARTNER
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Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
20.80

Date of Receipt
10 / 25 / 2016
Transaction ID : SA11A.461978

Amount of Each Receipt this Period
9.22

Memo Item CONTRIBUTION

PARTNERSHIP ATTRIBUTION

B. BUONANNO, JOSEPH, B.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 2200 PENNSYLVANIA AVE NW

City WASHINGTON	State DC	Zip Code 20037-1709
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) HUNTON & WILLIAMS	Occupation (for Individual) PARTNER
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
20.80

Date of Receipt
10 / 25 / 2016
Transaction ID : SA11A.461979

Amount of Each Receipt this Period
9.22

Memo Item CONTRIBUTION

PARTNERSHIP ATTRIBUTION

C. BURNS, M, B.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 2200 PENNSYLVANIA AVE NW

City WASHINGTON	State DC	Zip Code 20037-1709
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) HUNTON & WILLIAMS	Occupation (for Individual) PARTNER
--	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
20.80

Date of Receipt
10 / 25 / 2016
Transaction ID : SA11A.461980

Amount of Each Receipt this Period
9.22

Memo Item CONTRIBUTION

PARTNERSHIP ATTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	0.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 4147 OF 4311
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<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
Team Ryan

A. BURTON, PATRICK, S., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2200 PENNSYLVANIA AVE NW
 City WASHINGTON State DC Zip Code 20037-1709
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) HUNTON & WILLIAMS Occupation (for Individual) PARTNER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 20.80

Date of Receipt 10 / 25 / 2016
Transaction ID : SA11A.461981
 Amount of Each Receipt this Period 9.22
 Memo Item CONTRIBUTION
 PARTNERSHIP ATTRIBUTION

B. BUTLER, ELLIS, M., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2200 PENNSYLVANIA AVE NW
 City WASHINGTON State DC Zip Code 20037-1709
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) HUNTON & WILLIAMS Occupation (for Individual) PARTNER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 9.22

Date of Receipt 10 / 25 / 2016
Transaction ID : SA11A.461982
 Amount of Each Receipt this Period 9.22
 Memo Item CONTRIBUTION
 PARTNERSHIP ATTRIBUTION

C. CALVERT, MATTHEW, J., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2200 PENNSYLVANIA AVE NW
 City WASHINGTON State DC Zip Code 20037-1709
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) HUNTON & WILLIAMS Occupation (for Individual) PARTNER
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 20.80

Date of Receipt 10 / 25 / 2016
Transaction ID : SA11A.461983
 Amount of Each Receipt this Period 9.22
 Memo Item CONTRIBUTION
 PARTNERSHIP ATTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	0.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 4148 OF 4311
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	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. CAMPBELL, DANIEL, M.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 2200 PENNSYLVANIA AVE NW

City WASHINGTON	State DC	Zip Code 20037-1709
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) HUNTON & WILLIAMS	Occupation (for Individual) PARTNER
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
20.80

Date of Receipt
10 / 25 / 2016
Transaction ID : SA11A.461984

Amount of Each Receipt this Period
9.22

Memo Item CONTRIBUTION

PARTNERSHIP ATTRIBUTION

B. CANTRILL, THOMAS, H.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 2200 PENNSYLVANIA AVE NW

City WASHINGTON	State DC	Zip Code 20037-1709
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) HUNTON & WILLIAMS	Occupation (for Individual) PARTNER
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
20.80

Date of Receipt
10 / 25 / 2016
Transaction ID : SA11A.461985

Amount of Each Receipt this Period
9.22

Memo Item CONTRIBUTION

PARTNERSHIP ATTRIBUTION

C. CARLSON, CURTIS, G.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 2200 PENNSYLVANIA AVE NW

City WASHINGTON	State DC	Zip Code 20037-1709
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) HUNTON & WILLIAMS	Occupation (for Individual) PARTNER
--	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
20.80

Date of Receipt
10 / 25 / 2016
Transaction ID : SA11A.461986

Amount of Each Receipt this Period
9.22

Memo Item CONTRIBUTION

PARTNERSHIP ATTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	0.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 4149 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
Team Ryan

A. CHENAULT, JOHN, C., , V
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2200 PENNSYLVANIA AVE NW
 City WASHINGTON State DC Zip Code 20037-1709
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) HUNTON & WILLIAMS Occupation (for Individual) PARTNER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 20.80

Date of Receipt 10 / 25 / 2016
Transaction ID : SA11A.461987
 Amount of Each Receipt this Period 9.22
 Memo Item CONTRIBUTION
 PARTNERSHIP ATTRIBUTION

B. CLEMENT, WHITTINGTON, W., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2200 PENNSYLVANIA AVE NW
 City WASHINGTON State DC Zip Code 20037-1709
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) HUNTON & WILLIAMS Occupation (for Individual) PARTNER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 20.80

Date of Receipt 10 / 25 / 2016
Transaction ID : SA11A.461988
 Amount of Each Receipt this Period 9.22
 Memo Item CONTRIBUTION
 PARTNERSHIP ATTRIBUTION

C. COLLINS, CASSANDRA, C., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2200 PENNSYLVANIA AVE NW
 City WASHINGTON State DC Zip Code 20037-1709
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) HUNTON & WILLIAMS Occupation (for Individual) PARTNER
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 20.80

Date of Receipt 10 / 25 / 2016
Transaction ID : SA11A.461989
 Amount of Each Receipt this Period 9.22
 Memo Item CONTRIBUTION
 PARTNERSHIP ATTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	0.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 4150 OF 4311
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. CUMMINGS, ASHLEY, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 2200 PENNSYLVANIA AVE NW

City WASHINGTON	State DC	Zip Code 20037-1709
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) HUNTON & WILLIAMS	Occupation (for Individual) PARTNER
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Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
20.80

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		25		2016

Transaction ID : SA11A.461990

Amount of Each Receipt this Period

9.22

Memo Item CONTRIBUTION
PARTNERSHIP ATTRIBUTION

B. CUNNINGHAM, ALEXANDRA, B., ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 2200 PENNSYLVANIA AVE NW

City WASHINGTON	State DC	Zip Code 20037-1709
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) HUNTON & WILLIAMS	Occupation (for Individual) PARTNER
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Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
20.80

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		25		2016

Transaction ID : SA11A.461991

Amount of Each Receipt this Period

9.22

Memo Item CONTRIBUTION
PARTNERSHIP ATTRIBUTION

C. DANON, SAMUEL, A., ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 2200 PENNSYLVANIA AVE NW

City WASHINGTON	State DC	Zip Code 20037-1709
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) HUNTON & WILLIAMS	Occupation (for Individual) PARTNER
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Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
20.80

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		25		2016

Transaction ID : SA11A.461992

Amount of Each Receipt this Period

9.22

Memo Item CONTRIBUTION
PARTNERSHIP ATTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	0.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 4151 OF 4311
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. DELIONADO, JOHN, J., ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 2200 PENNSYLVANIA AVE NW

City WASHINGTON	State DC	Zip Code 20037-1709
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) HUNTON & WILLIAMS	Occupation (for Individual) PARTNER
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Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
20.80

Date of Receipt
10 / 25 / 2016
Transaction ID : SA11A.461993

Amount of Each Receipt this Period
9.22

Memo Item CONTRIBUTION

PARTNERSHIP ATTRIBUTION

B. DEMM, STEPHEN, P., ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 2200 PENNSYLVANIA AVE NW

City WASHINGTON	State DC	Zip Code 20037-1709
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) HUNTON & WILLIAMS	Occupation (for Individual) PARTNER
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
20.80

Date of Receipt
10 / 25 / 2016
Transaction ID : SA11A.461994

Amount of Each Receipt this Period
9.22

Memo Item CONTRIBUTION

PARTNERSHIP ATTRIBUTION

C. DORSEY, DEE ANN, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 2200 PENNSYLVANIA AVE NW

City WASHINGTON	State DC	Zip Code 20037-1709
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) HUNTON & WILLIAMS	Occupation (for Individual) PARTNER
--	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
20.80

Date of Receipt
10 / 25 / 2016
Transaction ID : SA11A.461995

Amount of Each Receipt this Period
9.22

Memo Item CONTRIBUTION

PARTNERSHIP ATTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	0.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 4152 OF 4311
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	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. DOUMA, EDWARD, L., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2200 PENNSYLVANIA AVE NW
 City WASHINGTON State DC Zip Code 20037-1709
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) HUNTON & WILLIAMS Occupation (for Individual) PARTNER
 Receipt For: Primary General Other (specify) Aggregate Year-to-Date **20.80**

Date of Receipt **10 / 25 / 2016**
Transaction ID : SA11A.461996
 Amount of Each Receipt this Period **9.22**
 Memo Item CONTRIBUTION
 PARTNERSHIP ATTRIBUTION

B. DOYLE, COLLEEN, P., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2200 PENNSYLVANIA AVE NW
 City WASHINGTON State DC Zip Code 20037-1709
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) HUNTON & WILLIAMS Occupation (for Individual) PARTNER
 Receipt For: Primary General Other (specify) Aggregate Year-to-Date **20.80**

Date of Receipt **10 / 25 / 2016**
Transaction ID : SA11A.461997
 Amount of Each Receipt this Period **9.22**
 Memo Item CONTRIBUTION
 PARTNERSHIP ATTRIBUTION

C. DUCHARME, SEAN, P., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2200 PENNSYLVANIA AVE NW
 City WASHINGTON State DC Zip Code 20037-1709
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) HUNTON & WILLIAMS Occupation (for Individual) PARTNER
 Receipt For: Primary General Other (specify) Aggregate Year-to-Date **20.80**

Date of Receipt **10 / 25 / 2016**
Transaction ID : SA11A.461998
 Amount of Each Receipt this Period **9.22**
 Memo Item CONTRIBUTION
 PARTNERSHIP ATTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... **0.00**
TOTAL This Period (last page this line number only).....

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 4153 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. DUNCAN, DEIDRE, G., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2200 PENNSYLVANIA AVE NW
 City WASHINGTON State DC Zip Code 20037-1709
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) HUNTON & WILLIAMS Occupation (for Individual) PARTNER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 20.80

Date of Receipt 10 / 25 / 2016
Transaction ID : SA11A.461999
 Amount of Each Receipt this Period 9.22
 Memo Item CONTRIBUTION
 PARTNERSHIP ATTRIBUTION

B. EAMES, FREDERICK, R., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2200 PENNSYLVANIA AVE NW
 City WASHINGTON State DC Zip Code 20037-1709
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) HUNTON & WILLIAMS Occupation (for Individual) PARTNER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 20.80

Date of Receipt 10 / 25 / 2016
Transaction ID : SA11A.462000
 Amount of Each Receipt this Period 9.22
 Memo Item CONTRIBUTION
 PARTNERSHIP ATTRIBUTION

C. EASTEP, HEATHER, A., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2200 PENNSYLVANIA AVE NW
 City WASHINGTON State DC Zip Code 20037-1709
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) HUNTON & WILLIAMS Occupation (for Individual) PARTNER
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 20.80

Date of Receipt 10 / 25 / 2016
Transaction ID : SA11A.462001
 Amount of Each Receipt this Period 9.22
 Memo Item CONTRIBUTION
 PARTNERSHIP ATTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 0.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 4154 OF 4311
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. EDWARDS, W, J., ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 2200 PENNSYLVANIA AVE NW

City WASHINGTON	State DC	Zip Code 20037-1709
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) HUNTON & WILLIAMS	Occupation (for Individual) PARTNER
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Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
20.80

Date of Receipt
10 / 25 / 2016
Transaction ID : SA11A.462002

Amount of Each Receipt this Period
9.22

Memo Item CONTRIBUTION

PARTNERSHIP ATTRIBUTION

B. EICHMAN, JOHN, C., ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 2200 PENNSYLVANIA AVE NW

City WASHINGTON	State DC	Zip Code 20037-1709
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) HUNTON & WILLIAMS	Occupation (for Individual) PARTNER
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Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
20.80

Date of Receipt
10 / 25 / 2016
Transaction ID : SA11A.462003

Amount of Each Receipt this Period
9.22

Memo Item CONTRIBUTION

PARTNERSHIP ATTRIBUTION

C. ELGIE, TARA, L., ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 2200 PENNSYLVANIA AVE NW

City WASHINGTON	State DC	Zip Code 20037-1709
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) HUNTON & WILLIAMS	Occupation (for Individual) PARTNER
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Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
20.80

Date of Receipt
10 / 25 / 2016
Transaction ID : SA11A.462004

Amount of Each Receipt this Period
9.22

Memo Item CONTRIBUTION

PARTNERSHIP ATTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	0.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 4155 OF 4311
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	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. EMORY, FRANK, E., , JR.
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 2200 PENNSYLVANIA AVE NW

City WASHINGTON	State DC	Zip Code 20037-1709
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) HUNTON & WILLIAMS	Occupation (for Individual) PARTNER
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Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
20.80

Date of Receipt
10 / 25 / 2016
Transaction ID : SA11A.462005

Amount of Each Receipt this Period
9.22

Memo Item CONTRIBUTION

PARTNERSHIP ATTRIBUTION

B. ENJAMIO, JUAN, C., ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 2200 PENNSYLVANIA AVE NW

City WASHINGTON	State DC	Zip Code 20037-1709
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) HUNTON & WILLIAMS	Occupation (for Individual) PARTNER
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Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
20.80

Date of Receipt
10 / 25 / 2016
Transaction ID : SA11A.462006

Amount of Each Receipt this Period
9.22

Memo Item CONTRIBUTION

PARTNERSHIP ATTRIBUTION

C. ESKENAZI, PHILLIP, J., ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 2200 PENNSYLVANIA AVE NW

City WASHINGTON	State DC	Zip Code 20037-1709
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) HUNTON & WILLIAMS	Occupation (for Individual) PARTNER
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Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
20.80

Date of Receipt
10 / 25 / 2016
Transaction ID : SA11A.462007

Amount of Each Receipt this Period
9.22

Memo Item CONTRIBUTION

PARTNERSHIP ATTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	0.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 4156 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. FAGLIONI, KELLY, L., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2200 PENNSYLVANIA AVE NW
 City WASHINGTON State DC Zip Code 20037-1709
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) HUNTON & WILLIAMS Occupation (for Individual) PARTNER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 20.80

Date of Receipt 10 / 25 / 2016
Transaction ID : SA11A.462008
 Amount of Each Receipt this Period 9.22
 Memo Item CONTRIBUTION
 PARTNERSHIP ATTRIBUTION

B. FAILLA, SUSAN, S., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2200 PENNSYLVANIA AVE NW
 City WASHINGTON State DC Zip Code 20037-1709
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) HUNTON & WILLIAMS Occupation (for Individual) PARTNER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 20.80

Date of Receipt 10 / 25 / 2016
Transaction ID : SA11A.462009
 Amount of Each Receipt this Period 9.22
 Memo Item CONTRIBUTION
 PARTNERSHIP ATTRIBUTION

C. FEILER, ERIC, H., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2200 PENNSYLVANIA AVE NW
 City WASHINGTON State DC Zip Code 20037-1709
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) HUNTON & WILLIAMS Occupation (for Individual) PARTNER
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 20.80

Date of Receipt 10 / 25 / 2016
Transaction ID : SA11A.462010
 Amount of Each Receipt this Period 9.22
 Memo Item CONTRIBUTION
 PARTNERSHIP ATTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	0.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 4157 OF 4311
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	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. FELZ, KEVIN, C., ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 2200 PENNSYLVANIA AVE NW

City WASHINGTON	State DC	Zip Code 20037-1709
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) HUNTON & WILLIAMS	Occupation (for Individual) PARTNER
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
9.22

Date of Receipt
10 / 25 / 2016
Transaction ID : SA11A.462011

Amount of Each Receipt this Period
9.22

Memo Item CONTRIBUTION

PARTNERSHIP ATTRIBUTION

B. FERGUSON, LINDSAY, H., ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 2200 PENNSYLVANIA AVE NW

City WASHINGTON	State DC	Zip Code 20037-1709
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) HUNTON & WILLIAMS	Occupation (for Individual) PARTNER
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
20.80

Date of Receipt
10 / 25 / 2016
Transaction ID : SA11A.462012

Amount of Each Receipt this Period
9.22

Memo Item CONTRIBUTION

PARTNERSHIP ATTRIBUTION

C. FICHTHORN, NORMAN, W., ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 2200 PENNSYLVANIA AVE NW

City WASHINGTON	State DC	Zip Code 20037-1709
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) HUNTON & WILLIAMS	Occupation (for Individual) PARTNER
--	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
20.80

Date of Receipt
10 / 25 / 2016
Transaction ID : SA11A.462013

Amount of Each Receipt this Period
9.22

Memo Item CONTRIBUTION

PARTNERSHIP ATTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	0.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 4158 OF 4311
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. FIELD, ANDREA, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 2200 PENNSYLVANIA AVE NW

City WASHINGTON	State DC	Zip Code 20037-1709
--------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) HUNTON & WILLIAMS	Occupation (for Individual) PARTNER
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
20.80

Date of Receipt
10 / 25 / 2016
Transaction ID : SA11A.462014

Amount of Each Receipt this Period
9.22

Memo Item CONTRIBUTION

PARTNERSHIP ATTRIBUTION

B. FINTO, KEVIN, J., ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 2200 PENNSYLVANIA AVE NW

City WASHINGTON	State DC	Zip Code 20037-1709
--------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) HUNTON & WILLIAMS	Occupation (for Individual) PARTNER
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
20.80

Date of Receipt
10 / 25 / 2016
Transaction ID : SA11A.462015

Amount of Each Receipt this Period
9.22

Memo Item CONTRIBUTION

PARTNERSHIP ATTRIBUTION

C. FITZGERALD, MELANIE, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 2200 PENNSYLVANIA AVE NW

City WASHINGTON	State DC	Zip Code 20037-1709
--------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) HUNTON & WILLIAMS	Occupation (for Individual) PARTNER
--	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
20.80

Date of Receipt
10 / 25 / 2016
Transaction ID : SA11A.462016

Amount of Each Receipt this Period
9.22

Memo Item CONTRIBUTION

PARTNERSHIP ATTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	0.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 4159 OF 4311
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. FITZPATRICK, MICHAEL, F., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2200 PENNSYLVANIA AVE NW
 City WASHINGTON State DC Zip Code 20037-1709
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) HUNTON & WILLIAMS Occupation (for Individual) PARTNER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 20.80

Date of Receipt 10 / 25 / 2016
Transaction ID : SA11A.462017
 Amount of Each Receipt this Period 9.22
 Memo Item CONTRIBUTION
 PARTNERSHIP ATTRIBUTION

B. FLOWERS, ROBERT, N., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2200 PENNSYLVANIA AVE NW
 City WASHINGTON State DC Zip Code 20037-1709
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) HUNTON & WILLIAMS Occupation (for Individual) PARTNER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 20.80

Date of Receipt 10 / 25 / 2016
Transaction ID : SA11A.462018
 Amount of Each Receipt this Period 9.22
 Memo Item CONTRIBUTION
 PARTNERSHIP ATTRIBUTION

C. FLYNN, AARON, M., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2200 PENNSYLVANIA AVE NW
 City WASHINGTON State DC Zip Code 20037-1709
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) HUNTON & WILLIAMS Occupation (for Individual) PARTNER
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 20.80

Date of Receipt 10 / 25 / 2016
Transaction ID : SA11A.462019
 Amount of Each Receipt this Period 9.22
 Memo Item CONTRIBUTION
 PARTNERSHIP ATTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	0.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 4160 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
Team Ryan

A. FLYNN, WILLIAM, M., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2200 PENNSYLVANIA AVE NW
 City WASHINGTON State DC Zip Code 20037-1709
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) HUNTON & WILLIAMS Occupation (for Individual) PARTNER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 20.80

Date of Receipt 10 / 25 / 2016
Transaction ID : SA11A.462020
 Amount of Each Receipt this Period 9.22
 Memo Item CONTRIBUTION
 PARTNERSHIP ATTRIBUTION

B. FREEMAN, LAUREN, E., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2200 PENNSYLVANIA AVE NW
 City WASHINGTON State DC Zip Code 20037-1709
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) HUNTON & WILLIAMS Occupation (for Individual) PARTNER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 20.80

Date of Receipt 10 / 25 / 2016
Transaction ID : SA11A.462021
 Amount of Each Receipt this Period 9.22
 Memo Item CONTRIBUTION
 PARTNERSHIP ATTRIBUTION

C. GALL, CHARLES, A., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2200 PENNSYLVANIA AVE NW
 City WASHINGTON State DC Zip Code 20037-1709
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) HUNTON & WILLIAMS Occupation (for Individual) PARTNER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 20.80

Date of Receipt 10 / 25 / 2016
Transaction ID : SA11A.462022
 Amount of Each Receipt this Period 9.22
 Memo Item CONTRIBUTION
 PARTNERSHIP ATTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	0.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 4161 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. GEORGERIAN, KEVIN, M., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2200 PENNSYLVANIA AVE NW
 City WASHINGTON State DC Zip Code 20037-1709
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) HUNTON & WILLIAMS Occupation (for Individual) PARTNER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 20.80

Date of Receipt 10 / 25 / 2016
Transaction ID : SA11A.462023
 Amount of Each Receipt this Period 9.22
 Memo Item CONTRIBUTION
 PARTNERSHIP ATTRIBUTION

B. GERHART, JOHN, T., , JR.
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2200 PENNSYLVANIA AVE NW
 City WASHINGTON State DC Zip Code 20037-1709
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) HUNTON & WILLIAMS Occupation (for Individual) PARTNER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 20.80

Date of Receipt 10 / 25 / 2016
Transaction ID : SA11A.462024
 Amount of Each Receipt this Period 9.22
 Memo Item CONTRIBUTION
 PARTNERSHIP ATTRIBUTION

C. GEYER, ANDREW, G., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2200 PENNSYLVANIA AVE NW
 City WASHINGTON State DC Zip Code 20037-1709
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) HUNTON & WILLIAMS Occupation (for Individual) PARTNER
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 20.80

Date of Receipt 10 / 25 / 2016
Transaction ID : SA11A.462025
 Amount of Each Receipt this Period 9.22
 Memo Item CONTRIBUTION
 PARTNERSHIP ATTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	0.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 4162 OF 4311
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. GIESE, JEFFREY, W., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2200 PENNSYLVANIA AVE NW
 City WASHINGTON State DC Zip Code 20037-1709
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) HUNTON & WILLIAMS Occupation (for Individual) PARTNER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 20.80

Date of Receipt 10 / 25 / 2016
Transaction ID : SA11A.462026
 Amount of Each Receipt this Period 9.22
 Memo Item CONTRIBUTION
 PARTNERSHIP ATTRIBUTION

B. GIRAGOSIAN, C, C., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2200 PENNSYLVANIA AVE NW
 City WASHINGTON State DC Zip Code 20037-1709
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) HUNTON & WILLIAMS Occupation (for Individual) PARTNER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 20.80

Date of Receipt 10 / 25 / 2016
Transaction ID : SA11A.462027
 Amount of Each Receipt this Period 9.22
 Memo Item CONTRIBUTION
 PARTNERSHIP ATTRIBUTION

C. GLASGOW, RYAN, A., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2200 PENNSYLVANIA AVE NW
 City WASHINGTON State DC Zip Code 20037-1709
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) HUNTON & WILLIAMS Occupation (for Individual) PARTNER
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 20.80

Date of Receipt 10 / 25 / 2016
Transaction ID : SA11A.462028
 Amount of Each Receipt this Period 9.22
 Memo Item CONTRIBUTION
 PARTNERSHIP ATTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	0.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 4163 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. GRANGER, DOUGLAS, S., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2200 PENNSYLVANIA AVE NW
 City WASHINGTON State DC Zip Code 20037-1709
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) HUNTON & WILLIAMS Occupation (for Individual) PARTNER
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 20.80

Date of Receipt 10 / 25 / 2016
Transaction ID : SA11A.462029
 Amount of Each Receipt this Period 9.22
 Memo Item CONTRIBUTION
 PARTNERSHIP ATTRIBUTION

B. GRASSO, LAURIE, A., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2200 PENNSYLVANIA AVE NW
 City WASHINGTON State DC Zip Code 20037-1709
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) HUNTON & WILLIAMS Occupation (for Individual) PARTNER
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 20.80

Date of Receipt 10 / 25 / 2016
Transaction ID : SA11A.462030
 Amount of Each Receipt this Period 9.22
 Memo Item CONTRIBUTION
 PARTNERSHIP ATTRIBUTION

C. GRIFFITH, GRETA, T., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2200 PENNSYLVANIA AVE NW
 City WASHINGTON State DC Zip Code 20037-1709
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) HUNTON & WILLIAMS Occupation (for Individual) PARTNER
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 20.80

Date of Receipt 10 / 25 / 2016
Transaction ID : SA11A.462031
 Amount of Each Receipt this Period 9.22
 Memo Item CONTRIBUTION
 PARTNERSHIP ATTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 0.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 4164 OF 4311
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. HAAS, STEVEN, M., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2200 PENNSYLVANIA AVE NW
 City WASHINGTON State DC Zip Code 20037-1709
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) HUNTON & WILLIAMS Occupation (for Individual) PARTNER
 Receipt For: Primary General Other (specify) Aggregate Year-to-Date 20.80

Date of Receipt 10 / 25 / 2016
Transaction ID : SA11A.462032
 Amount of Each Receipt this Period 9.22
 Memo Item CONTRIBUTION
 PARTNERSHIP ATTRIBUTION

B. HAGER, BRIAN, L., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2200 PENNSYLVANIA AVE NW
 City WASHINGTON State DC Zip Code 20037-1709
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) HUNTON & WILLIAMS Occupation (for Individual) PARTNER
 Receipt For: Primary General Other (specify) Aggregate Year-to-Date 20.80

Date of Receipt 10 / 25 / 2016
Transaction ID : SA11A.462033
 Amount of Each Receipt this Period 9.22
 Memo Item CONTRIBUTION
 PARTNERSHIP ATTRIBUTION

C. HALE, JARRETT, L., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2200 PENNSYLVANIA AVE NW
 City WASHINGTON State DC Zip Code 20037-1709
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) HUNTON & WILLIAMS Occupation (for Individual) PARTNER
 Receipt For: Primary General Other (specify) Aggregate Year-to-Date 20.80

Date of Receipt 10 / 25 / 2016
Transaction ID : SA11A.462034
 Amount of Each Receipt this Period 9.22
 Memo Item CONTRIBUTION
 PARTNERSHIP ATTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... 0.00
TOTAL This Period (last page this line number only).....

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 4165 OF 4311
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. HARBOUR, JASON, W., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2200 PENNSYLVANIA AVE NW
 City WASHINGTON State DC Zip Code 20037-1709
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) HUNTON & WILLIAMS Occupation (for Individual) PARTNER
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date **20.80**

Date of Receipt **10 / 25 / 2016**
Transaction ID : SA11A.462035
 Amount of Each Receipt this Period **9.22**
 Memo Item CONTRIBUTION
 PARTNERSHIP ATTRIBUTION

B. HARVEY, JEFFREY, L., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2200 PENNSYLVANIA AVE NW
 City WASHINGTON State DC Zip Code 20037-1709
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) HUNTON & WILLIAMS Occupation (for Individual) PARTNER
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date **20.80**

Date of Receipt **10 / 25 / 2016**
Transaction ID : SA11A.462036
 Amount of Each Receipt this Period **9.22**
 Memo Item CONTRIBUTION
 PARTNERSHIP ATTRIBUTION

C. HAYNES, RUDENE, T., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2200 PENNSYLVANIA AVE NW
 City WASHINGTON State DC Zip Code 20037-1709
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) HUNTON & WILLIAMS Occupation (for Individual) PARTNER
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date **20.80**

Date of Receipt **10 / 25 / 2016**
Transaction ID : SA11A.462037
 Amount of Each Receipt this Period **9.22**
 Memo Item CONTRIBUTION
 PARTNERSHIP ATTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	0.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 4166 OF 4311
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. HEDBERG, MARK, S.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 2200 PENNSYLVANIA AVE NW

City WASHINGTON	State DC	Zip Code 20037-1709
--------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) HUNTON & WILLIAMS	Occupation (for Individual) PARTNER
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
20.80

Date of Receipt
10 / 25 / 2016
Transaction ID : SA11A.462038

Amount of Each Receipt this Period
9.22

Memo Item CONTRIBUTION

PARTNERSHIP ATTRIBUTION

B. HESSE, GREGORY, G.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 2200 PENNSYLVANIA AVE NW

City WASHINGTON	State DC	Zip Code 20037-1709
--------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) HUNTON & WILLIAMS	Occupation (for Individual) PARTNER
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
20.80

Date of Receipt
10 / 25 / 2016
Transaction ID : SA11A.462039

Amount of Each Receipt this Period
9.22

Memo Item CONTRIBUTION

PARTNERSHIP ATTRIBUTION

C. HIGBEE, DAVID, A.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 2200 PENNSYLVANIA AVE NW

City WASHINGTON	State DC	Zip Code 20037-1709
--------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) HUNTON & WILLIAMS	Occupation (for Individual) PARTNER
--	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
20.80

Date of Receipt
10 / 25 / 2016
Transaction ID : SA11A.462040

Amount of Each Receipt this Period
9.22

Memo Item CONTRIBUTION

PARTNERSHIP ATTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	0.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 4167 OF 4311
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. HINER, THOMAS, Y., ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 2200 PENNSYLVANIA AVE NW

City WASHINGTON	State DC	Zip Code 20037-1709
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) HUNTON & WILLIAMS	Occupation (for Individual) PARTNER
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
20.80

Date of Receipt
10 / 25 / 2016
Transaction ID : SA11A.462041

Amount of Each Receipt this Period
9.22

Memo Item CONTRIBUTION

PARTNERSHIP ATTRIBUTION

B. HOFFMAN, D, B., ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 2200 PENNSYLVANIA AVE NW

City WASHINGTON	State DC	Zip Code 20037-1709
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) HUNTON & WILLIAMS	Occupation (for Individual) PARTNER
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Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
20.80

Date of Receipt
10 / 25 / 2016
Transaction ID : SA11A.462042

Amount of Each Receipt this Period
9.22

Memo Item CONTRIBUTION

PARTNERSHIP ATTRIBUTION

C. HOGFOSS, ROBERT, E., ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 2200 PENNSYLVANIA AVE NW

City WASHINGTON	State DC	Zip Code 20037-1709
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) HUNTON & WILLIAMS	Occupation (for Individual) PARTNER
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Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
20.80

Date of Receipt
10 / 25 / 2016
Transaction ID : SA11A.462043

Amount of Each Receipt this Period
9.22

Memo Item CONTRIBUTION

PARTNERSHIP ATTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	0.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 4168 OF 4311
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. HOLZGRAEFE, JOHN, R., ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 2200 PENNSYLVANIA AVE NW

City WASHINGTON	State DC	Zip Code 20037-1709
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) HUNTON & WILLIAMS	Occupation (for Individual) PARTNER
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Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
20.80

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		25		2016

Transaction ID : SA11A.462044

Amount of Each Receipt this Period
9.22

Memo Item CONTRIBUTION

PARTNERSHIP ATTRIBUTION

B. HOWELL, GEORGE, C., , III
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 2200 PENNSYLVANIA AVE NW

City WASHINGTON	State DC	Zip Code 20037-1709
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) HUNTON & WILLIAMS	Occupation (for Individual) PARTNER
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
20.80

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		25		2016

Transaction ID : SA11A.462045

Amount of Each Receipt this Period
9.22

Memo Item CONTRIBUTION

PARTNERSHIP ATTRIBUTION

C. HULL, KEVIN, F., ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 2200 PENNSYLVANIA AVE NW

City WASHINGTON	State DC	Zip Code 20037-1709
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) HUNTON & WILLIAMS	Occupation (for Individual) PARTNER
--	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
20.79

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		25		2016

Transaction ID : SA11A.462046

Amount of Each Receipt this Period
9.22

Memo Item CONTRIBUTION

PARTNERSHIP ATTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	0.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 4169 OF 4311
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. ISANI, JAMIE, Z., ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 2200 PENNSYLVANIA AVE NW

City WASHINGTON	State DC	Zip Code 20037-1709
--------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) HUNTON & WILLIAMS	Occupation (for Individual) PARTNER
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
20.79

Date of Receipt
10 / 25 / 2016
Transaction ID : SA11A.462047

Amount of Each Receipt this Period
9.22

Memo Item CONTRIBUTION

PARTNERSHIP ATTRIBUTION

B. ITKIN, JUDITH, H., ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 2200 PENNSYLVANIA AVE NW

City WASHINGTON	State DC	Zip Code 20037-1709
--------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) HUNTON & WILLIAMS	Occupation (for Individual) PARTNER
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
20.79

Date of Receipt
10 / 25 / 2016
Transaction ID : SA11A.462048

Amount of Each Receipt this Period
9.22

Memo Item CONTRIBUTION

PARTNERSHIP ATTRIBUTION

C. JACOBS, TIMOTHY, L., ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 2200 PENNSYLVANIA AVE NW

City WASHINGTON	State DC	Zip Code 20037-1709
--------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) HUNTON & WILLIAMS	Occupation (for Individual) PARTNER
--	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
9.22

Date of Receipt
10 / 25 / 2016
Transaction ID : SA11A.462049

Amount of Each Receipt this Period
9.22

Memo Item CONTRIBUTION

PARTNERSHIP ATTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	0.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 4170 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
Team Ryan

A. JARVIS, LORI, E., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2200 PENNSYLVANIA AVE NW
 City WASHINGTON State DC Zip Code 20037-1709
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) HUNTON & WILLIAMS Occupation (for Individual) PARTNER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 20.79

Date of Receipt 10 / 25 / 2016
Transaction ID : SA11A.462050
 Amount of Each Receipt this Period 9.22
 Memo Item CONTRIBUTION
 PARTNERSHIP ATTRIBUTION

B. JENKINS, MATTHEW, D., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2200 PENNSYLVANIA AVE NW
 City WASHINGTON State DC Zip Code 20037-1709
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) HUNTON & WILLIAMS Occupation (for Individual) PARTNER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 20.79

Date of Receipt 10 / 25 / 2016
Transaction ID : SA11A.462051
 Amount of Each Receipt this Period 9.22
 Memo Item CONTRIBUTION
 PARTNERSHIP ATTRIBUTION

C. JOHNSON, HARRY, M., , III
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2200 PENNSYLVANIA AVE NW
 City WASHINGTON State DC Zip Code 20037-1709
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) HUNTON & WILLIAMS Occupation (for Individual) PARTNER
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 20.79

Date of Receipt 10 / 25 / 2016
Transaction ID : SA11A.462052
 Amount of Each Receipt this Period 9.22
 Memo Item CONTRIBUTION
 PARTNERSHIP ATTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	0.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 4171 OF 4311
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. JONES, KEVIN, W., ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 2200 PENNSYLVANIA AVE NW

City WASHINGTON	State DC	Zip Code 20037-1709
--------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) HUNTON & WILLIAMS	Occupation (for Individual) PARTNER
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
20.79

Date of Receipt
10 / 25 / 2016
Transaction ID : SA11A.462053

Amount of Each Receipt this Period
9.22

Memo Item CONTRIBUTION
PARTNERSHIP ATTRIBUTION

B. JONES, LAURA, E., ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 2200 PENNSYLVANIA AVE NW

City WASHINGTON	State DC	Zip Code 20037-1709
--------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) HUNTON & WILLIAMS	Occupation (for Individual) PARTNER
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
20.79

Date of Receipt
10 / 25 / 2016
Transaction ID : SA11A.462054

Amount of Each Receipt this Period
9.22

Memo Item CONTRIBUTION
PARTNERSHIP ATTRIBUTION

C. JORDANGER, DAN, J., ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 2200 PENNSYLVANIA AVE NW

City WASHINGTON	State DC	Zip Code 20037-1709
--------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) HUNTON & WILLIAMS	Occupation (for Individual) PARTNER
--	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
20.79

Date of Receipt
10 / 25 / 2016
Transaction ID : SA11A.462055

Amount of Each Receipt this Period
9.22

Memo Item CONTRIBUTION
PARTNERSHIP ATTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	0.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 4172 OF 4311
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. KENYON, DOUGLAS, W., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2200 PENNSYLVANIA AVE NW
 City WASHINGTON State DC Zip Code 20037-1709
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) HUNTON & WILLIAMS Occupation (for Individual) PARTNER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 20.79

Date of Receipt 10 / 25 / 2016
Transaction ID : SA11A.462056
 Amount of Each Receipt this Period 9.22
 Memo Item CONTRIBUTION
 PARTNERSHIP ATTRIBUTION

B. KERRIGAN, MICHAEL, C., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2200 PENNSYLVANIA AVE NW
 City WASHINGTON State DC Zip Code 20037-1709
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) HUNTON & WILLIAMS Occupation (for Individual) PARTNER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 20.79

Date of Receipt 10 / 25 / 2016
Transaction ID : SA11A.462057
 Amount of Each Receipt this Period 9.22
 Memo Item CONTRIBUTION
 PARTNERSHIP ATTRIBUTION

C. KETCHUM, RYAN, T., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2200 PENNSYLVANIA AVE NW
 City WASHINGTON State DC Zip Code 20037-1709
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) HUNTON & WILLIAMS Occupation (for Individual) PARTNER
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 20.79

Date of Receipt 10 / 25 / 2016
Transaction ID : SA11A.462058
 Amount of Each Receipt this Period 9.22
 Memo Item CONTRIBUTION
 PARTNERSHIP ATTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	0.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 4173 OF 4311
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. KIMPEL, SCOTT, H., ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 2200 PENNSYLVANIA AVE NW

City WASHINGTON	State DC	Zip Code 20037-1709
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) HUNTON & WILLIAMS	Occupation (for Individual) PARTNER
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Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
20.79

Date of Receipt
10 / 25 / 2016
Transaction ID : SA11A.462059

Amount of Each Receipt this Period
9.22

Memo Item CONTRIBUTION

PARTNERSHIP ATTRIBUTION

B. KNAUSS, CHARLES, H., ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 2200 PENNSYLVANIA AVE NW

City WASHINGTON	State DC	Zip Code 20037-1709
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) HUNTON & WILLIAMS	Occupation (for Individual) PARTNER
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
20.79

Date of Receipt
10 / 25 / 2016
Transaction ID : SA11A.462060

Amount of Each Receipt this Period
9.22

Memo Item CONTRIBUTION

PARTNERSHIP ATTRIBUTION

C. KOEHLER, EDWARD, B., ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 2200 PENNSYLVANIA AVE NW

City WASHINGTON	State DC	Zip Code 20037-1709
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) HUNTON & WILLIAMS	Occupation (for Individual) PARTNER
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Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
20.79

Date of Receipt
10 / 25 / 2016
Transaction ID : SA11A.462061

Amount of Each Receipt this Period
9.22

Memo Item CONTRIBUTION

PARTNERSHIP ATTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	0.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 4174 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
Team Ryan

A. KULP, CHRISTOPHER, G., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2200 PENNSYLVANIA AVE NW
 City WASHINGTON State DC Zip Code 20037-1709
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) HUNTON & WILLIAMS Occupation (for Individual) PARTNER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 20.79

Date of Receipt 10 / 25 / 2016
Transaction ID : SA11A.462062
 Amount of Each Receipt this Period 9.22
 Memo Item CONTRIBUTION
 PARTNERSHIP ATTRIBUTION

B. LANDIN, DAVID, C., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2200 PENNSYLVANIA AVE NW
 City WASHINGTON State DC Zip Code 20037-1709
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) HUNTON & WILLIAMS Occupation (for Individual) PARTNER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 20.79

Date of Receipt 10 / 25 / 2016
Transaction ID : SA11A.462063
 Amount of Each Receipt this Period 9.22
 Memo Item CONTRIBUTION
 PARTNERSHIP ATTRIBUTION

C. LARKIN, KURT, G., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2200 PENNSYLVANIA AVE NW
 City WASHINGTON State DC Zip Code 20037-1709
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) HUNTON & WILLIAMS Occupation (for Individual) PARTNER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 20.79

Date of Receipt 10 / 25 / 2016
Transaction ID : SA11A.462064
 Amount of Each Receipt this Period 9.22
 Memo Item CONTRIBUTION
 PARTNERSHIP ATTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	0.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 4175 OF 4311
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. LAWRENCE, ANDREW, W., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2200 PENNSYLVANIA AVE NW
 City WASHINGTON State DC Zip Code 20037-1709
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) HUNTON & WILLIAMS Occupation (for Individual) PARTNER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 20.79

Date of Receipt 10 / 25 / 2016
Transaction ID : SA11A.462065
 Amount of Each Receipt this Period 9.22
 Memo Item CONTRIBUTION
 PARTNERSHIP ATTRIBUTION

B. LEE, COREY, A., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2200 PENNSYLVANIA AVE NW
 City WASHINGTON State DC Zip Code 20037-1709
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) HUNTON & WILLIAMS Occupation (for Individual) PARTNER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 20.79

Date of Receipt 10 / 25 / 2016
Transaction ID : SA11A.462066
 Amount of Each Receipt this Period 9.22
 Memo Item CONTRIBUTION
 PARTNERSHIP ATTRIBUTION

C. LEWIS, BRENT, A., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2200 PENNSYLVANIA AVE NW
 City WASHINGTON State DC Zip Code 20037-1709
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) HUNTON & WILLIAMS Occupation (for Individual) PARTNER
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 20.79

Date of Receipt 10 / 25 / 2016
Transaction ID : SA11A.462067
 Amount of Each Receipt this Period 9.22
 Memo Item CONTRIBUTION
 PARTNERSHIP ATTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	0.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 4176 OF 4311
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. LITTLE, CATHERINE, D., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2200 PENNSYLVANIA AVE NW
 City WASHINGTON State DC Zip Code 20037-1709
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) HUNTON & WILLIAMS Occupation (for Individual) PARTNER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 20.79

Date of Receipt 10 / 25 / 2016
Transaction ID : SA11A.462068
 Amount of Each Receipt this Period 9.22
 Memo Item CONTRIBUTION
 PARTNERSHIP ATTRIBUTION

B. LONG, NASH, E., , III
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2200 PENNSYLVANIA AVE NW
 City WASHINGTON State DC Zip Code 20037-1709
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) HUNTON & WILLIAMS Occupation (for Individual) PARTNER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 20.79

Date of Receipt 10 / 25 / 2016
Transaction ID : SA11A.462069
 Amount of Each Receipt this Period 9.22
 Memo Item CONTRIBUTION
 PARTNERSHIP ATTRIBUTION

C. LOWMAN, DAVID, S., , JR.
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2200 PENNSYLVANIA AVE NW
 City WASHINGTON State DC Zip Code 20037-1709
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) HUNTON & WILLIAMS Occupation (for Individual) PARTNER
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 20.79

Date of Receipt 10 / 25 / 2016
Transaction ID : SA11A.462070
 Amount of Each Receipt this Period 9.22
 Memo Item CONTRIBUTION
 PARTNERSHIP ATTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	0.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 4177 OF 4311
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. MADDY, TYLER, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 2200 PENNSYLVANIA AVE NW

City WASHINGTON	State DC	Zip Code 20037-1709
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) HUNTON & WILLIAMS	Occupation (for Individual) PARTNER
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Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
20.79

Date of Receipt
10 / 25 / 2016
Transaction ID : SA11A.462071

Amount of Each Receipt this Period
9.22

Memo Item CONTRIBUTION

PARTNERSHIP ATTRIBUTION

B. MAISOG, MANUEL, E., ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 2200 PENNSYLVANIA AVE NW

City WASHINGTON	State DC	Zip Code 20037-1709
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) HUNTON & WILLIAMS	Occupation (for Individual) PARTNER
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Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
20.79

Date of Receipt
10 / 25 / 2016
Transaction ID : SA11A.462072

Amount of Each Receipt this Period
9.22

Memo Item CONTRIBUTION

PARTNERSHIP ATTRIBUTION

C. MARCUIS, ALAN, J., ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 2200 PENNSYLVANIA AVE NW

City WASHINGTON	State DC	Zip Code 20037-1709
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) HUNTON & WILLIAMS	Occupation (for Individual) PARTNER
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Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
20.79

Date of Receipt
10 / 25 / 2016
Transaction ID : SA11A.462073

Amount of Each Receipt this Period
9.22

Memo Item CONTRIBUTION

PARTNERSHIP ATTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	0.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 4178 OF 4311
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. MARGARIT, FERNANDO, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2200 PENNSYLVANIA AVE NW
 City WASHINGTON State DC Zip Code 20037-1709
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) HUNTON & WILLIAMS Occupation (for Individual) PARTNER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 20.79

Date of Receipt 10 / 25 / 2016
Transaction ID : SA11A.462074
 Amount of Each Receipt this Period 9.22
 Memo Item CONTRIBUTION
 PARTNERSHIP ATTRIBUTION

B. MARSHALL, LAURA, C., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2200 PENNSYLVANIA AVE NW
 City WASHINGTON State DC Zip Code 20037-1709
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) HUNTON & WILLIAMS Occupation (for Individual) PARTNER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 20.79

Date of Receipt 10 / 25 / 2016
Transaction ID : SA11A.462075
 Amount of Each Receipt this Period 9.22
 Memo Item CONTRIBUTION
 PARTNERSHIP ATTRIBUTION

C. MARTIN, JOHN, S., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2200 PENNSYLVANIA AVE NW
 City WASHINGTON State DC Zip Code 20037-1709
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) HUNTON & WILLIAMS Occupation (for Individual) PARTNER
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 20.79

Date of Receipt 10 / 25 / 2016
Transaction ID : SA11A.462076
 Amount of Each Receipt this Period 9.22
 Memo Item CONTRIBUTION
 PARTNERSHIP ATTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 0.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 4179 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. MARTINEZ, WALFRIDO, J., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2200 PENNSYLVANIA AVE NW
 City WASHINGTON State DC Zip Code 20037-1709
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) HUNTON & WILLIAMS Occupation (for Individual) PARTNER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 20.79

Date of Receipt 10 / 25 / 2016
Transaction ID : SA11A.462077
 Amount of Each Receipt this Period 9.22
 Memo Item CONTRIBUTION
 PARTNERSHIP ATTRIBUTION

B. MATHEWS, LAURIE, U., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2200 PENNSYLVANIA AVE NW
 City WASHINGTON State DC Zip Code 20037-1709
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) HUNTON & WILLIAMS Occupation (for Individual) PARTNER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 20.79

Date of Receipt 10 / 25 / 2016
Transaction ID : SA11A.462078
 Amount of Each Receipt this Period 9.22
 Memo Item CONTRIBUTION
 PARTNERSHIP ATTRIBUTION

C. MAYNARD, JOHN, G., , III
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2200 PENNSYLVANIA AVE NW
 City WASHINGTON State DC Zip Code 20037-1709
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) HUNTON & WILLIAMS Occupation (for Individual) PARTNER
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 20.79

Date of Receipt 10 / 25 / 2016
Transaction ID : SA11A.462079
 Amount of Each Receipt this Period 9.22
 Memo Item CONTRIBUTION
 PARTNERSHIP ATTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 0.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 4180 OF 4311
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. MCBRIDE, WILLIAM, H., ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 2200 PENNSYLVANIA AVE NW

City WASHINGTON	State DC	Zip Code 20037-1709
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) HUNTON & WILLIAMS	Occupation (for Individual) PARTNER
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Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
20.79

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		25		2016

Transaction ID : SA11A.462080

Amount of Each Receipt this Period

9.22

Memo Item CONTRIBUTION
PARTNERSHIP ATTRIBUTION

B. MCCANN, MICHAEL, C., ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 2200 PENNSYLVANIA AVE NW

City WASHINGTON	State DC	Zip Code 20037-1709
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) HUNTON & WILLIAMS	Occupation (for Individual) PARTNER
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Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
20.79

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		25		2016

Transaction ID : SA11A.462081

Amount of Each Receipt this Period

9.22

Memo Item CONTRIBUTION
PARTNERSHIP ATTRIBUTION

C. MCCRAE, JANET, S., ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 2200 PENNSYLVANIA AVE NW

City WASHINGTON	State DC	Zip Code 20037-1709
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) HUNTON & WILLIAMS	Occupation (for Individual) PARTNER
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Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
20.79

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		25		2016

Transaction ID : SA11A.462082

Amount of Each Receipt this Period

9.22

Memo Item CONTRIBUTION
PARTNERSHIP ATTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	0.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 4181 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
Team Ryan

A. MCGEOCH, ALEXANDER, G., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2200 PENNSYLVANIA AVE NW
 City WASHINGTON State DC Zip Code 20037-1709
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) HUNTON & WILLIAMS Occupation (for Individual) PARTNER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 20.79

Date of Receipt 10 / 25 / 2016
Transaction ID : SA11A.462083
 Amount of Each Receipt this Period 9.22
 Memo Item CONTRIBUTION
 PARTNERSHIP ATTRIBUTION

B. MCGRANAHAN, JOHN, C., , JR.
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2200 PENNSYLVANIA AVE NW
 City WASHINGTON State DC Zip Code 20037-1709
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) HUNTON & WILLIAMS Occupation (for Individual) PARTNER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 20.79

Date of Receipt 10 / 25 / 2016
Transaction ID : SA11A.462084
 Amount of Each Receipt this Period 9.22
 Memo Item CONTRIBUTION
 PARTNERSHIP ATTRIBUTION

C. MEMBIELA, GUSTAVO, J., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2200 PENNSYLVANIA AVE NW
 City WASHINGTON State DC Zip Code 20037-1709
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) HUNTON & WILLIAMS Occupation (for Individual) PARTNER
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 20.79

Date of Receipt 10 / 25 / 2016
Transaction ID : SA11A.462085
 Amount of Each Receipt this Period 9.22
 Memo Item CONTRIBUTION
 PARTNERSHIP ATTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	0.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 4182 OF 4311
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. MENDIETA, URIEL, A., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2200 PENNSYLVANIA AVE NW
 City WASHINGTON State DC Zip Code 20037-1709
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) HUNTON & WILLIAMS Occupation (for Individual) PARTNER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 20.79

Date of Receipt 10 / 25 / 2016
Transaction ID : SA11A.462086
 Amount of Each Receipt this Period 9.22
 Memo Item CONTRIBUTION
 PARTNERSHIP ATTRIBUTION

B. MIGNONE, PETER, J., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2200 PENNSYLVANIA AVE NW
 City WASHINGTON State DC Zip Code 20037-1709
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) HUNTON & WILLIAMS Occupation (for Individual) PARTNER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 20.79

Date of Receipt 10 / 25 / 2016
Transaction ID : SA11A.462087
 Amount of Each Receipt this Period 9.22
 Memo Item CONTRIBUTION
 PARTNERSHIP ATTRIBUTION

C. MITCHELL, PATRICK, E., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2200 PENNSYLVANIA AVE NW
 City WASHINGTON State DC Zip Code 20037-1709
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) HUNTON & WILLIAMS Occupation (for Individual) PARTNER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 20.79

Date of Receipt 10 / 25 / 2016
Transaction ID : SA11A.462088
 Amount of Each Receipt this Period 9.22
 Memo Item CONTRIBUTION
 PARTNERSHIP ATTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 0.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 4183 OF 4311
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. MOORE, T, J., , III
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 2200 PENNSYLVANIA AVE NW

City WASHINGTON	State DC	Zip Code 20037-1709
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) HUNTON & WILLIAMS	Occupation (for Individual) PARTNER
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Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
20.79

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		25		2016

Transaction ID : SA11A.462089

Amount of Each Receipt this Period

9.22

Memo Item CONTRIBUTION
PARTNERSHIP ATTRIBUTION

B. MOORE, THURSTON, R., ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 2200 PENNSYLVANIA AVE NW

City WASHINGTON	State DC	Zip Code 20037-1709
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) HUNTON & WILLIAMS	Occupation (for Individual) PARTNER
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Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
20.79

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		25		2016

Transaction ID : SA11A.462090

Amount of Each Receipt this Period

9.22

Memo Item CONTRIBUTION
PARTNERSHIP ATTRIBUTION

C. MORTIMER, ANN, M., ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 2200 PENNSYLVANIA AVE NW

City WASHINGTON	State DC	Zip Code 20037-1709
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) HUNTON & WILLIAMS	Occupation (for Individual) PARTNER
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Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
20.79

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		25		2016

Transaction ID : SA11A.462091

Amount of Each Receipt this Period

9.22

Memo Item CONTRIBUTION
PARTNERSHIP ATTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	0.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 4184 OF 4311
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. MOWER, JAY, B., ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 2200 PENNSYLVANIA AVE NW

City WASHINGTON	State DC	Zip Code 20037-1709
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) HUNTON & WILLIAMS	Occupation (for Individual) PARTNER
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Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
20.79

Date of Receipt
10 / 25 / 2016
Transaction ID : SA11A.462092

Amount of Each Receipt this Period
9.22

Memo Item CONTRIBUTION

PARTNERSHIP ATTRIBUTION

B. MUELLER, MICHAEL, J., ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 2200 PENNSYLVANIA AVE NW

City WASHINGTON	State DC	Zip Code 20037-1709
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) HUNTON & WILLIAMS	Occupation (for Individual) PARTNER
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Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
20.79

Date of Receipt
10 / 25 / 2016
Transaction ID : SA11A.462093

Amount of Each Receipt this Period
9.22

Memo Item CONTRIBUTION

PARTNERSHIP ATTRIBUTION

C. MURDOCK, ERIC, J., ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 2200 PENNSYLVANIA AVE NW

City WASHINGTON	State DC	Zip Code 20037-1709
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) HUNTON & WILLIAMS	Occupation (for Individual) PARTNER
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Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
20.79

Date of Receipt
10 / 25 / 2016
Transaction ID : SA11A.462094

Amount of Each Receipt this Period
9.22

Memo Item CONTRIBUTION

PARTNERSHIP ATTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	0.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 4185 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. MURPHY, TED, J., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2200 PENNSYLVANIA AVE NW
 City WASHINGTON State DC Zip Code 20037-1709
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) HUNTON & WILLIAMS Occupation (for Individual) PARTNER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 20.79

Date of Receipt 10 / 25 / 2016
Transaction ID : SA11A.462095
 Amount of Each Receipt this Period 9.22
 Memo Item CONTRIBUTION
 PARTNERSHIP ATTRIBUTION

B. MURPHY, THOMAS, P., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2200 PENNSYLVANIA AVE NW
 City WASHINGTON State DC Zip Code 20037-1709
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) HUNTON & WILLIAMS Occupation (for Individual) PARTNER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 20.79

Date of Receipt 10 / 25 / 2016
Transaction ID : SA11A.462096
 Amount of Each Receipt this Period 9.22
 Memo Item CONTRIBUTION
 PARTNERSHIP ATTRIBUTION

C. MUSTONE, DAVID, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2200 PENNSYLVANIA AVE NW
 City WASHINGTON State DC Zip Code 20037-1709
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) HUNTON & WILLIAMS Occupation (for Individual) PARTNER
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 20.79

Date of Receipt 10 / 25 / 2016
Transaction ID : SA11A.462097
 Amount of Each Receipt this Period 9.22
 Memo Item CONTRIBUTION
 PARTNERSHIP ATTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	0.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 4186 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
Team Ryan

A. NAUGHTON, JAMES, P., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2200 PENNSYLVANIA AVE NW
 City WASHINGTON State DC Zip Code 20037-1709
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) HUNTON & WILLIAMS Occupation (for Individual) PARTNER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 20.79

Date of Receipt 10 / 25 / 2016
Transaction ID : SA11A.462098
 Amount of Each Receipt this Period 9.22
 Memo Item CONTRIBUTION
 PARTNERSHIP ATTRIBUTION

B. NEDELL, ERIC, J., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2200 PENNSYLVANIA AVE NW
 City WASHINGTON State DC Zip Code 20037-1709
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) HUNTON & WILLIAMS Occupation (for Individual) PARTNER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 20.79

Date of Receipt 10 / 25 / 2016
Transaction ID : SA11A.462099
 Amount of Each Receipt this Period 9.22
 Memo Item CONTRIBUTION
 PARTNERSHIP ATTRIBUTION

C. NEDZBALA, MICHAEL, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2200 PENNSYLVANIA AVE NW
 City WASHINGTON State DC Zip Code 20037-1709
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) HUNTON & WILLIAMS Occupation (for Individual) PARTNER
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 20.78

Date of Receipt 10 / 25 / 2016
Transaction ID : SA11A.462100
 Amount of Each Receipt this Period 9.21
 Memo Item CONTRIBUTION
 PARTNERSHIP ATTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 0.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 4187 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
Team Ryan

A. NEWTON, WILLIAM, L., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2200 PENNSYLVANIA AVE NW
 City WASHINGTON State DC Zip Code 20037-1709
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) HUNTON & WILLIAMS Occupation (for Individual) PARTNER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 20.78

Date of Receipt 10 / 25 / 2016
Transaction ID : SA11A.462101
 Amount of Each Receipt this Period 9.21
 Memo Item CONTRIBUTION
 PARTNERSHIP ATTRIBUTION

B. NUNLEY, LONNIE, D., , III
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2200 PENNSYLVANIA AVE NW
 City WASHINGTON State DC Zip Code 20037-1709
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) HUNTON & WILLIAMS Occupation (for Individual) PARTNER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 20.78

Date of Receipt 10 / 25 / 2016
Transaction ID : SA11A.462102
 Amount of Each Receipt this Period 9.21
 Memo Item CONTRIBUTION
 PARTNERSHIP ATTRIBUTION

C. O' BRIEN, PETER, K., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2200 PENNSYLVANIA AVE NW
 City WASHINGTON State DC Zip Code 20037-1709
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) HUNTON & WILLIAMS Occupation (for Individual) PARTNER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 20.78

Date of Receipt 10 / 25 / 2016
Transaction ID : SA11A.462104
 Amount of Each Receipt this Period 9.21
 Memo Item CONTRIBUTION
 PARTNERSHIP ATTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	0.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 4188 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. O'CONNOR, JOHN, T., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2200 PENNSYLVANIA AVE NW
 City WASHINGTON State DC Zip Code 20037-1709
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) HUNTON & WILLIAMS Occupation (for Individual) PARTNER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 20.78

Date of Receipt 10 / 25 / 2016
Transaction ID : SA11A.462105
 Amount of Each Receipt this Period 9.21
 Memo Item CONTRIBUTION
 PARTNERSHIP ATTRIBUTION

B. O'NEILL, JOHN, D., , JR.
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2200 PENNSYLVANIA AVE NW
 City WASHINGTON State DC Zip Code 20037-1709
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) HUNTON & WILLIAMS Occupation (for Individual) PARTNER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 20.78

Date of Receipt 10 / 25 / 2016
Transaction ID : SA11A.462107
 Amount of Each Receipt this Period 9.21
 Memo Item CONTRIBUTION
 PARTNERSHIP ATTRIBUTION

C. OAKES, MICHAEL, A., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2200 PENNSYLVANIA AVE NW
 City WASHINGTON State DC Zip Code 20037-1709
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) HUNTON & WILLIAMS Occupation (for Individual) PARTNER
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 20.78

Date of Receipt 10 / 25 / 2016
Transaction ID : SA11A.462103
 Amount of Each Receipt this Period 9.21
 Memo Item CONTRIBUTION
 PARTNERSHIP ATTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 0.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 4189 OF 4311
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
OH, CECILIA, Y., ,

Mailing Address **2200 PENNSYLVANIA AVE NW**

City WASHINGTON	State DC	Zip Code 20037-1709
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) HUNTON & WILLIAMS	Occupation (for Individual) PARTNER
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Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
20.78

Date of Receipt
10 / 25 / 2016

Transaction ID : SA11A.462106

Amount of Each Receipt this Period
9.21

Memo Item CONTRIBUTION

PARTNERSHIP ATTRIBUTION

B. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
OSSOLA, CHARLES, D., ,

Mailing Address **2200 PENNSYLVANIA AVE NW**

City WASHINGTON	State DC	Zip Code 20037-1709
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) HUNTON & WILLIAMS	Occupation (for Individual) PARTNER
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Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
9.21

Date of Receipt
10 / 25 / 2016

Transaction ID : SA11A.462108

Amount of Each Receipt this Period
9.21

Memo Item CONTRIBUTION

PARTNERSHIP ATTRIBUTION

C. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
OTERO, BRIAN, V., ,

Mailing Address **2200 PENNSYLVANIA AVE NW**

City WASHINGTON	State DC	Zip Code 20037-1709
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) HUNTON & WILLIAMS	Occupation (for Individual) PARTNER
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Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
20.78

Date of Receipt
10 / 25 / 2016

Transaction ID : SA11A.462109

Amount of Each Receipt this Period
9.21

Memo Item CONTRIBUTION

PARTNERSHIP ATTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	0.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 4190 OF 4311
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. PARKS, RANDALL, S., ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 2200 PENNSYLVANIA AVE NW

City WASHINGTON	State DC	Zip Code 20037-1709
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) HUNTON & WILLIAMS	Occupation (for Individual) PARTNER
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
20.78

Date of Receipt
10 / 25 / 2016
Transaction ID : SA11A.462110

Amount of Each Receipt this Period
9.21

Memo Item CONTRIBUTION

PARTNERSHIP ATTRIBUTION

B. PARTEE, PETER, S., , SR.
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 2200 PENNSYLVANIA AVE NW

City WASHINGTON	State DC	Zip Code 20037-1709
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) HUNTON & WILLIAMS	Occupation (for Individual) PARTNER
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
20.78

Date of Receipt
10 / 25 / 2016
Transaction ID : SA11A.462111

Amount of Each Receipt this Period
9.21

Memo Item CONTRIBUTION

PARTNERSHIP ATTRIBUTION

C. PATTERSON, J, S., ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 2200 PENNSYLVANIA AVE NW

City WASHINGTON	State DC	Zip Code 20037-1709
--------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) HUNTON & WILLIAMS	Occupation (for Individual) PARTNER
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Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
20.78

Date of Receipt
10 / 25 / 2016
Transaction ID : SA11A.462112

Amount of Each Receipt this Period
9.21

Memo Item CONTRIBUTION

PARTNERSHIP ATTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	0.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 4191 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. PETKOSKI, DJORDJE, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 2200 PENNSYLVANIA AVE NW

City WASHINGTON	State DC	Zip Code 20037-1709
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) HUNTON & WILLIAMS	Occupation (for Individual) PARTNER
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Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
20.78

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		25		2016

Transaction ID : SA11A.462113

Amount of Each Receipt this Period

9.21

Memo Item
CONTRIBUTION

PARTNERSHIP ATTRIBUTION

B. PINNA, JAMES, M., ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 2200 PENNSYLVANIA AVE NW

City WASHINGTON	State DC	Zip Code 20037-1709
--------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) HUNTON & WILLIAMS	Occupation (for Individual) PARTNER
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
20.78

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		25		2016

Transaction ID : SA11A.462114

Amount of Each Receipt this Period

9.21

Memo Item
CONTRIBUTION

PARTNERSHIP ATTRIBUTION

C. POWELL, KURTIS, A., ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 2200 PENNSYLVANIA AVE NW

City WASHINGTON	State DC	Zip Code 20037-1709
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) HUNTON & WILLIAMS	Occupation (for Individual) PARTNER
--	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
20.78

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		25		2016

Transaction ID : SA11A.462115

Amount of Each Receipt this Period

9.21

Memo Item
CONTRIBUTION

PARTNERSHIP ATTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	0.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 4192 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
Team Ryan

A. POWELL, LEWIS, F., , III
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2200 PENNSYLVANIA AVE NW
 City WASHINGTON State DC Zip Code 20037-1709
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) HUNTON & WILLIAMS Occupation (for Individual) PARTNER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 20.78

Date of Receipt 10 / 25 / 2016
Transaction ID : SA11A.462116
 Amount of Each Receipt this Period 9.21
 Memo Item CONTRIBUTION
 PARTNERSHIP ATTRIBUTION

B. QUACKENBOSS, ROBERT, T., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2200 PENNSYLVANIA AVE NW
 City WASHINGTON State DC Zip Code 20037-1709
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) HUNTON & WILLIAMS Occupation (for Individual) PARTNER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 20.78

Date of Receipt 10 / 25 / 2016
Transaction ID : SA11A.462117
 Amount of Each Receipt this Period 9.21
 Memo Item CONTRIBUTION
 PARTNERSHIP ATTRIBUTION

C. RANGE, JOHN, J., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2200 PENNSYLVANIA AVE NW
 City WASHINGTON State DC Zip Code 20037-1709
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) HUNTON & WILLIAMS Occupation (for Individual) PARTNER
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 20.78

Date of Receipt 10 / 25 / 2016
Transaction ID : SA11A.462118
 Amount of Each Receipt this Period 9.21
 Memo Item CONTRIBUTION
 PARTNERSHIP ATTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	0.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 4193 OF 4311
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. RECTOR, BAKER, R., ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 2200 PENNSYLVANIA AVE NW

City WASHINGTON	State DC	Zip Code 20037-1709
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) HUNTON & WILLIAMS	Occupation (for Individual) PARTNER
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Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
20.78

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		25		2016

Transaction ID : SA11A.462119

Amount of Each Receipt this Period
9.21

Memo Item CONTRIBUTION

PARTNERSHIP ATTRIBUTION

B. REGAN, SHAWN, P., ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 2200 PENNSYLVANIA AVE NW

City WASHINGTON	State DC	Zip Code 20037-1709
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) HUNTON & WILLIAMS	Occupation (for Individual) PARTNER
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
20.78

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		25		2016

Transaction ID : SA11A.462120

Amount of Each Receipt this Period
9.21

Memo Item CONTRIBUTION

PARTNERSHIP ATTRIBUTION

C. REWARI, SONA, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 2200 PENNSYLVANIA AVE NW

City WASHINGTON	State DC	Zip Code 20037-1709
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) HUNTON & WILLIAMS	Occupation (for Individual) PARTNER
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Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
20.78

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		25		2016

Transaction ID : SA11A.462121

Amount of Each Receipt this Period
9.21

Memo Item CONTRIBUTION

PARTNERSHIP ATTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	0.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 4194 OF 4311
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. RICE, THOMAS, A., ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 2200 PENNSYLVANIA AVE NW

City WASHINGTON	State DC	Zip Code 20037-1709
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) HUNTON & WILLIAMS	Occupation (for Individual) PARTNER
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Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
20.78

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		25		2016

Transaction ID : SA11A.462122

Amount of Each Receipt this Period
9.21

Memo Item CONTRIBUTION

PARTNERSHIP ATTRIBUTION

B. RITTER, JENNINGS, G., , II
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 2200 PENNSYLVANIA AVE NW

City WASHINGTON	State DC	Zip Code 20037-1709
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) HUNTON & WILLIAMS	Occupation (for Individual) PARTNER
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
20.78

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		25		2016

Transaction ID : SA11A.462123

Amount of Each Receipt this Period
9.21

Memo Item CONTRIBUTION

PARTNERSHIP ATTRIBUTION

C. ROBB, KATHY, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 2200 PENNSYLVANIA AVE NW

City WASHINGTON	State DC	Zip Code 20037-1709
--------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) HUNTON & WILLIAMS	Occupation (for Individual) PARTNER
--	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
20.78

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		25		2016

Transaction ID : SA11A.462124

Amount of Each Receipt this Period
9.21

Memo Item CONTRIBUTION

PARTNERSHIP ATTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	0.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 4195 OF 4311
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
Team Ryan

A. ROBERTSON, DARYL, B., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2200 PENNSYLVANIA AVE NW
 City WASHINGTON State DC Zip Code 20037-1709
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) HUNTON & WILLIAMS Occupation (for Individual) PARTNER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 20.78

Date of Receipt 10 / 25 / 2016
Transaction ID : SA11A.462125
 Amount of Each Receipt this Period 9.21
 Memo Item CONTRIBUTION
 PARTNERSHIP ATTRIBUTION

B. ROBERTSON, GREGORY, B., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2200 PENNSYLVANIA AVE NW
 City WASHINGTON State DC Zip Code 20037-1709
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) HUNTON & WILLIAMS Occupation (for Individual) PARTNER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 20.78

Date of Receipt 10 / 25 / 2016
Transaction ID : SA11A.462126
 Amount of Each Receipt this Period 9.21
 Memo Item CONTRIBUTION
 PARTNERSHIP ATTRIBUTION

C. ROLFE, ROBERT, M., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2200 PENNSYLVANIA AVE NW
 City WASHINGTON State DC Zip Code 20037-1709
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) HUNTON & WILLIAMS Occupation (for Individual) PARTNER
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 20.78

Date of Receipt 10 / 25 / 2016
Transaction ID : SA11A.462127
 Amount of Each Receipt this Period 9.21
 Memo Item CONTRIBUTION
 PARTNERSHIP ATTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶ 0.00
TOTAL This Period (last page this line number only).....▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 4196 OF 4311
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. ROSSER, BRENT, A., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2200 PENNSYLVANIA AVE NW
 City WASHINGTON State DC Zip Code 20037-1709
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) HUNTON & WILLIAMS Occupation (for Individual) PARTNER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 20.78

Date of Receipt 10 / 25 / 2016
Transaction ID : SA11A.462128
 Amount of Each Receipt this Period 9.21
 Memo Item CONTRIBUTION
 PARTNERSHIP ATTRIBUTION

B. ROWE, WILLIAM, L., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2200 PENNSYLVANIA AVE NW
 City WASHINGTON State DC Zip Code 20037-1709
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) HUNTON & WILLIAMS Occupation (for Individual) PARTNER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 20.78

Date of Receipt 10 / 25 / 2016
Transaction ID : SA11A.462129
 Amount of Each Receipt this Period 9.21
 Memo Item CONTRIBUTION
 PARTNERSHIP ATTRIBUTION

C. RUBY, MARGUERITE, R., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2200 PENNSYLVANIA AVE NW
 City WASHINGTON State DC Zip Code 20037-1709
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) HUNTON & WILLIAMS Occupation (for Individual) PARTNER
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 20.78

Date of Receipt 10 / 25 / 2016
Transaction ID : SA11A.462130
 Amount of Each Receipt this Period 9.21
 Memo Item CONTRIBUTION
 PARTNERSHIP ATTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	0.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 4197 OF 4311
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. SCHMITT, GREGORY, J., ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 2200 PENNSYLVANIA AVE NW

City WASHINGTON	State DC	Zip Code 20037-1709
--------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) HUNTON & WILLIAMS	Occupation (for Individual) PARTNER
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
20.78

Date of Receipt
10 / 25 / 2016
Transaction ID : SA11A.462131

Amount of Each Receipt this Period
9.21

Memo Item CONTRIBUTION

PARTNERSHIP ATTRIBUTION

B. SCHNEIDER, JOHN, R., ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 2200 PENNSYLVANIA AVE NW

City WASHINGTON	State DC	Zip Code 20037-1709
--------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) HUNTON & WILLIAMS	Occupation (for Individual) PARTNER
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
20.78

Date of Receipt
10 / 25 / 2016
Transaction ID : SA11A.462132

Amount of Each Receipt this Period
9.21

Memo Item CONTRIBUTION

PARTNERSHIP ATTRIBUTION

C. SCOVILLE, MATTHEW, A., ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 2200 PENNSYLVANIA AVE NW

City WASHINGTON	State DC	Zip Code 20037-1709
--------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) HUNTON & WILLIAMS	Occupation (for Individual) PARTNER
--	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
20.78

Date of Receipt
10 / 25 / 2016
Transaction ID : SA11A.462133

Amount of Each Receipt this Period
9.21

Memo Item CONTRIBUTION

PARTNERSHIP ATTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	0.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 4198 OF 4311
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
Team Ryan

A. SEEVERS, JAMES, S., , JR.
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 2200 PENNSYLVANIA AVE NW

City WASHINGTON	State DC	Zip Code 20037-1709
--------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) HUNTON & WILLIAMS	Occupation (for Individual) PARTNER
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
20.78

Date of Receipt
10 / 25 / 2016
Transaction ID : SA11A.462134

Amount of Each Receipt this Period
9.21

Memo Item CONTRIBUTION

PARTNERSHIP ATTRIBUTION

B. SELBY, DOUGLASS, P., ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 2200 PENNSYLVANIA AVE NW

City WASHINGTON	State DC	Zip Code 20037-1709
--------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) HUNTON & WILLIAMS	Occupation (for Individual) PARTNER
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
20.78

Date of Receipt
10 / 25 / 2016
Transaction ID : SA11A.462135

Amount of Each Receipt this Period
9.21

Memo Item CONTRIBUTION

PARTNERSHIP ATTRIBUTION

C. SHARP, JOEL, R., ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 2200 PENNSYLVANIA AVE NW

City WASHINGTON	State DC	Zip Code 20037-1709
--------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) HUNTON & WILLIAMS	Occupation (for Individual) PARTNER
--	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
20.78

Date of Receipt
10 / 25 / 2016
Transaction ID : SA11A.462136

Amount of Each Receipt this Period
9.21

Memo Item CONTRIBUTION

PARTNERSHIP ATTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	0.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 4199 OF 4311
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. SHEBELSKIE, MICHAEL, R., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2200 PENNSYLVANIA AVE NW
 City WASHINGTON State DC Zip Code 20037-1709
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) HUNTON & WILLIAMS Occupation (for Individual) PARTNER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 20.78

Date of Receipt 10 / 25 / 2016
Transaction ID : SA11A.462137
 Amount of Each Receipt this Period 9.21
 Memo Item CONTRIBUTION
 PARTNERSHIP ATTRIBUTION

B. SHORES, RYAN, A., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2200 PENNSYLVANIA AVE NW
 City WASHINGTON State DC Zip Code 20037-1709
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) HUNTON & WILLIAMS Occupation (for Individual) PARTNER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 20.78

Date of Receipt 10 / 25 / 2016
Transaction ID : SA11A.462138
 Amount of Each Receipt this Period 9.21
 Memo Item CONTRIBUTION
 PARTNERSHIP ATTRIBUTION

C. SIBLEY, GEORGE, P., , III
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2200 PENNSYLVANIA AVE NW
 City WASHINGTON State DC Zip Code 20037-1709
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) HUNTON & WILLIAMS Occupation (for Individual) PARTNER
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 20.78

Date of Receipt 10 / 25 / 2016
Transaction ID : SA11A.462139
 Amount of Each Receipt this Period 9.21
 Memo Item CONTRIBUTION
 PARTNERSHIP ATTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 0.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 4200 OF 4311
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	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. SIMONE, DONALD, F., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2200 PENNSYLVANIA AVE NW
 City WASHINGTON State DC Zip Code 20037-1709
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) HUNTON & WILLIAMS Occupation (for Individual) PARTNER
 Receipt For: Primary General Other (specify) Aggregate Year-to-Date 20.78

Date of Receipt 10 / 25 / 2016
Transaction ID : SA11A.462140
 Amount of Each Receipt this Period 9.21
 Memo Item CONTRIBUTION
 PARTNERSHIP ATTRIBUTION

B. SIMPSON, AARON, P., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2200 PENNSYLVANIA AVE NW
 City WASHINGTON State DC Zip Code 20037-1709
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) HUNTON & WILLIAMS Occupation (for Individual) PARTNER
 Receipt For: Primary General Other (specify) Aggregate Year-to-Date 20.78

Date of Receipt 10 / 25 / 2016
Transaction ID : SA11A.462141
 Amount of Each Receipt this Period 9.21
 Memo Item CONTRIBUTION
 PARTNERSHIP ATTRIBUTION

C. SIRGADO, JO ANNE, E., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2200 PENNSYLVANIA AVE NW
 City WASHINGTON State DC Zip Code 20037-1709
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) HUNTON & WILLIAMS Occupation (for Individual) PARTNER
 Receipt For: Primary General Other (specify) Aggregate Year-to-Date 20.78

Date of Receipt 10 / 25 / 2016
Transaction ID : SA11A.462142
 Amount of Each Receipt this Period 9.21
 Memo Item CONTRIBUTION
 PARTNERSHIP ATTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... 0.00
TOTAL This Period (last page this line number only).....

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 4201 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
Team Ryan

A. SKINNER, LAURENCE, E., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2200 PENNSYLVANIA AVE NW
 City WASHINGTON State DC Zip Code 20037-1709
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) HUNTON & WILLIAMS Occupation (for Individual) PARTNER
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date **20.78**

Date of Receipt **10 / 25 / 2016**
Transaction ID : SA11A.462143
 Amount of Each Receipt this Period **9.21**
 Memo Item CONTRIBUTION
 PARTNERSHIP ATTRIBUTION

B. SMITH, CARYL, G., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2200 PENNSYLVANIA AVE NW
 City WASHINGTON State DC Zip Code 20037-1709
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) HUNTON & WILLIAMS Occupation (for Individual) PARTNER
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date **20.78**

Date of Receipt **10 / 25 / 2016**
Transaction ID : SA11A.462144
 Amount of Each Receipt this Period **9.21**
 Memo Item CONTRIBUTION
 PARTNERSHIP ATTRIBUTION

C. SMITH, JOHN, R., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2200 PENNSYLVANIA AVE NW
 City WASHINGTON State DC Zip Code 20037-1709
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) HUNTON & WILLIAMS Occupation (for Individual) PARTNER
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date **20.78**

Date of Receipt **10 / 25 / 2016**
Transaction ID : SA11A.462145
 Amount of Each Receipt this Period **9.21**
 Memo Item CONTRIBUTION
 PARTNERSHIP ATTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	0.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 4202 OF 4311
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. SMITH, ROBERT, K., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2200 PENNSYLVANIA AVE NW
 City WASHINGTON State DC Zip Code 20037-1709
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) HUNTON & WILLIAMS Occupation (for Individual) PARTNER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 20.78

Date of Receipt 10 / 25 / 2016
Transaction ID : SA11A.462146
 Amount of Each Receipt this Period 9.21
 Memo Item CONTRIBUTION
 PARTNERSHIP ATTRIBUTION

B. SOTTO, LISA, J., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2200 PENNSYLVANIA AVE NW
 City WASHINGTON State DC Zip Code 20037-1709
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) HUNTON & WILLIAMS Occupation (for Individual) PARTNER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 20.78

Date of Receipt 10 / 25 / 2016
Transaction ID : SA11A.462147
 Amount of Each Receipt this Period 9.21
 Memo Item CONTRIBUTION
 PARTNERSHIP ATTRIBUTION

C. STANKO, JOSEPH, C., , JR.
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2200 PENNSYLVANIA AVE NW
 City WASHINGTON State DC Zip Code 20037-1709
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) HUNTON & WILLIAMS Occupation (for Individual) PARTNER
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 20.78

Date of Receipt 10 / 25 / 2016
Transaction ID : SA11A.462148
 Amount of Each Receipt this Period 9.21
 Memo Item CONTRIBUTION
 PARTNERSHIP ATTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 0.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 4203 OF 4311
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
Team Ryan

A. STENERSON, TODD, M., ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 2200 PENNSYLVANIA AVE NW

City WASHINGTON	State DC	Zip Code 20037-1709
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) HUNTON & WILLIAMS	Occupation (for Individual) PARTNER
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Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
20.78

Date of Receipt
10 / 25 / 2016
Transaction ID : SA11A.462149

Amount of Each Receipt this Period
9.21

Memo Item CONTRIBUTION

PARTNERSHIP ATTRIBUTION

B. STILLMAN, GREG, N., ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 2200 PENNSYLVANIA AVE NW

City WASHINGTON	State DC	Zip Code 20037-1709
--------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) HUNTON & WILLIAMS	Occupation (for Individual) PARTNER
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
20.78

Date of Receipt
10 / 25 / 2016
Transaction ID : SA11A.462150

Amount of Each Receipt this Period
9.21

Memo Item CONTRIBUTION

PARTNERSHIP ATTRIBUTION

C. TANENBAUM, BRIAN, J., ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 2200 PENNSYLVANIA AVE NW

City WASHINGTON	State DC	Zip Code 20037-1709
--------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) HUNTON & WILLIAMS	Occupation (for Individual) PARTNER
--	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
20.78

Date of Receipt
10 / 25 / 2016
Transaction ID : SA11A.462151

Amount of Each Receipt this Period
9.21

Memo Item CONTRIBUTION

PARTNERSHIP ATTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	0.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 4204 OF 4311
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
Team Ryan

A. TAPSCOTT, ANDREW, J., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2200 PENNSYLVANIA AVE NW
 City WASHINGTON State DC Zip Code 20037-1709
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) HUNTON & WILLIAMS Occupation (for Individual) PARTNER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 20.78

Date of Receipt 10 / 25 / 2016
Transaction ID : SA11A.462152
 Amount of Each Receipt this Period 9.21
 Memo Item CONTRIBUTION
 PARTNERSHIP ATTRIBUTION

B. TATA, ROBERT, M., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2200 PENNSYLVANIA AVE NW
 City WASHINGTON State DC Zip Code 20037-1709
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) HUNTON & WILLIAMS Occupation (for Individual) PARTNER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 20.78

Date of Receipt 10 / 25 / 2016
Transaction ID : SA11A.462153
 Amount of Each Receipt this Period 9.21
 Memo Item CONTRIBUTION
 PARTNERSHIP ATTRIBUTION

C. TAYLOR, ERIC, J., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2200 PENNSYLVANIA AVE NW
 City WASHINGTON State DC Zip Code 20037-1709
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) HUNTON & WILLIAMS Occupation (for Individual) PARTNER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 20.78

Date of Receipt 10 / 25 / 2016
Transaction ID : SA11A.462154
 Amount of Each Receipt this Period 9.21
 Memo Item CONTRIBUTION
 PARTNERSHIP ATTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	0.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 4205 OF 4311
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. TAYLOR, WENDELL, L., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2200 PENNSYLVANIA AVE NW
 City WASHINGTON State DC Zip Code 20037-1709
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) HUNTON & WILLIAMS Occupation (for Individual) PARTNER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 20.78

Date of Receipt 10 / 25 / 2016
Transaction ID : SA11A.462155
 Amount of Each Receipt this Period 9.21
 Memo Item CONTRIBUTION
 PARTNERSHIP ATTRIBUTION

B. TAYLOR, WILLIAM, L., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2200 PENNSYLVANIA AVE NW
 City WASHINGTON State DC Zip Code 20037-1709
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) HUNTON & WILLIAMS Occupation (for Individual) PARTNER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 20.78

Date of Receipt 10 / 25 / 2016
Transaction ID : SA11A.462156
 Amount of Each Receipt this Period 9.21
 Memo Item CONTRIBUTION
 PARTNERSHIP ATTRIBUTION

C. THOMPSON, GARY, E., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2200 PENNSYLVANIA AVE NW
 City WASHINGTON State DC Zip Code 20037-1709
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) HUNTON & WILLIAMS Occupation (for Individual) PARTNER
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 20.78

Date of Receipt 10 / 25 / 2016
Transaction ID : SA11A.462157
 Amount of Each Receipt this Period 9.21
 Memo Item CONTRIBUTION
 PARTNERSHIP ATTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 0.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 4206 OF 4311
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. TOLLEY, B, C., , III
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 2200 PENNSYLVANIA AVE NW

City WASHINGTON	State DC	Zip Code 20037-1709
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) HUNTON & WILLIAMS	Occupation (for Individual) PARTNER
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
20.78

Date of Receipt
10 / 25 / 2016
Transaction ID : SA11A.462158

Amount of Each Receipt this Period
9.21

Memo Item CONTRIBUTION

PARTNERSHIP ATTRIBUTION

B. TURNER, ANDREW, J., ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 2200 PENNSYLVANIA AVE NW

City WASHINGTON	State DC	Zip Code 20037-1709
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) HUNTON & WILLIAMS	Occupation (for Individual) PARTNER
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
20.78

Date of Receipt
10 / 25 / 2016
Transaction ID : SA11A.462159

Amount of Each Receipt this Period
9.21

Memo Item CONTRIBUTION

PARTNERSHIP ATTRIBUTION

C. VIVARELLI, DANIEL, G., , JR.
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 2200 PENNSYLVANIA AVE NW

City WASHINGTON	State DC	Zip Code 20037-1709
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) HUNTON & WILLIAMS	Occupation (for Individual) PARTNER
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Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
20.78

Date of Receipt
10 / 25 / 2016
Transaction ID : SA11A.462160

Amount of Each Receipt this Period
9.21

Memo Item CONTRIBUTION

PARTNERSHIP ATTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	0.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 4207 OF 4311
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. VOWELL, MARK, R., ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 2200 PENNSYLVANIA AVE NW

City WASHINGTON	State DC	Zip Code 20037-1709
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) HUNTON & WILLIAMS	Occupation (for Individual) PARTNER
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
20.78

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		25		2016

Transaction ID : SA11A.462161

Amount of Each Receipt this Period
9.21

Memo Item CONTRIBUTION

PARTNERSHIP ATTRIBUTION

B. WAIT, AMANDA, L., ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 2200 PENNSYLVANIA AVE NW

City WASHINGTON	State DC	Zip Code 20037-1709
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) HUNTON & WILLIAMS	Occupation (for Individual) PARTNER
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
20.78

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		25		2016

Transaction ID : SA11A.462162

Amount of Each Receipt this Period
9.21

Memo Item CONTRIBUTION

PARTNERSHIP ATTRIBUTION

C. WARREN, RICHARD, L., ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 2200 PENNSYLVANIA AVE NW

City WASHINGTON	State DC	Zip Code 20037-1709
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) HUNTON & WILLIAMS	Occupation (for Individual) PARTNER
--	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
20.78

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		25		2016

Transaction ID : SA11A.462163

Amount of Each Receipt this Period
9.21

Memo Item CONTRIBUTION

PARTNERSHIP ATTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	0.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 4208 OF 4311
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. WEHRUM, WILLIAM, L., ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 2200 PENNSYLVANIA AVE NW

City WASHINGTON	State DC	Zip Code 20037-1709
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) HUNTON & WILLIAMS	Occupation (for Individual) PARTNER
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
20.78

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		25		2016

Transaction ID : SA11A.462164

Amount of Each Receipt this Period

9.21

Memo Item CONTRIBUTION

PARTNERSHIP ATTRIBUTION

B. WEINSTOCK, PETER, G., ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 2200 PENNSYLVANIA AVE NW

City WASHINGTON	State DC	Zip Code 20037-1709
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) HUNTON & WILLIAMS	Occupation (for Individual) PARTNER
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
20.78

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		25		2016

Transaction ID : SA11A.462165

Amount of Each Receipt this Period

9.21

Memo Item CONTRIBUTION

PARTNERSHIP ATTRIBUTION

C. WEISBLATT, ERIC, H., ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 2200 PENNSYLVANIA AVE NW

City WASHINGTON	State DC	Zip Code 20037-1709
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) HUNTON & WILLIAMS	Occupation (for Individual) PARTNER
--	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
20.78

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		25		2016

Transaction ID : SA11A.462166

Amount of Each Receipt this Period

9.21

Memo Item CONTRIBUTION

PARTNERSHIP ATTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	0.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 4209 OF 4311
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. WEISS, MALCOLM, C., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2200 PENNSYLVANIA AVE NW
 City WASHINGTON State DC Zip Code 20037-1709
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) HUNTON & WILLIAMS Occupation (for Individual) PARTNER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 20.78

Date of Receipt 10 / 25 / 2016
Transaction ID : SA11A.462167
 Amount of Each Receipt this Period 9.21
 Memo Item CONTRIBUTION
 PARTNERSHIP ATTRIBUTION

B. WILLIAMS, AMY, M., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2200 PENNSYLVANIA AVE NW
 City WASHINGTON State DC Zip Code 20037-1709
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) HUNTON & WILLIAMS Occupation (for Individual) PARTNER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 20.78

Date of Receipt 10 / 25 / 2016
Transaction ID : SA11A.462168
 Amount of Each Receipt this Period 9.21
 Memo Item CONTRIBUTION
 PARTNERSHIP ATTRIBUTION

C. WILLIAMS, EVAN, C., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2200 PENNSYLVANIA AVE NW
 City WASHINGTON State DC Zip Code 20037-1709
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) HUNTON & WILLIAMS Occupation (for Individual) PARTNER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 20.78

Date of Receipt 10 / 25 / 2016
Transaction ID : SA11A.462169
 Amount of Each Receipt this Period 9.21
 Memo Item CONTRIBUTION
 PARTNERSHIP ATTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 0.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 4210 OF 4311
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. WILLIAMSON, HOLLY, H., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2200 PENNSYLVANIA AVE NW
 City WASHINGTON State DC Zip Code 20037-1709
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) HUNTON & WILLIAMS Occupation (for Individual) PARTNER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 20.78

Date of Receipt 10 / 25 / 2016
Transaction ID : SA11A.462170
 Amount of Each Receipt this Period 9.21
 Memo Item CONTRIBUTION
 PARTNERSHIP ATTRIBUTION

B. WILTSIE, SUSAN, F., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2200 PENNSYLVANIA AVE NW
 City WASHINGTON State DC Zip Code 20037-1709
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) HUNTON & WILLIAMS Occupation (for Individual) PARTNER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 20.78

Date of Receipt 10 / 25 / 2016
Transaction ID : SA11A.462171
 Amount of Each Receipt this Period 9.21
 Memo Item CONTRIBUTION
 PARTNERSHIP ATTRIBUTION

C. WOOD, ALLISON, D., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2200 PENNSYLVANIA AVE NW
 City WASHINGTON State DC Zip Code 20037-1709
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) HUNTON & WILLIAMS Occupation (for Individual) PARTNER
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 20.78

Date of Receipt 10 / 25 / 2016
Transaction ID : SA11A.462172
 Amount of Each Receipt this Period 9.21
 Memo Item CONTRIBUTION
 PARTNERSHIP ATTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 0.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 4211 OF 4311
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. WYATT, RICHARD, L., , JR.
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 2200 PENNSYLVANIA AVE NW

City WASHINGTON	State DC	Zip Code 20037-1709
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) HUNTON & WILLIAMS	Occupation (for Individual) PARTNER
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
20.78

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		25		2016

Transaction ID : SA11A.462173

Amount of Each Receipt this Period

20.78

Memo Item
CONTRIBUTION

PARTNERSHIP ATTRIBUTION

B. JAMES CARLOW RANCH
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 617 PR 21493

City NEW BOSTON	State TX	Zip Code 75570-
--------------------	-------------	--------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual)	Occupation (for Individual)
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Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
2000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		25		2016

Transaction ID : SA11A.445029

Amount of Each Receipt this Period

2000.00

Memo Item
CONTRIBUTION

SEE ATTRIBUTION BELOW

C. CARLOW, JAMES, M., MR.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 617 PR 21493

City NEW BOSTON	State TX	Zip Code 75570-
--------------------	-------------	--------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) JAMES CARLOW RANCH	Occupation (for Individual) RANCHER
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
2000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		25		2016

Transaction ID : SA11A.454999

Amount of Each Receipt this Period

2000.00

Memo Item
CONTRIBUTION

PARTNERSHIP ATTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	2000.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 4212 OF 4311
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. NAVAB OPERATING LLC
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 730 5TH AVE FL 8
 City NEW YORK State NY Zip Code 10019-4105
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Occupation (for Individual)
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 50000.00

Date of Receipt 10 / 25 / 2016
Transaction ID : SA11A.445008
 Amount of Each Receipt this Period 50000.00
 Memo Item
CONTRIBUTION
 SEE ATTRIBUTION BELOW

B. NAVAB, ALEXANDER, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 9 W 57TH ST STE 4200
 City NEW YORK State NY Zip Code 10019-2707
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Occupation (for Individual) KKR MEMBER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 100000.00

Date of Receipt 10 / 25 / 2016
Transaction ID : SA11A.468304
 Amount of Each Receipt this Period 50000.00
 Memo Item
CONTRIBUTION
 PARTNERSHIP ATTRIBUTION

C. OPTIMUS RECRUITING LLC
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 6330 LUPTON DR
 City DALLAS State TX Zip Code 75225-2119
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Occupation (for Individual)
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 10 / 25 / 2016
Transaction ID : SA11A.445030
 Amount of Each Receipt this Period 500.00
 Memo Item
CONTRIBUTION
 SEE ATTRIBUTION BELOW

SUBTOTAL of Receipts This Page (optional).....	50500.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 4213 OF 4311
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. HANRAHAN, KEVIN, R., MR.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 6330 LUPTON DR

City DALLAS	State TX	Zip Code 75225-2119
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) OPTIMUS RECRUITING, LLC	Occupation (for Individual) PRESIDENT
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		25		2016

Transaction ID : SA11A.454822

Amount of Each Receipt this Period
500.00

Memo Item
CONTRIBUTION

PARTNERSHIP ATTRIBUTION

B. PRATT AND ASSOCIATES PARTNERSHIP
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 302 LAFAYETTE DRIVE

City VICKSBURG	State MS	Zip Code 39180-4567
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual)	Occupation (for Individual)
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Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		27		2016

Transaction ID : SA11A.452433

Amount of Each Receipt this Period
500.00

Memo Item
CONTRIBUTION

PENDING VERIFICATION AS FEDERALLY PERMISSIBLE FUNDS

C. RAETHER OPERATING LLC
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 730 5TH AVE 8TH FL

City NEW YORK	State NY	Zip Code 10019-4105
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual)	Occupation (for Individual)
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Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
25000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		26		2016

Transaction ID : SA11A.445556

Amount of Each Receipt this Period
25000.00

Memo Item
CONTRIBUTION

SEE ATTRIBUTION BELOW

SUBTOTAL of Receipts This Page (optional).....	25500.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 4214 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. RAETHER, PAUL, E., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 730 5TH AVE 8TH FL
 City NEW YORK State NY Zip Code 10019-4105
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) KKR FINANCIAL SERVICES Occupation (for Individual) FINANCE
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date 25000.00

Date of Receipt 10 / 26 / 2016
Transaction ID : SA11A.465155
 Amount of Each Receipt this Period 25000.00
 Memo Item CONTRIBUTION
 PARTNERSHIP ATTRIBUTION

B. WILEY REIN LLP
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1776 K ST NW
 City WASHINGTON State DC Zip Code 20006-2304
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Occupation (for Individual)
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date 33400.00

Date of Receipt 11 / 18 / 2016
Transaction ID : SA11A.480988
 Amount of Each Receipt this Period 33400.00
 Memo Item CONTRIBUTION
 SEE ATTRIBUTION BELOW

C. ALLEN, RAND, , MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1776 K STREET NW
 City WASHINGTON State DC Zip Code 20006-2304
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) WILEY REIN LLP Occupation (for Individual) PARTNER
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date 1000.00

Date of Receipt 11 / 18 / 2016
Transaction ID : SA11A.481063
 Amount of Each Receipt this Period 1000.00
 Memo Item CONTRIBUTION
 PARTNERSHIP ATTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	33400.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 4215 OF 4311 (check only one)
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NAME OF COMMITTEE (In Full)
Team Ryan

A. BARNES, ATTISON, , MR., III
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1790 K ST NW
 City WASHINGTON State DC Zip Code 20006-
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Occupation (for Individual)
 WILEY REIN LLP PARTNER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1350.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 11 / 18 / 2016
Transaction ID : SA11A.481077
 Amount of Each Receipt this Period
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 Memo Item
 CONTRIBUTION
 PARTNERSHIP ATTRIBUTION

B. BODORFF, RICHARD, J., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1777 K ST NW
 City WASHINGTON State DC Zip Code 20006-
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Occupation (for Individual)
 WILEY REIN LLP PARTNER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 6000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 11 / 18 / 2016
Transaction ID : SA11A.481064
 Amount of Each Receipt this Period
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 Memo Item
 CONTRIBUTION
 PARTNERSHIP ATTRIBUTION

C. CACCIA, RALPH, , MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1791 K ST NW
 City WASHINGTON State DC Zip Code 20006-
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Occupation (for Individual)
 WILEY REIN LLP PARTNER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1350.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 11 / 18 / 2016
Transaction ID : SA11A.481078
 Amount of Each Receipt this Period
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 Memo Item
 CONTRIBUTION
 PARTNERSHIP ATTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	0.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 4216 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. CRONIC, JASON, , MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1776 K STREET NW
 City WASHINGTON State DC Zip Code 20006-2304
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) WILEY REIN LLP Occupation (for Individual) PARTNER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1450.00

Date of Receipt 11 / 18 / 2016
Transaction ID : SA11A.481065
 Amount of Each Receipt this Period 1450.00
 Memo Item CONTRIBUTION
 PARTNERSHIP ATTRIBUTION

B. EVANS, CLAIRE, , MS.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1792 K ST NW
 City WASHINGTON State DC Zip Code 20006-
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) WILEY REIN LLP Occupation (for Individual) PARTNER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1100.00

Date of Receipt 11 / 18 / 2016
Transaction ID : SA11A.481079
 Amount of Each Receipt this Period 1100.00
 Memo Item CONTRIBUTION
 PARTNERSHIP ATTRIBUTION

C. GROSS, DAVID, , MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1776 K STREET NW
 City WASHINGTON State DC Zip Code 20006-2304
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) WILEY REIN LLP Occupation (for Individual) PARTNER
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt 11 / 18 / 2016
Transaction ID : SA11A.481066
 Amount of Each Receipt this Period 1000.00
 Memo Item CONTRIBUTION
 PARTNERSHIP ATTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 0.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 4217 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. HASSETT, DANIEL, , MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1788 K ST NW
 City WASHINGTON State DC Zip Code 20006-
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) WILEY REIN LLP Occupation (for Individual) PARTNER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 11 / 18 / 2016
Transaction ID : SA11A.481075
 Amount of Each Receipt this Period 500.00
 Memo Item CONTRIBUTION
 PARTNERSHIP ATTRIBUTION

B. HINDIN, JENNIFER, , MS.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1793 K ST NW
 City WASHINGTON State DC Zip Code 20006-
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) WILEY REIN LLP Occupation (for Individual) PARTNER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1400.00

Date of Receipt 11 / 18 / 2016
Transaction ID : SA11A.481080
 Amount of Each Receipt this Period 1400.00
 Memo Item CONTRIBUTION
 PARTNERSHIP ATTRIBUTION

C. HUTHER, CHRISTOPHER, , MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1780 K ST NW
 City WASHINGTON State DC Zip Code 20006-
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) WILEY REIN LLP Occupation (for Individual) PARTNER
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 1400.00

Date of Receipt 11 / 18 / 2016
Transaction ID : SA11A.481067
 Amount of Each Receipt this Period 1400.00
 Memo Item CONTRIBUTION
 PARTNERSHIP ATTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 0.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 4218 OF 4311
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NAME OF COMMITTEE (In Full)
Team Ryan

A. KELLY, CHRISTOPHER, , MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1794 K ST NW
 City WASHINGTON State DC Zip Code 20006-
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) WILEY REIN LLP Occupation (for Individual) PARTNER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1400.00

Date of Receipt 11 / 18 / 2016
Transaction ID : SA11A.481081
 Amount of Each Receipt this Period 1400.00
 Memo Item CONTRIBUTION
 PARTNERSHIP ATTRIBUTION

B. KIRBY, KATHLEEN, , MS.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1781 K ST NW
 City WASHINGTON State DC Zip Code 20006-
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) WILEY REIN LLP Occupation (for Individual) PARTNER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1300.00

Date of Receipt 11 / 18 / 2016
Transaction ID : SA11A.481068
 Amount of Each Receipt this Period 1300.00
 Memo Item CONTRIBUTION
 PARTNERSHIP ATTRIBUTION

C. LAHAM, CAROL, , MS.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1795 K ST NW
 City WASHINGTON State DC Zip Code 20006-
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) WILEY REIN LLP Occupation (for Individual) PARTNER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 2100.00

Date of Receipt 11 / 18 / 2016
Transaction ID : SA11A.481082
 Amount of Each Receipt this Period 2100.00
 Memo Item CONTRIBUTION
 PARTNERSHIP ATTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	0.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 4219 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. MAYNARD, KEVIN, , MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1782 K ST NW
 City WASHINGTON State DC Zip Code 20006-
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) WILEY REIN LLP Occupation (for Individual) PARTNER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1300.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 11 / 18 / 2016
Transaction ID : SA11A.481069
 Amount of Each Receipt this Period
 1300.00
 Memo Item CONTRIBUTION
 PARTNERSHIP ATTRIBUTION

B. MCBRIDE, ANDREW, , MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1776 K ST NW
 City WASHINGTON State DC Zip Code 20006-2304
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) WILEY REIN LLP Occupation (for Individual) PARTNER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1500.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 11 / 18 / 2016
Transaction ID : SA11A.481083
 Amount of Each Receipt this Period
 1500.00
 Memo Item CONTRIBUTION
 PARTNERSHIP ATTRIBUTION

C. MCCALED, SCOTT, , MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1776 K ST NW
 City WASHINGTON State DC Zip Code 20006-2304
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) WILEY REIN LLP Occupation (for Individual) PARTNER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 11 / 18 / 2016
Transaction ID : SA11A.481070
 Amount of Each Receipt this Period
 1000.00
 Memo Item CONTRIBUTION
 PARTNERSHIP ATTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	0.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 4220 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. MELVIN, KIMBERLY, , MS.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1797 K ST NW
 City WASHINGTON State DC Zip Code 20006-
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Occupation (for Individual)
 WILEY REIN LLP PARTNER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1700.00

Date of Receipt
 11 / 18 / 2016
Transaction ID : SA11A.481084
 Amount of Each Receipt this Period
 1700.00
 Memo Item CONTRIBUTION
 PARTNERSHIP ATTRIBUTION

B. NAVIN, THOMAS, , MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1784 K ST NW
 City WASHINGTON State DC Zip Code 20006-
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Occupation (for Individual)
 WILEY REIN LLP PARTNER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt
 11 / 18 / 2016
Transaction ID : SA11A.481071
 Amount of Each Receipt this Period
 1000.00
 Memo Item CONTRIBUTION
 PARTNERSHIP ATTRIBUTION

C. PICKARD, DANIEL, , MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1798 K ST NW
 City WASHINGTON State DC Zip Code 20006-
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Occupation (for Individual)
 WILEY REIN LLP PARTNER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1450.00

Date of Receipt
 11 / 18 / 2016
Transaction ID : SA11A.481085
 Amount of Each Receipt this Period
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 Memo Item CONTRIBUTION
 PARTNERSHIP ATTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	0.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 4221 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. REIN, BERT, , MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1776 K ST NW
 City WASHINGTON State DC Zip Code 20006-2304
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) WILEY REIN LLP Occupation (for Individual) PARTNER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt 11 / 18 / 2016
Transaction ID : SA11A.481072
 Amount of Each Receipt this Period 1000.00
 Memo Item CONTRIBUTION
 PARTNERSHIP ATTRIBUTION

B. RENAUD, D., MARK, MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1799 K ST NW
 City WASHINGTON State DC Zip Code 20006-
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) WILEY REIN LLP Occupation (for Individual) PARTNER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1550.00

Date of Receipt 11 / 18 / 2016
Transaction ID : SA11A.481086
 Amount of Each Receipt this Period 1550.00
 Memo Item CONTRIBUTION
 PARTNERSHIP ATTRIBUTION

C. RINDNER, MARC, , MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1789 K ST NW
 City WASHINGTON State DC Zip Code 20006-
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) WILEY REIN LLP Occupation (for Individual) PARTNER
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 600.00

Date of Receipt 11 / 18 / 2016
Transaction ID : SA11A.481076
 Amount of Each Receipt this Period 600.00
 Memo Item CONTRIBUTION
 PARTNERSHIP ATTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 0.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 4222 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. ROBERTS, WILLIAM, , MR., III
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1776 K ST NW
 City WASHINGTON State DC Zip Code 20006-2304
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) WILEY REIN LLP Occupation (for Individual) PARTNER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt 11 / 18 / 2016
Transaction ID : SA11A.481073
 Amount of Each Receipt this Period 1000.00
 Memo Item CONTRIBUTION
 PARTNERSHIP ATTRIBUTION

B. ROSS, BENNETT, , MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1800 K ST NW
 City WASHINGTON State DC Zip Code 20006-2202
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) WILEY REIN LLP Occupation (for Individual) PARTNER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 2000.00

Date of Receipt 11 / 18 / 2016
Transaction ID : SA11A.481087
 Amount of Each Receipt this Period 2000.00
 Memo Item CONTRIBUTION
 PARTNERSHIP ATTRIBUTION

C. SETH, NEAL, , MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1802 K ST NW
 City WASHINGTON State DC Zip Code 20006-
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) WILEY REIN LLP Occupation (for Individual) PARTNER
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 700.00

Date of Receipt 11 / 18 / 2016
Transaction ID : SA11A.481089
 Amount of Each Receipt this Period 700.00
 Memo Item CONTRIBUTION
 PARTNERSHIP ATTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 0.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 4223 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
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NAME OF COMMITTEE (In Full)
Team Ryan

A. SMITH, RICHARD, , MR.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1787 K ST NW

City WASHINGTON	State DC	Zip Code 20006-
--------------------	-------------	--------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) WILEY REIN LLP	Occupation (for Individual) PARTNER
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Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1200.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
11		18		2016

Transaction ID : SA11A.481074

Amount of Each Receipt this Period
1200.00

Memo Item
CONTRIBUTION

PARTNERSHIP ATTRIBUTION

B. TONER, MICHAEL, , MR.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1801 K ST NW

City WASHINGTON	State DC	Zip Code 20006-1301
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) WILEY REIN LLP	Occupation (for Individual) PARTNER
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Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1050.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
11		18		2016

Transaction ID : SA11A.481088

Amount of Each Receipt this Period
1050.00

Memo Item
CONTRIBUTION

PARTNERSHIP ATTRIBUTION

C. INTERNATIONAL UNION OF OPERATING ENGINEERS LOCAL 139 FEDERAL
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address PO BOX 130

City PEWAUKEE	State WI	Zip Code 53072-0130
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FEC ID number of contributing federal political committee. **C** C00423731

Name of Employer (for Individual)	Occupation (for Individual)
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Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
6750.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
11		08		2016

Transaction ID : SA11C.468132

Amount of Each Receipt this Period
1750.00

Memo Item
CONTRIBUTION

SEE ATTRIBUTION BELOW

SUBTOTAL of Receipts This Page (optional).....	0.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 4224 OF 4311
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	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. BAUER, RYAN, , MR.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address N340-760TH ST

City DURAND	State WI	Zip Code 54736-5117
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) INFORMATION REQUESTED PER BEST EFFORTS	Occupation (for Individual) INFORMATION REQUESTED PER BE
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Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
40.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
11		08		2016

Transaction ID : SA11A.468362

Amount of Each Receipt this Period
40.00

Memo Item
CONTRIBUTION

EARMARKED FROM INTERNATIONAL UNION OF OPERATING ENGINEERS LOCAL

B. BERWEGER, GLEN, , MR.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 66725 SPIDER LAKE RD

City IRON RIVER	State WI	Zip Code 54847-4597
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) INFORMATION REQUESTED PER BEST EFFORTS	Occupation (for Individual) INFORMATION REQUESTED PER BE
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Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
10.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
11		08		2016

Transaction ID : SA11A.468308

Amount of Each Receipt this Period
10.00

Memo Item
CONTRIBUTION

EARMARKED FROM INTERNATIONAL UNION OF OPERATING ENGINEERS LOCAL

C. BRENEMAN, JOHN, L., MR.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address S4600 BASS WOOD LANE

City REEDSBURG	State WI	Zip Code 53959-9273
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) INFORMATION REQUESTED PER BEST EFFORTS	Occupation (for Individual) INFORMATION REQUESTED PER BE
---	---

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
40.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
11		08		2016

Transaction ID : SA11A.468333

Amount of Each Receipt this Period
20.00

Memo Item
CONTRIBUTION

EARMARKED FROM INTERNATIONAL UNION OF OPERATING ENGINEERS LOCAL

SUBTOTAL of Receipts This Page (optional).....	70.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 4225 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. BRENEMAN, JOHN, L., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address S4600 BASS WOOD LANE
 City REEDSBURG State WI Zip Code 53959-9273
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Occupation (for Individual)
 INFORMATION REQUESTED PER BEST EFFORTS INFORMATION REQUESTED PER BE
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 40.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 08 / 2016
Transaction ID : SA11A.468380
 Amount of Each Receipt this Period 20.00
 Memo Item CONTRIBUTION
 EARMARKED FROM INTERNATIONAL UNION OF OPERATING ENGINEERS LOCAL

B. BURT, ALLEN, J., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3101 CAMERON ST
 City EAU CLAIRE State WI Zip Code 54703-4815
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Occupation (for Individual)
 INFORMATION REQUESTED PER BEST EFFORTS INFORMATION REQUESTED PER BE
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 40.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 08 / 2016
Transaction ID : SA11A.468310
 Amount of Each Receipt this Period 20.00
 Memo Item CONTRIBUTION
 EARMARKED FROM INTERNATIONAL UNION OF OPERATING ENGINEERS LOCAL

C. BURT, ALLEN, J., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3101 CAMERON ST
 City EAU CLAIRE State WI Zip Code 54703-4815
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Occupation (for Individual)
 INFORMATION REQUESTED PER BEST EFFORTS INFORMATION REQUESTED PER BE
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 40.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 08 / 2016
Transaction ID : SA11A.468311
 Amount of Each Receipt this Period 20.00
 Memo Item CONTRIBUTION
 EARMARKED FROM INTERNATIONAL UNION OF OPERATING ENGINEERS LOCAL

SUBTOTAL of Receipts This Page (optional).....	60.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 4226 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. DAANEN, PETER, , MR.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 3165 BARLEY CIRCLE

City GREEN BAY	State WI	Zip Code 54311-5063
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) INFORMATION REQUESTED PER BEST EFFORTS	Occupation (for Individual) INFORMATION REQUESTED PER BE
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Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
20.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11		08		2016

Transaction ID : SA11A.468312

Amount of Each Receipt this Period
20.00

Memo Item
CONTRIBUTION

EARMARKED FROM INTERNATIONAL UNION OF OPERATING ENGINEERS LOCAL

B. EILERTSON, DEREK, B., MR.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address N8804 HWY C

City ELDORADO	State WI	Zip Code 54932-9618
------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) INFORMATION REQUESTED PER BEST EFFORTS	Occupation (for Individual) INFORMATION REQUESTED PER BE
---	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
60.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11		08		2016

Transaction ID : SA11A.468350

Amount of Each Receipt this Period
20.00

Memo Item
CONTRIBUTION

EARMARKED FROM INTERNATIONAL UNION OF OPERATING ENGINEERS LOCAL

C. EILERTSON, DEREK, B., MR.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address N8804 HWY C

City ELDORADO	State WI	Zip Code 54932-9618
------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) INFORMATION REQUESTED PER BEST EFFORTS	Occupation (for Individual) INFORMATION REQUESTED PER BE
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Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
60.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11		08		2016

Transaction ID : SA11A.468351

Amount of Each Receipt this Period
20.00

Memo Item
CONTRIBUTION

EARMARKED FROM INTERNATIONAL UNION OF OPERATING ENGINEERS LOCAL

SUBTOTAL of Receipts This Page (optional).....	60.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 4227 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
Team Ryan

A. EILERTSON, DEREK, B., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address N8804 HWY C

City ELDORADO	State WI	Zip Code 54932-9618
------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) INFORMATION REQUESTED PER BEST EFFORTS	Occupation (for Individual) INFORMATION REQUESTED PER BE
---	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
60.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 08 / 2016
Transaction ID : SA11A.468370

Amount of Each Receipt this Period
20.00

Memo Item
CONTRIBUTION

EARMARKED FROM INTERNATIONAL UNION OF OPERATING ENGINEERS LOCAL

B. EILERS, ROBERT, A., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 19810 WASHINGTON AVE

City UNION GROVE	State WI	Zip Code 53182-9317
---------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) INFORMATION REQUESTED PER BEST EFFORTS	Occupation (for Individual) INFORMATION REQUESTED PER BE
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Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
20.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 08 / 2016
Transaction ID : SA11A.468313

Amount of Each Receipt this Period
20.00

Memo Item
CONTRIBUTION

EARMARKED FROM INTERNATIONAL UNION OF OPERATING ENGINEERS LOCAL

C. FRELICH, ROB, , MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 722 BROOKRIDGE ST

City GREEN BAY	State WI	Zip Code 54301-2032
-------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) INFORMATION REQUESTED PER BEST EFFORTS	Occupation (for Individual) INFORMATION REQUESTED PER BE
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Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
20.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 08 / 2016
Transaction ID : SA11A.468314

Amount of Each Receipt this Period
20.00

Memo Item
CONTRIBUTION

EARMARKED FROM INTERNATIONAL UNION OF OPERATING ENGINEERS LOCAL

SUBTOTAL of Receipts This Page (optional).....	60.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 4228 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
Team Ryan

A. FRIEMOTH, KENNETH, , MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address N2161 MERIDIAN AVE
 City GRANTON State WI Zip Code 54436-8113
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Occupation (for Individual)
 INFORMATION REQUESTED PER BEST EFFORTS INFORMATION REQUESTED PER BE
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 20.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 08 / 2016
Transaction ID : SA11A.468334
 Amount of Each Receipt this Period
 20.00
 Memo Item
 CONTRIBUTION
 EARMARKED FROM INTERNATIONAL UNION OF OPERATING ENGINEERS LOCAL

B. GEBHARD, WES, , MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 420 S ROCHESTER ST #20
 City MUKWONAGO State WI Zip Code 53149-1633
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Occupation (for Individual)
 INFORMATION REQUESTED PER BEST EFFORTS INFORMATION REQUESTED PER BE
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 20.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 08 / 2016
Transaction ID : SA11A.468315
 Amount of Each Receipt this Period
 20.00
 Memo Item
 CONTRIBUTION
 EARMARKED FROM INTERNATIONAL UNION OF OPERATING ENGINEERS LOCAL

C. GRUNING, NICK, , MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 113 SHEPARD CT
 City MUKWONAGO State WI Zip Code 53149-1723
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Occupation (for Individual)
 INFORMATION REQUESTED PER BEST EFFORTS INFORMATION REQUESTED PER BE
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 20.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 08 / 2016
Transaction ID : SA11A.468371
 Amount of Each Receipt this Period
 20.00
 Memo Item
 CONTRIBUTION
 EARMARKED FROM INTERNATIONAL UNION OF OPERATING ENGINEERS LOCAL

SUBTOTAL of Receipts This Page (optional).....	60.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 4229 OF 4311
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. HALADA, STEWART, , MR.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address W5251 TIPPECANOE TRAIL

City ELKHORN	State WI	Zip Code 53121-3519
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) INFORMATION REQUESTED PER BEST EFFORTS	Occupation (for Individual) INFORMATION REQUESTED PER BE
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Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
10.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11		08		2016

Transaction ID : SA11A.468368

Amount of Each Receipt this Period
10.00

Memo Item
CONTRIBUTION

EARMARKED FROM INTERNATIONAL UNION OF OPERATING ENGINEERS LOCAL

B. HAMMERSLEY, DAVID, , MR.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1070 US HWY 14

City OREGON	State WI	Zip Code 53575-2833
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) INFORMATION REQUESTED PER BEST EFFORTS	Occupation (for Individual) INFORMATION REQUESTED PER BE
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Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
40.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11		08		2016

Transaction ID : SA11A.468345

Amount of Each Receipt this Period
40.00

Memo Item
CONTRIBUTION

EARMARKED FROM INTERNATIONAL UNION OF OPERATING ENGINEERS LOCAL

C. HOPPE, WILLIAM, , MR.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 312 ROBERTS DR.

City MUKWONAGO	State WI	Zip Code 53149-1131
-------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) INFORMATION REQUESTED PER BEST EFFORTS	Occupation (for Individual) INFORMATION REQUESTED PER BE
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Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
20.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11		08		2016

Transaction ID : SA11A.468316

Amount of Each Receipt this Period
20.00

Memo Item
CONTRIBUTION

EARMARKED FROM INTERNATIONAL UNION OF OPERATING ENGINEERS LOCAL

SUBTOTAL of Receipts This Page (optional).....	70.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 4230 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. JOHNSON, GENE, , MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4411 FOREST VALLEY RD
 City WAUSAU State WI Zip Code 54403-2037
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Occupation (for Individual)
 INFORMATION REQUESTED PER BEST EFFORTS INFORMATION REQUESTED PER BE
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 20.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 08 / 2016
Transaction ID : SA11A.468335
 Amount of Each Receipt this Period
 20.00
 Memo Item
 CONTRIBUTION
 EARMARKED FROM INTERNATIONAL UNION OF OPERATING ENGINEERS LOCAL

B. KRAUSS, HOMER, , MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address W2617 THUNDERBIRD LANE
 City ELKHORN State WI Zip Code 53121-3728
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Occupation (for Individual)
 INFORMATION REQUESTED PER BEST EFFORTS INFORMATION REQUESTED PER BE
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 40.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 08 / 2016
Transaction ID : SA11A.468330
 Amount of Each Receipt this Period
 40.00
 Memo Item
 CONTRIBUTION
 EARMARKED FROM INTERNATIONAL UNION OF OPERATING ENGINEERS LOCAL

C. KRAUSE, KENNETH, J., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address W239 S4785 MERLIN LANE
 City WAUKESHA State WI Zip Code 53189-9797
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Occupation (for Individual)
 INFORMATION REQUESTED PER BEST EFFORTS INFORMATION REQUESTED PER BE
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 40.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 08 / 2016
Transaction ID : SA11A.468317
 Amount of Each Receipt this Period
 20.00
 Memo Item
 CONTRIBUTION
 EARMARKED FROM INTERNATIONAL UNION OF OPERATING ENGINEERS LOCAL

SUBTOTAL of Receipts This Page (optional).....	80.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 4231 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. KRAUSE, KENNETH, J., MR.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address W239 S4785 MERLIN LANE

City WAUKESHA	State WI	Zip Code 53189-9797
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) INFORMATION REQUESTED PER BEST EFFORTS	Occupation (for Individual) INFORMATION REQUESTED PER BE
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Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
40.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11		08		2016

Transaction ID : SA11A.468318

Amount of Each Receipt this Period
20.00

Memo Item
CONTRIBUTION

EARMARKED FROM INTERNATIONAL UNION OF OPERATING ENGINEERS LOCAL

B. KROMM, KEITH, , MR.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1010 ELO RD

City PICKETT	State WI	Zip Code 54964-9537
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) INFORMATION REQUESTED PER BEST EFFORTS	Occupation (for Individual) INFORMATION REQUESTED PER BE
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Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
20.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11		08		2016

Transaction ID : SA11A.468364

Amount of Each Receipt this Period
20.00

Memo Item
CONTRIBUTION

EARMARKED FROM INTERNATIONAL UNION OF OPERATING ENGINEERS LOCAL

C. LE NOBLE, DAVID, R., MR., JR.
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address N8885 MEULEMANS RD

City BLACK CREEK	State WI	Zip Code 54106-8928
---------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) INFORMATION REQUESTED PER BEST EFFORTS	Occupation (for Individual) INFORMATION REQUESTED PER BE
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Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
20.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11		08		2016

Transaction ID : SA11A.468374

Amount of Each Receipt this Period
20.00

Memo Item
CONTRIBUTION

EARMARKED FROM INTERNATIONAL UNION OF OPERATING ENGINEERS LOCAL

SUBTOTAL of Receipts This Page (optional).....	60.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 4232 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. LESSARD, JACOB, , MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address S73W19545 LOCHCREST BLVD
 City MUSKEGO State WI Zip Code 53150-9273
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Occupation (for Individual)
 INFORMATION REQUESTED PER BEST EFFORTS INFORMATION REQUESTED PER BE
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 10.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 08 / 2016
Transaction ID : SA11A.468309
 Amount of Each Receipt this Period
 10.00
 Memo Item
 CONTRIBUTION
 EARMARKED FROM INTERNATIONAL UNION OF OPERATING ENGINEERS LOCAL

B. LUTHI, ROLPH, , MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 123 W COLLEGE AVE
 City WAUKESHA State WI Zip Code 53186-4962
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Occupation (for Individual)
 INFORMATION REQUESTED PER BEST EFFORTS INFORMATION REQUESTED PER BE
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 80.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 08 / 2016
Transaction ID : SA11A.468355
 Amount of Each Receipt this Period
 20.00
 Memo Item
 CONTRIBUTION
 EARMARKED FROM INTERNATIONAL UNION OF OPERATING ENGINEERS LOCAL

C. LUTHI, ROLPH, , MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 123 W COLLEGE AVE
 City WAUKESHA State WI Zip Code 53186-4962
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Occupation (for Individual)
 INFORMATION REQUESTED PER BEST EFFORTS INFORMATION REQUESTED PER BE
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 80.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 08 / 2016
Transaction ID : SA11A.468365
 Amount of Each Receipt this Period
 20.00
 Memo Item
 CONTRIBUTION
 EARMARKED FROM INTERNATIONAL UNION OF OPERATING ENGINEERS LOCAL

SUBTOTAL of Receipts This Page (optional).....	50.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 4233 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. LUTHI, ROLPH, , MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 123 W COLLEGE AVE
 City WAUKESHA State WI Zip Code 53186-4962
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Occupation (for Individual)
 INFORMATION REQUESTED PER BEST EFFORTS INFORMATION REQUESTED PER BE
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 80.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 08 / 2016
Transaction ID : SA11A.468382
 Amount of Each Receipt this Period
 40.00
 Memo Item
 CONTRIBUTION
 EARMARKED FROM INTERNATIONAL UNION OF OPERATING ENGINEERS LOCAL

B. MARKER, JEREMY, L., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address P.O. BOX 252
 City WEYAUWEGA State WI Zip Code 54983-0252
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Occupation (for Individual)
 INFORMATION REQUESTED PER BEST EFFORTS INFORMATION REQUESTED PER BE
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 20.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 08 / 2016
Transaction ID : SA11A.468336
 Amount of Each Receipt this Period
 20.00
 Memo Item
 CONTRIBUTION
 EARMARKED FROM INTERNATIONAL UNION OF OPERATING ENGINEERS LOCAL

C. MEATING, FRANK, E., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address E2604 BAGS HILL RD
 City WAUPACA State WI Zip Code 54981-9072
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Occupation (for Individual)
 INFORMATION REQUESTED PER BEST EFFORTS INFORMATION REQUESTED PER BE
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 20.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 08 / 2016
Transaction ID : SA11A.468319
 Amount of Each Receipt this Period
 20.00
 Memo Item
 CONTRIBUTION
 EARMARKED FROM INTERNATIONAL UNION OF OPERATING ENGINEERS LOCAL

SUBTOTAL of Receipts This Page (optional).....	80.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 4234 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. MILAM, MARK, F., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 28709 COUNTYLINE DR.
 City WATERFORD State WI Zip Code 53185-1248
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Occupation (for Individual)
 INFORMATION REQUESTED PER BEST EFFORTS INFORMATION REQUESTED PER BE
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 20.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 08 / 2016
Transaction ID : SA11A.468320
 Amount of Each Receipt this Period
 20.00
 Memo Item
 CONTRIBUTION
 EARMARKED FROM INTERNATIONAL UNION OF OPERATING ENGINEERS LOCAL

B. MILLER, BRIAN, G., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 527 ROSS AVE
 City SCHOFIELD State WI Zip Code 54476-1857
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Occupation (for Individual)
 INFORMATION REQUESTED PER BEST EFFORTS INFORMATION REQUESTED PER BE
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 20.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 08 / 2016
Transaction ID : SA11A.468356
 Amount of Each Receipt this Period
 20.00
 Memo Item
 CONTRIBUTION
 EARMARKED FROM INTERNATIONAL UNION OF OPERATING ENGINEERS LOCAL

C. NEHIS, SCOTT, , MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address P.O. BOX 162
 City BROWNSVILLE State WI Zip Code 53006-0162
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Occupation (for Individual)
 INFORMATION REQUESTED PER BEST EFFORTS INFORMATION REQUESTED PER BE
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 20.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 08 / 2016
Transaction ID : SA11A.468337
 Amount of Each Receipt this Period
 20.00
 Memo Item
 CONTRIBUTION
 EARMARKED FROM INTERNATIONAL UNION OF OPERATING ENGINEERS LOCAL

SUBTOTAL of Receipts This Page (optional).....	60.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 4235 OF 4311
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	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. OLSON, BRIAN, K., MR.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 76700 MCKINLEY RD

City WASHBURN	State WI	Zip Code 54891-6820
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) INFORMATION REQUESTED PER BEST EFFORTS	Occupation (for Individual) INFORMATION REQUESTED PER BE
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Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
30.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
11		08		2016

Transaction ID : SA11A.468361

Amount of Each Receipt this Period
30.00

Memo Item CONTRIBUTION

EARMARKED FROM INTERNATIONAL UNION OF OPERATING ENGINEERS LOCAL

B. PIENTOK, JENE, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 36088 CHRISTINE BLVD

City WHITEHALL	State WI	Zip Code 54773-8619
-------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) INFORMATION REQUESTED PER BEST EFFORTS	Occupation (for Individual) INFORMATION REQUESTED PER BE
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Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
20.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
11		08		2016

Transaction ID : SA11A.468352

Amount of Each Receipt this Period
20.00

Memo Item CONTRIBUTION

EARMARKED FROM INTERNATIONAL UNION OF OPERATING ENGINEERS LOCAL

C. POWARZYNSKI, JOHN, E., MR.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 689 NORRIS SHORES DR.

City SHARPS CHAPEL	State TN	Zip Code 37866-1756
-----------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) INFORMATION REQUESTED PER BEST EFFORTS	Occupation (for Individual) INFORMATION REQUESTED PER BE
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Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
20.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
11		08		2016

Transaction ID : SA11A.468372

Amount of Each Receipt this Period
20.00

Memo Item CONTRIBUTION

EARMARKED FROM INTERNATIONAL UNION OF OPERATING ENGINEERS LOCAL

SUBTOTAL of Receipts This Page (optional).....	70.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 4236 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. POWARZYNSKI, JOHN, E., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 689 NORRIS SHORES DR.
 City SHARPS CHAPEL State WI Zip Code 37566-
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Occupation (for Individual)
 INFORMATION REQUESTED PER BEST EFFORTS INFORMATION REQUESTED PER BE
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 40.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 11 / 08 / 2016
Transaction ID : SA11A.468378
 Amount of Each Receipt this Period
 40.00
 Memo Item
 CONTRIBUTION
 EARMARKED FROM INTERNATIONAL UNION OF OPERATING ENGINEERS LOCAL

B. RADTKE, HILBERT, , MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address P.O. BOX 169
 City WAUSAUKEE State WI Zip Code 54177-0169
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Occupation (for Individual)
 INFORMATION REQUESTED PER BEST EFFORTS INFORMATION REQUESTED PER BE
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 30.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 11 / 08 / 2016
Transaction ID : SA11A.468332
 Amount of Each Receipt this Period
 10.00
 Memo Item
 CONTRIBUTION
 EARMARKED FROM INTERNATIONAL UNION OF OPERATING ENGINEERS LOCAL

C. RADTKE, HILBERT, , MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address P.O. BOX 169
 City WAUSAUKEE State WI Zip Code 54177-0169
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Occupation (for Individual)
 INFORMATION REQUESTED PER BEST EFFORTS INFORMATION REQUESTED PER BE
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 30.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 11 / 08 / 2016
Transaction ID : SA11A.468338
 Amount of Each Receipt this Period
 20.00
 Memo Item
 CONTRIBUTION
 EARMARKED FROM INTERNATIONAL UNION OF OPERATING ENGINEERS LOCAL

SUBTOTAL of Receipts This Page (optional).....	70.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 4237 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. ROLLER, DENNIS, , MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4077 DVORAK RD
 City DEERFIELD State WI Zip Code 53531-9766
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Occupation (for Individual)
 INFORMATION REQUESTED PER BEST EFFORTS INFORMATION REQUESTED PER BE
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 20.00

Date of Receipt 11 / 08 / 2016
Transaction ID : SA11A.468321
 Amount of Each Receipt this Period 20.00
 Memo Item CONTRIBUTION
 EARMARKED FROM INTERNATIONAL UNION OF OPERATING ENGINEERS LOCAL

B. RUDE, TIM, , MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address E5382 2ND RD
 City KEWAUNEE State WI Zip Code 54216-9729
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Occupation (for Individual)
 INFORMATION REQUESTED PER BEST EFFORTS INFORMATION REQUESTED PER BE
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 20.00

Date of Receipt 11 / 08 / 2016
Transaction ID : SA11A.468339
 Amount of Each Receipt this Period 20.00
 Memo Item CONTRIBUTION
 EARMARKED FROM INTERNATIONAL UNION OF OPERATING ENGINEERS LOCAL

C. SCHMIDT, KEITH, , MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address N1032 CR KW
 City CEDAR GROVE State WI Zip Code 53013-1238
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Occupation (for Individual)
 INFORMATION REQUESTED PER BEST EFFORTS INFORMATION REQUESTED PER BE
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 20.00

Date of Receipt 11 / 08 / 2016
Transaction ID : SA11A.468322
 Amount of Each Receipt this Period 20.00
 Memo Item CONTRIBUTION
 EARMARKED FROM INTERNATIONAL UNION OF OPERATING ENGINEERS LOCAL

SUBTOTAL of Receipts This Page (optional).....	60.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 4238 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. SCHMIDT, PATRICK, M., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address N72W23198 WATERBURY CT

City SUSSEX	State WI	Zip Code 53089-5712
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) INFORMATION REQUESTED PER BEST EFFORTS	Occupation (for Individual) INFORMATION REQUESTED PER BE
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Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
20.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 08 / 2016

Transaction ID : SA11A.468353

Amount of Each Receipt this Period
20.00

Memo Item
CONTRIBUTION

EARMARKED FROM INTERNATIONAL UNION OF OPERATING ENGINEERS LOCAL

B. SCHULTZ, JASON, , MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address W843 AMIDON RD

City BROOKLYN	State WI	Zip Code 53521-8919
------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) INFORMATION REQUESTED PER BEST EFFORTS	Occupation (for Individual) INFORMATION REQUESTED PER BE
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Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
140.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 08 / 2016

Transaction ID : SA11A.468346

Amount of Each Receipt this Period
40.00

Memo Item
CONTRIBUTION

EARMARKED FROM INTERNATIONAL UNION OF OPERATING ENGINEERS LOCAL

C. SCHULTZ, JASON, , MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address W843 AMIDON RD

City BROOKLYN	State WI	Zip Code 53521-8919
------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) INFORMATION REQUESTED PER BEST EFFORTS	Occupation (for Individual) INFORMATION REQUESTED PER BE
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Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
140.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 08 / 2016

Transaction ID : SA11A.468347

Amount of Each Receipt this Period
40.00

Memo Item
CONTRIBUTION

EARMARKED FROM INTERNATIONAL UNION OF OPERATING ENGINEERS LOCAL

SUBTOTAL of Receipts This Page (optional).....	100.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 4239 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. SCHULTZ, JASON, , MR.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address W843 AMIDON RD

City BROOKLYN	State WI	Zip Code 53521-8919
------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) INFORMATION REQUESTED PER BEST EFFORTS	Occupation (for Individual) INFORMATION REQUESTED PER BE
---	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
140.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11		08		2016

Transaction ID : SA11A.468349

Amount of Each Receipt this Period
60.00

Memo Item
CONTRIBUTION

EARMARKED FROM INTERNATIONAL UNION OF OPERATING ENGINEERS LOCAL

B. SHEETER, NICK, R., MR.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1021 24TH ST

City TWO RIVERS	State WI	Zip Code 54241-2412
--------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) INFORMATION REQUESTED PER BEST EFFORTS	Occupation (for Individual) INFORMATION REQUESTED PER BE
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Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
40.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11		08		2016

Transaction ID : SA11A.468340

Amount of Each Receipt this Period
20.00

Memo Item
CONTRIBUTION

EARMARKED FROM INTERNATIONAL UNION OF OPERATING ENGINEERS LOCAL

C. SHEETER, NICK, R., MR.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1021 24TH ST

City TWO RIVERS	State WI	Zip Code 54241-2412
--------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) INFORMATION REQUESTED PER BEST EFFORTS	Occupation (for Individual) INFORMATION REQUESTED PER BE
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Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
40.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11		08		2016

Transaction ID : SA11A.468341

Amount of Each Receipt this Period
20.00

Memo Item
CONTRIBUTION

EARMARKED FROM INTERNATIONAL UNION OF OPERATING ENGINEERS LOCAL

SUBTOTAL of Receipts This Page (optional).....▶	100.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 4240 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. SIME, HARLAN, G., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 301 KENDALL ST
 City BURLINGTON State WI Zip Code 53105-1210
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Occupation (for Individual)
 INFORMATION REQUESTED PER BEST EFFORTS INFORMATION REQUESTED PER BE
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 20.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 11 / 08 / 2016
Transaction ID : SA11A.468342
 Amount of Each Receipt this Period
 20.00
 Memo Item
CONTRIBUTION
 EARMARKED FROM INTERNATIONAL UNION OF OPERATING ENGINEERS LOCAL

B. THOMPSON, TIM, , MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address W1892 FAWN AVE
 City RIB LAKE State WI Zip Code 54470-9664
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Occupation (for Individual)
 INFORMATION REQUESTED PER BEST EFFORTS INFORMATION REQUESTED PER BE
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 20.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 11 / 08 / 2016
Transaction ID : SA11A.468343
 Amount of Each Receipt this Period
 20.00
 Memo Item
CONTRIBUTION
 EARMARKED FROM INTERNATIONAL UNION OF OPERATING ENGINEERS LOCAL

C. VAN GUNDY, ALLEN, R., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4196 PFEFFER VALLEY RD
 City LA CRESCENT State MN Zip Code 55947-8757
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Occupation (for Individual)
 INFORMATION REQUESTED PER BEST EFFORTS INFORMATION REQUESTED PER BE
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 20.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 11 / 08 / 2016
Transaction ID : SA11A.468357
 Amount of Each Receipt this Period
 20.00
 Memo Item
CONTRIBUTION
 EARMARKED FROM INTERNATIONAL UNION OF OPERATING ENGINEERS LOCAL

SUBTOTAL of Receipts This Page (optional).....	60.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 4241 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. VAN GUNDY, ANNETTE, , MS.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 4196 PFEFFER VALLEY RD

City LA CRESCENT	State MN	Zip Code 55947-8757
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) INFORMATION REQUESTED PER BEST EFFORTS	Occupation (for Individual) INFORMATION REQUESTED PER BE
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Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
80.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
11		08		2016

Transaction ID : SA11A.468363

Amount of Each Receipt this Period
80.00

Memo Item
CONTRIBUTION

EARMARKED FROM INTERNATIONAL UNION OF OPERATING ENGINEERS LOCAL

B. VAN HEMELRYK, SCOTT, , MR.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 521 N SUPERIOR ST

City DE PERE	State WI	Zip Code 54115-2803
-----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) INFORMATION REQUESTED PER BEST EFFORTS	Occupation (for Individual) INFORMATION REQUESTED PER BE
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Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
20.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
11		08		2016

Transaction ID : SA11A.468323

Amount of Each Receipt this Period
20.00

Memo Item
CONTRIBUTION

EARMARKED FROM INTERNATIONAL UNION OF OPERATING ENGINEERS LOCAL

C. WAITE, JAMES, S., MR.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 4945 BASLER DR.

City HARTFORD	State WI	Zip Code 53027-9559
------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) INFORMATION REQUESTED PER BEST EFFORTS	Occupation (for Individual) INFORMATION REQUESTED PER BE
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Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
20.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
11		08		2016

Transaction ID : SA11A.468344

Amount of Each Receipt this Period
20.00

Memo Item
CONTRIBUTION

EARMARKED FROM INTERNATIONAL UNION OF OPERATING ENGINEERS LOCAL

SUBTOTAL of Receipts This Page (optional).....	120.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 4242 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. WANTZ, JOHN, , MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address W2910 ELM RD
 City MAYVILLE State WI Zip Code 53050-2044
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Occupation (for Individual)
 INFORMATION REQUESTED PER BEST EFFORTS INFORMATION REQUESTED PER BE
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 20.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 08 / 2016
Transaction ID : SA11A.468373
 Amount of Each Receipt this Period
 20.00
 Memo Item
CONTRIBUTION
 EARMARKED FROM INTERNATIONAL UNION OF OPERATING ENGINEERS LOCAL

B. WEGENER, TOM, , MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 160 HILLSIDE RD
 City COLGATE State WI Zip Code 53017-9117
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Occupation (for Individual)
 INFORMATION REQUESTED PER BEST EFFORTS INFORMATION REQUESTED PER BE
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 30.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 08 / 2016
Transaction ID : SA11A.468369
 Amount of Each Receipt this Period
 10.00
 Memo Item
CONTRIBUTION
 EARMARKED FROM INTERNATIONAL UNION OF OPERATING ENGINEERS LOCAL

C. WEGENER, TOM, , MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 160 HILLSIDE RD
 City COLGATE State WI Zip Code 53017-9117
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Occupation (for Individual)
 INFORMATION REQUESTED PER BEST EFFORTS INFORMATION REQUESTED PER BE
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 30.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 08 / 2016
Transaction ID : SA11A.468375
 Amount of Each Receipt this Period
 20.00
 Memo Item
CONTRIBUTION
 EARMARKED FROM INTERNATIONAL UNION OF OPERATING ENGINEERS LOCAL

SUBTOTAL of Receipts This Page (optional).....	50.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 4243 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. WENZEL, ANDREW, , MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 9308 S 92ND ST
 City FRANKLIN State WI Zip Code 53132-9511
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Occupation (for Individual)
 INFORMATION REQUESTED PER BEST EFFORTS INFORMATION REQUESTED PER BE
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 40.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 08 / 2016
Transaction ID : SA11A.468348
 Amount of Each Receipt this Period
 40.00
 Memo Item
 CONTRIBUTION
 EARMARKED FROM INTERNATIONAL UNION OF OPERATING ENGINEERS LOCAL

B. WESTLUND, DANIEL, R., MR., JR.
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 69710 RANGE RD
 City ASHLAND State WI Zip Code 54806-9321
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Occupation (for Individual)
 INFORMATION REQUESTED PER BEST EFFORTS INFORMATION REQUESTED PER BE
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 20.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 08 / 2016
Transaction ID : SA11A.468358
 Amount of Each Receipt this Period
 20.00
 Memo Item
 CONTRIBUTION
 EARMARKED FROM INTERNATIONAL UNION OF OPERATING ENGINEERS LOCAL

C. WHEATON, DARIAL, , MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address N6518 31ST DR.
 City WEYAUWEGA State WI Zip Code 54983-5677
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Occupation (for Individual)
 INFORMATION REQUESTED PER BEST EFFORTS INFORMATION REQUESTED PER BE
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 40.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 08 / 2016
Transaction ID : SA11A.468324
 Amount of Each Receipt this Period
 20.00
 Memo Item
 CONTRIBUTION
 EARMARKED FROM INTERNATIONAL UNION OF OPERATING ENGINEERS LOCAL

SUBTOTAL of Receipts This Page (optional).....	80.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 4244 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. WHEATON, DARIAL, , MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address N6518 31ST DR.
 City WEYAUWEGA State WI Zip Code 54983-5677
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Occupation (for Individual)
 INFORMATION REQUESTED PER BEST EFFORTS INFORMATION REQUESTED PER BE
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 40.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 08 / 2016
Transaction ID : SA11A.468325
 Amount of Each Receipt this Period 20.00
 Memo Item CONTRIBUTION
 EARMARKED FROM INTERNATIONAL UNION OF OPERATING ENGINEERS LOCAL

B. WILSON, ROBERT, , MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 102 S OAKRIDGE DR.
 City NORTH PRAIRIE State WI Zip Code 53153-9734
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Occupation (for Individual)
 INFORMATION REQUESTED PER BEST EFFORTS INFORMATION REQUESTED PER BE
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 20.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 08 / 2016
Transaction ID : SA11A.468376
 Amount of Each Receipt this Period 20.00
 Memo Item CONTRIBUTION
 EARMARKED FROM INTERNATIONAL UNION OF OPERATING ENGINEERS LOCAL

C. WINDSOR, BRADLEY, , MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address N6724 HELBLING RD
 City BLACK RIVER FALLS State WI Zip Code 54615-5424
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Occupation (for Individual)
 INFORMATION REQUESTED PER BEST EFFORTS INFORMATION REQUESTED PER BE
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 40.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 08 / 2016
Transaction ID : SA11A.468359
 Amount of Each Receipt this Period 20.00
 Memo Item CONTRIBUTION
 EARMARKED FROM INTERNATIONAL UNION OF OPERATING ENGINEERS LOCAL

SUBTOTAL of Receipts This Page (optional).....	60.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 4245 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. WINDSOR, BRADLEY, , MR.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address N6724 HELBLING RD

City BLACK RIVER FALLS	State WI	Zip Code 54615-5424
---------------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) INFORMATION REQUESTED PER BEST EFFORTS	Occupation (for Individual) INFORMATION REQUESTED PER BE
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Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
40.00

Date of Receipt
MM / DD / YYYY
11 / 08 / 2016

Transaction ID : SA11A.468360

Amount of Each Receipt this Period
20.00

Memo Item
CONTRIBUTION

EARMARKED FROM INTERNATIONAL UNION OF OPERATING ENGINEERS LOCAL

B. WITZELING, ROBERT, , MR.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 2810 JOSEPH AVE

City SCHOFIELD	State WI	Zip Code 54476-3623
-------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) INFORMATION REQUESTED PER BEST EFFORTS	Occupation (for Individual) INFORMATION REQUESTED PER BE
---	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
30.00

Date of Receipt
MM / DD / YYYY
11 / 08 / 2016

Transaction ID : SA11A.468379

Amount of Each Receipt this Period
10.00

Memo Item
CONTRIBUTION

EARMARKED FROM INTERNATIONAL UNION OF OPERATING ENGINEERS LOCAL

C. WITZELING, ROBERT, , MR.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 2810 JOSEPH AVE

City SCHOFIELD	State WI	Zip Code 54476-3623
-------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) INFORMATION REQUESTED PER BEST EFFORTS	Occupation (for Individual) INFORMATION REQUESTED PER BE
---	---

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
30.00

Date of Receipt
MM / DD / YYYY
11 / 08 / 2016

Transaction ID : SA11A.468381

Amount of Each Receipt this Period
20.00

Memo Item
CONTRIBUTION

EARMARKED FROM INTERNATIONAL UNION OF OPERATING ENGINEERS LOCAL

SUBTOTAL of Receipts This Page (optional).....	50.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 4246 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. WOLLERT, TYLER, , MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 201 BROOKSIDE LANE
 City COLUMBUS State WI Zip Code 53925-1811
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Occupation (for Individual)
 INFORMATION REQUESTED PER BEST EFFORTS INFORMATION REQUESTED PER BE
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 20.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 11 / 08 / 2016
Transaction ID : SA11A.468366
 Amount of Each Receipt this Period
 20.00
 Memo Item
CONTRIBUTION
 EARMARKED FROM INTERNATIONAL UNION OF OPERATING ENGINEERS LOCAL

B. WOLSKE, KOLT, , MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 620 MAIN ST
 City WILSON State WI Zip Code 54027-3921
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Occupation (for Individual)
 INFORMATION REQUESTED PER BEST EFFORTS INFORMATION REQUESTED PER BE
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 60.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 11 / 08 / 2016
Transaction ID : SA11A.468367
 Amount of Each Receipt this Period
 40.00
 Memo Item
CONTRIBUTION
 EARMARKED FROM INTERNATIONAL UNION OF OPERATING ENGINEERS LOCAL

C. WOLSKE, KOLT, , MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 620 MAIN ST
 City WILSON State WI Zip Code 54027-3921
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Occupation (for Individual)
 INFORMATION REQUESTED PER BEST EFFORTS INFORMATION REQUESTED PER BE
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 60.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 11 / 08 / 2016
Transaction ID : SA11A.468377
 Amount of Each Receipt this Period
 20.00
 Memo Item
CONTRIBUTION
 EARMARKED FROM INTERNATIONAL UNION OF OPERATING ENGINEERS LOCAL

SUBTOTAL of Receipts This Page (optional).....	80.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 4247 OF 4311
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. WURGLER, GREG, , MR.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 1324 SUNNYRIDGE RD #4

City PEWAUKEE	State WI	Zip Code 53072-3831
------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) INFORMATION REQUESTED PER BEST EFFORTS	Occupation (for Individual) INFORMATION REQUESTED PER BE
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Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
20.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	08	/	2016

Transaction ID : SA11A.468326

Amount of Each Receipt this Period
20.00

Memo Item
CONTRIBUTION

EARMARKED FROM INTERNATIONAL UNION OF OPERATING ENGINEERS LOCAL

B. ZART, BRIAN, , MR.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 1375 12TH ST

City FENNIMORE	State WI	Zip Code 53809-1904
-------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) INFORMATION REQUESTED PER BEST EFFORTS	Occupation (for Individual) INFORMATION REQUESTED PER BE
---	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
20.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	08	/	2016

Transaction ID : SA11A.468354

Amount of Each Receipt this Period
20.00

Memo Item
CONTRIBUTION

EARMARKED FROM INTERNATIONAL UNION OF OPERATING ENGINEERS LOCAL

C. ZENZ, FRANK, , MR.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address E8092 N REEDSBURG RD

City REEDSBURG	State WI	Zip Code 53959-9012
-------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) INFORMATION REQUESTED PER BEST EFFORTS	Occupation (for Individual) INFORMATION REQUESTED PER BE
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Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
40.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	08	/	2016

Transaction ID : SA11A.468327

Amount of Each Receipt this Period
20.00

Memo Item
CONTRIBUTION

EARMARKED FROM INTERNATIONAL UNION OF OPERATING ENGINEERS LOCAL

SUBTOTAL of Receipts This Page (optional).....	60.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 4248 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. ZENZ, FRANK, , MR.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address **E8092 N REEDSBURG RD**

City REEDSBURG	State WI	Zip Code 53959-9012
--------------------------	--------------------	-------------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) INFORMATION REQUESTED PER BEST EFFORTS	Occupation (for Individual) INFORMATION REQUESTED PER BE
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
40.00

Date of Receipt
11 / 08 / 2016

Transaction ID : SA11A.468328

Amount of Each Receipt this Period
20.00

Memo Item CONTRIBUTION

EARMARKED FROM INTERNATIONAL UNION OF OPERATING ENGINEERS LOCAL

B. ZILLS, CLETE, , MR.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address **W8354 SR. 68**

City WAUPUN	State WI	Zip Code 53963-9096
-----------------------	--------------------	-------------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) INFORMATION REQUESTED PER BEST EFFORTS	Occupation (for Individual) INFORMATION REQUESTED PER BE
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Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
60.00

Date of Receipt
11 / 08 / 2016

Transaction ID : SA11A.468329

Amount of Each Receipt this Period
20.00

Memo Item CONTRIBUTION

EARMARKED FROM INTERNATIONAL UNION OF OPERATING ENGINEERS LOCAL

C. ZILLS, CLETE, , MR.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address **W8354 SR. 68**

City WAUPUN	State WI	Zip Code 53963-9096
-----------------------	--------------------	-------------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) INFORMATION REQUESTED PER BEST EFFORTS	Occupation (for Individual) INFORMATION REQUESTED PER BE
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Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
60.00

Date of Receipt
11 / 08 / 2016

Transaction ID : SA11A.468331

Amount of Each Receipt this Period
40.00

Memo Item CONTRIBUTION

EARMARKED FROM INTERNATIONAL UNION OF OPERATING ENGINEERS LOCAL

SUBTOTAL of Receipts This Page (optional).....	80.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 4249 OF 4311
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. WISCONSIN HOSPITAL ASSN. CONDUIT
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 5510 RESEARCH PARK DR.
City FITCHBURG State WI Zip Code 53711-5377
FEC ID number of contributing federal political committee. **C** C00422881
Name of Employer (for Individual) Occupation (for Individual)
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 3500.00

Date of Receipt 11 / 03 / 2016
Transaction ID : SA11C.465202
Amount of Each Receipt this Period 1000.00
 Memo Item CONTRIBUTION
SEE ATTRIBUTION BELOW

B. METTNER, MICHELLE, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 4014 COUNCIL CRST
City MADISON State WI Zip Code 53711-2927
FEC ID number of contributing federal political committee. **C**
Name of Employer (for Individual) CHILDREN'S HOSPITAL Occupation (for Individual) VP
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 1000.00

Date of Receipt 11 / 03 / 2016
Transaction ID : SA11A.465221
Amount of Each Receipt this Period 1000.00
 Memo Item CONTRIBUTION
EARMARKED FROM WISCONSIN HOSPITAL ASSN. CONDUIT

C.
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address
City State Zip Code
FEC ID number of contributing federal political committee. **C**
Name of Employer (for Individual) Occupation (for Individual)
Receipt For: Primary General Other (specify)

Date of Receipt
Amount of Each Receipt this Period
 Memo Item

SUBTOTAL of Receipts This Page (optional).....▶	1000.00
TOTAL This Period (last page this line number only).....▶	5116005.62

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 4250 OF 4311
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. AMERICAN ASSOCIATION OF ORTHOPAEDIC SURGEONS PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 317 MASSACHUSETTS AVE NE

City WASHINGTON	State DC	Zip Code 20002-5769
--------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C** C00343137

Name of Employer (for Individual) Occupation (for Individual)

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
4000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		28		2016

Transaction ID : SA11C.447767

Amount of Each Receipt this Period
4000.00

Memo Item
CONTRIBUTION

B. AMERICAN ACADEMY OF OTOLARYNGOLOGY PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 1650 DIAGONAL ROAD

City ALEXANDRIA	State VA	Zip Code 22314-2857
--------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C** C00306449

Name of Employer (for Individual) Occupation (for Individual)

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
5000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11		01		2016

Transaction ID : SA11C.461539

Amount of Each Receipt this Period
5000.00

Memo Item
CONTRIBUTION

C. AMERICAN BANKERS ASSN PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 1120 CONNECTICUT AVENUE NW
SUITE 600

City WASHINGTON	State DC	Zip Code 20036-3971
--------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C** C00004275

Name of Employer (for Individual) Occupation (for Individual)

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
12500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11		03		2016

Transaction ID : SA11C.465156

Amount of Each Receipt this Period
5000.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	14000.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 4251 OF 4311
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. AMERICAN BANKERS ASSN PAC
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 1120 CONNECTICUT AVENUE NW
SUITE 600
City WASHINGTON State DC Zip Code 20036-3971
FEC ID number of contributing federal political committee. **C** C00004275
Name of Employer (for Individual) Occupation (for Individual)
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 12500.00

Date of Receipt 11 / 03 / 2016
Transaction ID : SA11C.465161
Amount of Each Receipt this Period 2500.00
 Memo Item
CONTRIBUTION

B. AMERICAN COUNCIL OF ENGINEERING CO. PAC
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 1015 15TH STREET NW
SUITE 802
City WASHINGTON State DC Zip Code 20005-2605
FEC ID number of contributing federal political committee. **C** C00010868
Name of Employer (for Individual) Occupation (for Individual)
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 6000.00

Date of Receipt 11 / 03 / 2016
Transaction ID : SA11C.465162
Amount of Each Receipt this Period 5000.00
 Memo Item
CONTRIBUTION

C. ANADARKO PETROLEUM CORP PAC
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 1201 LAKE ROBBINS DRIVE
City THE WOODLANDS State TX Zip Code 77380-1181
FEC ID number of contributing federal political committee. **C** C00231951
Name of Employer (for Individual) Occupation (for Individual)
Receipt For: Primary General Other (specify)
Aggregate Year-to-Date ▼ 12500.00

Date of Receipt 10 / 24 / 2016
Transaction ID : SA11C.443427
Amount of Each Receipt this Period 10000.00
 Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	17500.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 4252 OF 4311
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. BASF CORPORATION EMPLOYEES PAC
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 100 PARK AVENUE

City FLORHAM PARK	State NJ	Zip Code 07932-1049
FEC ID number of contributing federal political committee. C C00340075		
Name of Employer (for Individual)		Occupation (for Individual)
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 8750.00

Date of Receipt
MM / DD / YYYY
10 / 24 / 2016
Transaction ID : SA11C.443422

Amount of Each Receipt this Period
1250.00

Memo Item
CONTRIBUTION

B. BASF CORPORATION EMPLOYEES PAC
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 100 PARK AVENUE

City FLORHAM PARK	State NJ	Zip Code 07932-1049
FEC ID number of contributing federal political committee. C C00340075		
Name of Employer (for Individual)		Occupation (for Individual)
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 8750.00

Date of Receipt
MM / DD / YYYY
11 / 03 / 2016
Transaction ID : SA11C.465163

Amount of Each Receipt this Period
2500.00

Memo Item
CONTRIBUTION

C. BOLD INDEPENDENCE LIBERTY & LEADERSHIP PAC (BILL PAC)
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address P.O. BOX 4528

City BRYAN	State TX	Zip Code 77805-4528
FEC ID number of contributing federal political committee. C C00527275		
Name of Employer (for Individual)		Occupation (for Individual)
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		Aggregate Year-to-Date ▼ 10000.00

Date of Receipt
MM / DD / YYYY
10 / 24 / 2016
Transaction ID : SA11C.443433

Amount of Each Receipt this Period
10000.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	13750.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 4253 OF 4311
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. CAPELLA HEALTHCARE INC GOVERNMENT AFFAIRS COMMITTEE
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 501 CORPORATE CENTRE DR STE 200
 City FRANKLIN State TN Zip Code 37067-2662
 FEC ID number of contributing federal political committee. **C** C00421420
 Name of Employer (for Individual) Occupation (for Individual)
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt **11 / 03 / 2016**
Transaction ID : SA11C.465164
 Amount of Each Receipt this Period 1000.00
 Memo Item
CONTRIBUTION

B. CASH AMERICA INTERNATIONAL INC. PAC
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1600 W. 7TH STREET
 City FORT WORTH State TX Zip Code 76102-2504
 FEC ID number of contributing federal political committee. **C** C00275529
 Name of Employer (for Individual) Occupation (for Individual)
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 5400.00

Date of Receipt **10 / 24 / 2016**
Transaction ID : SA11C.443425
 Amount of Each Receipt this Period 2700.00
 Memo Item
CONTRIBUTION

C. CHARTER COMMUNICATIONS, INC. PAC
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 400 ATLANTIC STREET 10TH FLOOR
 City STAMFORD State CT Zip Code 06901-3512
 FEC ID number of contributing federal political committee. **C** C00426775
 Name of Employer (for Individual) Occupation (for Individual)
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 5000.00

Date of Receipt **11 / 01 / 2016**
Transaction ID : SA11C.461537
 Amount of Each Receipt this Period 5000.00
 Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	8700.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 4254 OF 4311
	<input type="checkbox"/> 11a <input type="checkbox"/> 11b <input checked="" type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. CITIGROUP INC PAC
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 1101 PENNSYLVANIA AVE NW
STE. 1000
City WASHINGTON State DC Zip Code 20004-2524
FEC ID number of contributing federal political committee. **C** C00008474
Name of Employer (for Individual) Occupation (for Individual)
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 10000.00

Date of Receipt 11 / 08 / 2016
Transaction ID : SA11C.467905
Amount of Each Receipt this Period 5000.00
 Memo Item
CONTRIBUTION

B. COALPAC (NAT'L MINING ASSOC)
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 101 CONSTITUTION AVENUE NW
City WASHINGTON State DC Zip Code 20001-2133
FEC ID number of contributing federal political committee. **C** C00109819
Name of Employer (for Individual) Occupation (for Individual)
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 2500.00

Date of Receipt 10 / 28 / 2016
Transaction ID : SA11C.447765
Amount of Each Receipt this Period 2500.00
 Memo Item
CONTRIBUTION

C. CREDIT SUISSE SECURITIES PAC
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 1201 F ST NW STE 450
City WASHINGTON State DC Zip Code 20004-1214
FEC ID number of contributing federal political committee. **C** C00111559
Name of Employer (for Individual) Occupation (for Individual)
Receipt For: Primary General Other (specify)
Aggregate Year-to-Date ▼ 5000.00

Date of Receipt 11 / 18 / 2016
Transaction ID : SA11C.480990
Amount of Each Receipt this Period 5000.00
 Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶ 12500.00
TOTAL This Period (last page this line number only).....▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 4255 OF 4311
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. ENGIE NORTH AMERICA PAC
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1990 POST OAK BOULEVARD
SUITE 1900

City HOUSTON State TX Zip Code 77056-3831

FEC ID number of contributing federal political committee. **C** C00375568

Name of Employer (for Individual) Occupation (for Individual)

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
5000.00

Date of Receipt
10 / 24 / 2016
Transaction ID : SA11C.443429

Amount of Each Receipt this Period
5000.00

Memo Item
CONTRIBUTION

B. ENTERPRISE PRODUCTS PARTNERS PAC
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1100 LOUISIANA STREET

City HOUSTON State TX Zip Code 77002-5227

FEC ID number of contributing federal political committee. **C** C00496752

Name of Employer (for Individual) Occupation (for Individual)

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
10000.00

Date of Receipt
10 / 24 / 2016
Transaction ID : SA11C.443423

Amount of Each Receipt this Period
5000.00

Memo Item
CONTRIBUTION

C. ENTERPRISE PRODUCTS PARTNERS PAC
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1100 LOUISIANA STREET

City HOUSTON State TX Zip Code 77002-5227

FEC ID number of contributing federal political committee. **C** C00496752

Name of Employer (for Individual) Occupation (for Individual)

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
10000.00

Date of Receipt
10 / 24 / 2016
Transaction ID : SA11C.443424

Amount of Each Receipt this Period
5000.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 15000.00

TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 4256 OF 4311
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. EXPERIAN PAC
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 475 ANTON BLVD
City COSTA MESA State CA Zip Code 92626-7037
FEC ID number of contributing federal political committee. **C** C00379768
Name of Employer (for Individual) Occupation (for Individual)
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 15000.00

Date of Receipt 11 / 08 / 2016
Transaction ID : SA11C.467916
Amount of Each Receipt this Period 5000.00
 Memo Item
CONTRIBUTION

B. FEDERATION OF AMERICAN HOSPITALS PAC (FEDPAC)
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 750 9TH STREET NW SUITE 600
City WASHINGTON State DC Zip Code 20001-4595
FEC ID number of contributing federal political committee. **C** C00002261
Name of Employer (for Individual) Occupation (for Individual)
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 7500.00

Date of Receipt 11 / 10 / 2016
Transaction ID : SA11C.468124
Amount of Each Receipt this Period 2500.00
 Memo Item
CONTRIBUTION

C. FIRST COMMAND PAC
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 1 FIRST COMM PLAZA
City FT. WORTH State TX Zip Code 76109-4978
FEC ID number of contributing federal political committee. **C** C00325647
Name of Employer (for Individual) Occupation (for Individual)
Receipt For: Primary General Other (specify)
Aggregate Year-to-Date ▼ 5400.00

Date of Receipt 10 / 24 / 2016
Transaction ID : SA11C.443426
Amount of Each Receipt this Period 2700.00
 Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	10200.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 4257 OF 4311
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Team Ryan

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name A. IRONWORKERS-PAC		Date of Receipt
Mailing Address 1750 NEW YORK AVE NW		<input type="text" value="10"/> / <input type="text" value="28"/> / <input type="text" value="2016"/>
City WASHINGTON	State DC	Zip Code 20006-5305
FEC ID number of contributing federal political committee. C C00027359		Transaction ID : SA11C.447766
Name of Employer (for Individual)		Amount of Each Receipt this Period <input type="text" value="5000.00"/>
Occupation (for Individual)		<input type="checkbox"/> Memo Item CONTRIBUTION
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ <input type="text" value="10000.00"/>	

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name B. IRONWORKERS-PAC		Date of Receipt
Mailing Address 1750 NEW YORK AVE NW		<input type="text" value="10"/> / <input type="text" value="28"/> / <input type="text" value="2016"/>
City WASHINGTON	State DC	Zip Code 20006-5305
FEC ID number of contributing federal political committee. C C00027359		Transaction ID : SA11C.447768
Name of Employer (for Individual)		Amount of Each Receipt this Period <input type="text" value="5000.00"/>
Occupation (for Individual)		<input type="checkbox"/> Memo Item CONTRIBUTION
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ <input type="text" value="10000.00"/>	

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name C. ITG PAC		Date of Receipt
Mailing Address 714 GREEN VALLEY ROAD		<input type="text" value="11"/> / <input type="text" value="08"/> / <input type="text" value="2016"/>
City GREENSBORO	State NC	Zip Code 27408-7018
FEC ID number of contributing federal political committee. C C00587543		Transaction ID : SA11C.468130
Name of Employer (for Individual)		Amount of Each Receipt this Period <input type="text" value="5000.00"/>
Occupation (for Individual)		<input type="checkbox"/> Memo Item CONTRIBUTION
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Aggregate Year-to-Date ▼ <input type="text" value="5000.00"/>	

SUBTOTAL of Receipts This Page (optional).....▶	<input type="text" value="15000.00"/>
TOTAL This Period (last page this line number only).....▶	<input type="text"/>

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 4258 OF 4311
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. KIRBY PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 55 WAUGH DRIVE
SUITE 1000

City HOUSTON State TX Zip Code 77007-5834

FEC ID number of contributing federal political committee. **C** C00250027

Name of Employer (for Individual) Occupation (for Individual)

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
12500.00

Date of Receipt
M M M / D D D / Y Y Y Y Y Y
10 / 24 / 2016

Transaction ID : SA11C.443428

Amount of Each Receipt this Period
2500.00

Memo Item
CONTRIBUTION

B. KPMG PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address PO BOX 18254

City WASHINGTON State DC Zip Code 20036-8254

FEC ID number of contributing federal political committee. **C** C00280222

Name of Employer (for Individual) Occupation (for Individual)

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
5000.00

Date of Receipt
M M M / D D D / Y Y Y Y Y Y
11 / 18 / 2016

Transaction ID : SA11C.480989

Amount of Each Receipt this Period
5000.00

Memo Item
CONTRIBUTION

C. LIUNA PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 905 16TH ST NW

City WASHINGTON State DC Zip Code 20006-1703

FEC ID number of contributing federal political committee. **C** C00007922

Name of Employer (for Individual) Occupation (for Individual)

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
10000.00

Date of Receipt
M M M / D D D / Y Y Y Y Y Y
11 / 08 / 2016

Transaction ID : SA11C.468129

Amount of Each Receipt this Period
10000.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	17500.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 4259 OF 4311
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. LOCKHEED MARTIN EMPLOYEES' PAC
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 2121 CRYSTAL DRIVE STE 100

City ARLINGTON	State VA	Zip Code 22202-3706
-------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C** C00303024

Name of Employer (for Individual) Occupation (for Individual)

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
7000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	08	/	2016

Transaction ID : SA11C.467915

Amount of Each Receipt this Period
2000.00

Memo Item
CONTRIBUTION

B. MINEPAC
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 101 CONSTITUTION AVENUE NW SUITE 500E

City WASHINGTON	State DC	Zip Code 20001-2133
--------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C** C00304634

Name of Employer (for Individual) Occupation (for Individual)

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
2500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	28	/	2016

Transaction ID : SA11C.447763

Amount of Each Receipt this Period
2500.00

Memo Item
CONTRIBUTION

C. NATIONAL AUTOMOBILE DEALERS ASSOC. PAC (NADA PAC)
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 8400 WESTPARK DRIVE

City TYSONS	State VA	Zip Code 22102-5116
----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C** C00040998

Name of Employer (for Individual) Occupation (for Individual)

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
10000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	03	/	2016

Transaction ID : SA11C.465160

Amount of Each Receipt this Period
5000.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	9500.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 4260 OF 4311
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. NATIONAL GROCERS ASSOC. PAC (GROCERS PAC)
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 1005 NORTH GLEBE ROAD SUITE 250

City ARLINGTON	State VA	Zip Code 22201-5758
-------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C** C00508770

Name of Employer (for Individual) Occupation (for Individual)

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
2500.00

Date of Receipt
M M M / D D D / Y Y Y Y Y Y
10 / 28 / 2016

Transaction ID : SA11C.447769

Amount of Each Receipt this Period
2500.00

Memo Item
CONTRIBUTION

B. NEMPAC
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 2121 K STREET NW SUITE 325

City WASHINGTON	State DC	Zip Code 20037-1886
--------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C** C00140061

Name of Employer (for Individual) Occupation (for Individual)

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
17000.00

Date of Receipt
M M M / D D D / Y Y Y Y Y Y
11 / 08 / 2016

Transaction ID : SA11C.467908

Amount of Each Receipt this Period
5000.00

Memo Item
CONTRIBUTION

C. NEXION FUND FOR QUALITY PAC
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 6937 WARFIELD AVE

City SYKESVILLE	State MD	Zip Code 21784-7454
--------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C** C00434233

Name of Employer (for Individual) Occupation (for Individual)

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
2500.00

Date of Receipt
M M M / D D D / Y Y Y Y Y Y
10 / 25 / 2016

Transaction ID : SA11C.445027

Amount of Each Receipt this Period
2500.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	10000.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 4261 OF 4311
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. NEXSTAR BROADCASTING GROUP PAC
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 545 E. JOHN CARPENTER FREEWAY
SUITE 700
City IRVING State TX Zip Code 75062-3932
FEC ID number of contributing federal political committee. **C** C00567388
Name of Employer (for Individual) Occupation (for Individual)
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 10000.00

Date of Receipt 10 / 24 / 2016
Transaction ID : SA11C.443431
Amount of Each Receipt this Period 10000.00
 Memo Item
CONTRIBUTION

B. NIADA PAC
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 2521 BROWN BLVD
City ARLINGTON State TX Zip Code 76006-5203
FEC ID number of contributing federal political committee. **C** C00507699
Name of Employer (for Individual) Occupation (for Individual)
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 9995.00

Date of Receipt 11 / 01 / 2016
Transaction ID : SA11C.461540
Amount of Each Receipt this Period 4995.00
 Memo Item
CONTRIBUTION

C. PATHPAC
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 1350 I STREET NW
SUITE 590
City WASHINGTON State DC Zip Code 20005-3305
FEC ID number of contributing federal political committee. **C** C00274944
Name of Employer (for Individual) Occupation (for Individual)
Receipt For: Primary General Other (specify)
Aggregate Year-to-Date ▼ 1500.00

Date of Receipt 10 / 28 / 2016
Transaction ID : SA11C.447764
Amount of Each Receipt this Period 1500.00
 Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶ 16495.00
TOTAL This Period (last page this line number only).....▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 4262 OF 4311
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. PROPERTY CASUALTY INSURERS ASSOC. OF AMERICA PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 8700 WEST BRYN MAWR
SUITE 1200S

City CHICAGO State IL Zip Code 60631-3512

FEC ID number of contributing federal political committee. **C** C00066472

Name of Employer (for Individual) Occupation (for Individual)

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
2500.00

Date of Receipt
11 / 01 / 2016
Transaction ID : SA11C.461538

Amount of Each Receipt this Period
2500.00

Memo Item
CONTRIBUTION

B. QUALCOMM, INC PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1730 PENNSYLVANIA AVENUE NW
SUITE 850

City WASHINGTON State DC Zip Code 20006-4724

FEC ID number of contributing federal political committee. **C** C00339085

Name of Employer (for Individual) Occupation (for Individual)

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
2500.00

Date of Receipt
11 / 08 / 2016
Transaction ID : SA11C.467909

Amount of Each Receipt this Period
2500.00

Memo Item
CONTRIBUTION

C. REALPAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 801 PENN AVE NW STE 720

City WASHINGTON State DC Zip Code 20004-2686

FEC ID number of contributing federal political committee. **C** C00033779

Name of Employer (for Individual) Occupation (for Individual)

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
5000.00

Date of Receipt
11 / 03 / 2016
Transaction ID : SA11C.465157

Amount of Each Receipt this Period
5000.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 10000.00

TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 4263 OF 4311
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. RITE AID PAC
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 30 HUNTER LANE

City CAMP HILL	State PA	Zip Code 17011-2400
FEC ID number of contributing federal political committee. C C00104083		
Name of Employer (for Individual)		Occupation (for Individual)
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 4000.00	

Date of Receipt
MM / DD / YYYY
11 / 03 / 2016
Transaction ID : SA11C.465165

Amount of Each Receipt this Period
2500.00

Memo Item
CONTRIBUTION

B. SERVICE CORPORATION INTERNATIONAL PAC (SCI PAC)
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 1929 ALLEN PARKWAY

City HOUSTON	State TX	Zip Code 77019-2506
FEC ID number of contributing federal political committee. C C00173096		
Name of Employer (for Individual)		Occupation (for Individual)
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 5000.00	

Date of Receipt
MM / DD / YYYY
10 / 24 / 2016
Transaction ID : SA11C.443430

Amount of Each Receipt this Period
5000.00

Memo Item
CONTRIBUTION

C. SOUTHERN WINE & SPIRITS PAC
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 1600 NW 163 STREET

City MIAMI	State FL	Zip Code 33169-5641
FEC ID number of contributing federal political committee. C C00217877		
Name of Employer (for Individual)		Occupation (for Individual)
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Aggregate Year-to-Date ▼ 15000.00	

Date of Receipt
MM / DD / YYYY
10 / 24 / 2016
Transaction ID : SA11C.443432

Amount of Each Receipt this Period
15000.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	22500.00
TOTAL This Period (last page this line number only).....	192645.00

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 4264 OF 4311
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input checked="" type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. RYAN FOR CONGRESS
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address PO BOX 1488

City JANESVILLE	State WI	Zip Code 53547
--------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C** C00330894

Name of Employer (for Individual) Occupation (for Individual)

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
52910.64

Date of Receipt
M M M / D D D / Y Y Y Y Y Y
10 / 25 / 2016
Transaction ID : SA12.15907

Amount of Each Receipt this Period
1000.00

Memo Item
REFUND OF SREEDHAR POTARAZU CONTRIBUTION

B. NRCC
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 320 FIRST STREET SE

City WASHINGTON	State DC	Zip Code 20003
--------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C** C00002931

Name of Employer (for Individual) Occupation (for Individual)

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
711345.17

Date of Receipt
M M M / D D D / Y Y Y Y Y Y
10 / 26 / 2016
Transaction ID : SA12.15921

Amount of Each Receipt this Period
54822.95

Memo Item
XFER OF EXCESS DIST (BUILDING FUND)

C. NRCC
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 320 FIRST STREET SE

City WASHINGTON	State DC	Zip Code 20003
--------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C** C00002931

Name of Employer (for Individual) Occupation (for Individual)

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
711345.17

Date of Receipt
M M M / D D D / Y Y Y Y Y Y
11 / 03 / 2016
Transaction ID : SA12.16006

Amount of Each Receipt this Period
38692.21

Memo Item
XFER OF EXCESS DIST (BUILDING FUND)

SUBTOTAL of Receipts This Page (optional).....▶	94515.16
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 4265 OF 4311
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input checked="" type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. NRCC
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 320 FIRST STREET SE
City WASHINGTON State DC Zip Code 20003
FEC ID number of contributing federal political committee. **C** C00002931
Name of Employer (for Individual) Occupation (for Individual)
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 711345.17

Date of Receipt
M M / D D / Y Y Y Y Y Y
11 / 17 / 2016
Transaction ID : SA12.16132
Amount of Each Receipt this Period
116729.75
 Memo Item
XFER OF EXCESS DIST (BUILDING FUND)

B.
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address
City State Zip Code
FEC ID number of contributing federal political committee. **C**
Name of Employer (for Individual) Occupation (for Individual)
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼

Date of Receipt
M M / D D / Y Y Y Y Y Y
Amount of Each Receipt this Period
 Memo Item

C.
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address
City State Zip Code
FEC ID number of contributing federal political committee. **C**
Name of Employer (for Individual) Occupation (for Individual)
Receipt For: Primary General Other (specify)
Aggregate Year-to-Date ▼

Date of Receipt
M M / D D / Y Y Y Y Y Y
Amount of Each Receipt this Period
 Memo Item

SUBTOTAL of Receipts This Page (optional).....▶	116729.75
TOTAL This Period (last page this line number only).....▶	211244.91

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
Team Ryan

Full Name (Last, First, Middle Initial) A. DAY, VANESSA, , ,		Date of Disbursement MM / DD / YYYY 10 / 29 / 2016	
Mailing Address 1325 18TH STREET NW APT. 304		FEC Identification Number C [] Transaction ID : SB21B.I1594	
City WASHINGTON	State DC	Zip Code 20036	Amount of Each Disbursement this Period [] 1380.74
Purpose of Disbursement JFC SALARY		Category/Type []	
Candidate Name		Memo Item <input type="checkbox"/>	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:			

Full Name (Last, First, Middle Initial) B. DAY, VANESSA, , ,		Date of Disbursement MM / DD / YYYY 11 / 15 / 2016	
Mailing Address 1325 18TH STREET NW APT. 304		FEC Identification Number C [] Transaction ID : SB21B.I1614	
City WASHINGTON	State DC	Zip Code 20036	Amount of Each Disbursement this Period [] 1380.74
Purpose of Disbursement JFC SALARY		Category/Type []	
Candidate Name		Memo Item <input type="checkbox"/>	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:			

Full Name (Last, First, Middle Initial) C. DIVINCENTIS, ELIZABETH, , ,		Date of Disbursement MM / DD / YYYY 10 / 29 / 2016	
Mailing Address 2020 12TH ST NW #808		FEC Identification Number C [] Transaction ID : SB21B.I1594	
City WASHINGTON	State DC	Zip Code 20009	Amount of Each Disbursement this Period [] 139.96
Purpose of Disbursement JFC SALARY		Category/Type []	
Candidate Name		Memo Item <input type="checkbox"/>	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:			

SUBTOTAL of Disbursements This Page (optional).....▶	[] 2901.44
TOTAL This Period (last page this line number only).....▶	[]

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

Team Ryan

Full Name (Last, First, Middle Initial)

A. DIVINCENTIS, ELIZABETH, , ,

Mailing Address 2020 12TH ST NW #808

City
WASHINGTON

State
DC

Zip Code
20009

Purpose of Disbursement
JFC SALARY

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify) ▼

State: District:

Category/
Type

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
11			15			2016			

FEC Identification Number

C [Redacted]

Transaction ID : SB21B.I1614!

Amount of Each Disbursement this Period

[Redacted] 139.96

Memo Item

Full Name (Last, First, Middle Initial)

B. GRIBBIN, BRIDGET, K, ,

Mailing Address 60 L ST NE APT. 1016

City
WASHINGTON

State
DC

Zip Code
20002

Purpose of Disbursement
JFC SALARY

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify) ▼

State: District:

Category/
Type

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
10			29			2016			

FEC Identification Number

C [Redacted]

Transaction ID : SB21B.I15942

Amount of Each Disbursement this Period

[Redacted] 355.67

Memo Item

Full Name (Last, First, Middle Initial)

C. GRIBBIN, BRIDGET, K, ,

Mailing Address 60 L ST NE APT. 1016

City
WASHINGTON

State
DC

Zip Code
20002

Purpose of Disbursement
JFC SALARY

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify) ▼

State: District:

Category/
Type

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
11			15			2016			

FEC Identification Number

C [Redacted]

Transaction ID : SB21B.I1615

Amount of Each Disbursement this Period

[Redacted] 355.66

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

[Redacted] 851.29

[Redacted]

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
Team Ryan

Full Name (Last, First, Middle Initial) A. HAMEL, LAUREN, G., ,		Date of Disbursement MM / DD / YYYY 10 / 29 / 2016	
Mailing Address 2425 KING ST		FEC Identification Number C [REDACTED]	
City ALEXANDRIA	State VA	Zip Code 22301	Transaction ID : SB21B.I1594
Purpose of Disbursement JFC SALARY		Category/ Type	Amount of Each Disbursement this Period 870.52
Candidate Name			<input type="checkbox"/> Memo Item
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:			

Full Name (Last, First, Middle Initial) B. HAMEL, LAUREN, G., ,		Date of Disbursement MM / DD / YYYY 11 / 15 / 2016	
Mailing Address 2425 KING ST		FEC Identification Number C [REDACTED]	
City ALEXANDRIA	State VA	Zip Code 22301	Transaction ID : SB21B.I16151
Purpose of Disbursement JFC SALARY		Category/ Type	Amount of Each Disbursement this Period 870.51
Candidate Name			<input type="checkbox"/> Memo Item
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:			

Full Name (Last, First, Middle Initial) C. HILLIS, JENNIFER, , ,		Date of Disbursement MM / DD / YYYY 10 / 27 / 2016	
Mailing Address 951 E WYE LANE		FEC Identification Number C [REDACTED]	
City FOX POINT	State WI	Zip Code 53217-3649	Transaction ID : SB21B.45248
Purpose of Disbursement IN-KIND CONTRIBUTION		Category/ Type	Amount of Each Disbursement this Period 6072.32
Candidate Name			JFC EVENT CATERING
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:			

SUBTOTAL of Disbursements This Page (optional).....▶	7813.35
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

Team Ryan

Full Name (Last, First, Middle Initial)

A. HOWARD, LAURA, J, ,

Mailing Address 1825 NEW HAMPSHIRE AVE NW #404

City
WASHINGTON

State
DC

Zip Code
20006

Purpose of Disbursement
JFC SALARY

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
10			29			2016			

FEC Identification Number

C [REDACTED]

Transaction ID : SB21B.I1594

Amount of Each Disbursement this Period

[REDACTED] 335.84

Memo Item

Full Name (Last, First, Middle Initial)

B. HOWARD, LAURA, J, ,

Mailing Address 1825 NEW HAMPSHIRE AVE NW #404

City
WASHINGTON

State
DC

Zip Code
20006

Purpose of Disbursement
JFC SALARY

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
11			15			2016			

FEC Identification Number

C [REDACTED]

Transaction ID : SB21B.I16152

Amount of Each Disbursement this Period

[REDACTED] 335.83

Memo Item

Full Name (Last, First, Middle Initial)

C. KASTAN, JACOB, , ,

Mailing Address 1100 FIRST ST SE

City
WASHINGTON

State
DC

Zip Code
20003-2307

Purpose of Disbursement
JFC SALARY

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
10			29			2016			

FEC Identification Number

C [REDACTED]

Transaction ID : SB21B.I1594

Amount of Each Disbursement this Period

[REDACTED] 524.78

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

[REDACTED] 1196.45

[REDACTED]

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
Team Ryan

A. KASTAN, JACOB, , ,

Full Name (Last, First, Middle Initial)

Mailing Address 1100 FIRST ST SE

City WASHINGTON State DC Zip Code 20003-2307

Purpose of Disbursement JFC SALARY

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 11 / 15 / 2016

FEC Identification Number: C

Transaction ID : SB21B.I1615

Amount of Each Disbursement this Period: 524.79

Memo Item

B. MCDONALD, OLIVIA, M, ,

Full Name (Last, First, Middle Initial)

Mailing Address 1407 CORCORAN ST NW

City WASHINGTON State DC Zip Code 20009

Purpose of Disbursement JFC SALARY

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 10 / 29 / 2016

FEC Identification Number: C

Transaction ID : SB21B.I1594f

Amount of Each Disbursement this Period: 355.67

Memo Item

C. MCDONALD, OLIVIA, M, ,

Full Name (Last, First, Middle Initial)

Mailing Address 1407 CORCORAN ST NW

City WASHINGTON State DC Zip Code 20009

Purpose of Disbursement JFC TRAVEL EXPENSE

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 11 / 17 / 2016

FEC Identification Number: C

Transaction ID : SB21B.I1612

Amount of Each Disbursement this Period: 91.89

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶ 972.35

TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
Team Ryan

A. MCDONALD, OLIVIA, M, ,
 Full Name (Last, First, Middle Initial)
 Mailing Address 1407 CORCORAN ST NW
 City WASHINGTON State DC Zip Code 20009
 Purpose of Disbursement JFC SALARY
 Candidate Name
 Office Sought: House Senate President
 Disbursement For: Primary General Other (specify) ▼
 State: District:
 Date of Disbursement 11 / 15 / 2016
 FEC Identification Number C
Transaction ID : SB21B.I1614
 Amount of Each Disbursement this Period 355.66
 Memo Item

B. MERRICK, DAVID, , ,
 Full Name (Last, First, Middle Initial)
 Mailing Address 1819 E CAPITOL ST SE APT 301
 City WASHINGTON State DC Zip Code 20003
 Purpose of Disbursement JFC SALARY
 Candidate Name
 Office Sought: House Senate President
 Disbursement For: Primary General Other (specify) ▼
 State: District:
 Date of Disbursement 10 / 29 / 2016
 FEC Identification Number C
Transaction ID : SB21B.I15947
 Amount of Each Disbursement this Period 107.31
 Memo Item

C. MERRICK, DAVID, , ,
 Full Name (Last, First, Middle Initial)
 Mailing Address 1819 E CAPITOL ST SE APT 301
 City WASHINGTON State DC Zip Code 20003
 Purpose of Disbursement JFC SALARY
 Candidate Name
 Office Sought: House Senate President
 Disbursement For: Primary General Other (specify) ▼
 State: District:
 Date of Disbursement 11 / 15 / 2016
 FEC Identification Number C
Transaction ID : SB21B.I1614
 Amount of Each Disbursement this Period 107.30
 Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶ 570.27
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
Team Ryan

A. RODAY, ZACK, M, ,

Full Name (Last, First, Middle Initial)

Mailing Address 536 COLECRAFT CT

City ALEXANDRIA State VA Zip Code 22314

Purpose of Disbursement JFC SALARY

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 10 / 29 / 2016

FEC Identification Number: C

Transaction ID : SB21B.I1594i

Amount of Each Disbursement this Period: 368.74

Memo Item

B. RODAY, ZACK, M, ,

Full Name (Last, First, Middle Initial)

Mailing Address 536 COLECRAFT CT

City ALEXANDRIA State VA Zip Code 22314

Purpose of Disbursement JFC SALARY

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 11 / 15 / 2016

FEC Identification Number: C

Transaction ID : SB21B.I1614i

Amount of Each Disbursement this Period: 368.75

Memo Item

C. ROONEY, KATHLEEN, C., ,

Full Name (Last, First, Middle Initial)

Mailing Address 800 ADMIRALTY

City NAPLES State FL Zip Code 34102-

Purpose of Disbursement IN-KIND CONTRIBUTION

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 10 / 31 / 2016

FEC Identification Number: C

Transaction ID : SB21B.4809i

Amount of Each Disbursement this Period: 1655.04

JFC EVENT CATERING & VALET SERVICE

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶ 2392.53

TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
Team Ryan

A. SEIFERT, KEVIN, , ,

Full Name (Last, First, Middle Initial)

Mailing Address 1391 PENNSYLVANIA AVE SE #325

City WASHINGTON State DC Zip Code 20003

Purpose of Disbursement SEE MEMO ENTRIES BELOW

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 10 / 26 / 2016

FEC Identification Number: C

Transaction ID : SB21B.I1591

Amount of Each Disbursement this Period: 2732.16

Memo Item

B. CAPITOL HILL CLUB

Full Name (Last, First, Middle Initial)

Mailing Address 300 1ST ST SE

City WASHINGTON State DC Zip Code 20003

Purpose of Disbursement JFC EVENT CATERING

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 10 / 26 / 2016

FEC Identification Number: C

Transaction ID : SB21B.I1591

Amount of Each Disbursement this Period: 1371.38

Memo Item

C. UBER

Full Name (Last, First, Middle Initial)

Mailing Address 182 HOWARD ST #8

City SAN FRANCISCO State CA Zip Code 94105

Purpose of Disbursement JFC TRANSPORTATION

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 10 / 26 / 2016

FEC Identification Number: C

Transaction ID : SB21B.I1591

Amount of Each Disbursement this Period: 296.29

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶ 2732.16

TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

Team Ryan

Full Name (Last, First, Middle Initial)

A. SEIFERT, KEVIN, , ,

Mailing Address 1391 PENNSYLVANIA AVE SE #325

City
WASHINGTON

State
DC

Zip Code
20003

Purpose of Disbursement
JFC SALARY

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify) ▼

State: District:

Category/
Type

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
10			29			2016			

FEC Identification Number

C [REDACTED]

Transaction ID : SB21B.I1594!

Amount of Each Disbursement this Period

[REDACTED] 457.97

Memo Item

Full Name (Last, First, Middle Initial)

B. SEIFERT, KEVIN, , ,

Mailing Address 1391 PENNSYLVANIA AVE SE #325

City
WASHINGTON

State
DC

Zip Code
20003

Purpose of Disbursement
JFC TRAVEL EXPENSES (NO ITEMIZATION)

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify) ▼

State: District:

Category/
Type

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
11			03			2016			

FEC Identification Number

C [REDACTED]

Transaction ID : SB21B.I16002

Amount of Each Disbursement this Period

[REDACTED] 394.43

Memo Item

Full Name (Last, First, Middle Initial)

C. SEIFERT, KEVIN, , ,

Mailing Address 1391 PENNSYLVANIA AVE SE #325

City
WASHINGTON

State
DC

Zip Code
20003

Purpose of Disbursement
JFC SALARY

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify) ▼

State: District:

Category/
Type

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
11			15			2016			

FEC Identification Number

C [REDACTED]

Transaction ID : SB21B.I1614

Amount of Each Disbursement this Period

[REDACTED] 457.98

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶

[REDACTED] 1310.38

TOTAL This Period (last page this line number only)..... ▶

[REDACTED]

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

Team Ryan

Full Name (Last, First, Middle Initial)

A. ADP

Mailing Address 1 ADP BLVD

City
ROSELAND

State
NJ

Zip Code
07068

Purpose of Disbursement
JFC PAYROLL EXPENSE

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
10			21			2016			

FEC Identification Number

C [REDACTED]

Transaction ID : SB21B.I1589I

Amount of Each Disbursement this Period

[REDACTED] 90.18

Memo Item

Full Name (Last, First, Middle Initial)

B. ADP

Mailing Address 1 ADP BLVD

City
ROSELAND

State
NJ

Zip Code
07068

Purpose of Disbursement
JFC PAYROLL EXPENSE

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
10			28			2016			

FEC Identification Number

C [REDACTED]

Transaction ID : SB21B.I1593I

Amount of Each Disbursement this Period

[REDACTED] 14.00

Memo Item

Full Name (Last, First, Middle Initial)

C. ADP

Mailing Address 1 ADP BLVD

City
ROSELAND

State
NJ

Zip Code
07068

Purpose of Disbursement
JFC TAXES

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
10			29			2016			

FEC Identification Number

C [REDACTED]

Transaction ID : SB21B.I1595I

Amount of Each Disbursement this Period

[REDACTED] 1472.37

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

[REDACTED] 1576.55

[REDACTED]

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

Team Ryan

Full Name (Last, First, Middle Initial)

A. ADP

Mailing Address 1 ADP BLVD

City
ROSELAND

State
NJ

Zip Code
07068

Purpose of Disbursement
JFC PAYROLL EXPENSE

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
11			04			2016			

FEC Identification Number

C [REDACTED]

Transaction ID : SB21B.I1600
Amount of Each Disbursement this Period

[REDACTED] 90.18

Memo Item

Full Name (Last, First, Middle Initial)

B. ADP

Mailing Address 1 ADP BLVD

City
ROSELAND

State
NJ

Zip Code
07068

Purpose of Disbursement
JFC TAXES

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify)

Category/
Type

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
11			15			2016			

FEC Identification Number

C [REDACTED]

Transaction ID : SB21B.I16143
Amount of Each Disbursement this Period

[REDACTED] 1472.39

Memo Item

Full Name (Last, First, Middle Initial)

C. ADP

Mailing Address 1 ADP BLVD

City
ROSELAND

State
NJ

Zip Code
07068

Purpose of Disbursement
JFC PAYROLL EXPENSE

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
11			18			2016			

FEC Identification Number

C [REDACTED]

Transaction ID : SB21B.I1615
Amount of Each Disbursement this Period

[REDACTED] 104.18

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

[REDACTED] 1666.75

[REDACTED]

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

Team Ryan

Full Name (Last, First, Middle Initial)

A. ANEDOT

Mailing Address 3RD STREET

City
BATON ROUGE

State
LA

Zip Code
70801

Purpose of Disbursement
JFC CC TRANSACTION FEES

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Category/
Type

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
10			20			2016			

FEC Identification Number

C

Transaction ID : SB21B.I1588

Amount of Each Disbursement this Period

8495.85

Memo Item

Full Name (Last, First, Middle Initial)

B. ANEDOT

Mailing Address 3RD STREET

City
BATON ROUGE

State
LA

Zip Code
70801

Purpose of Disbursement
JFC CC TRANSACTION FEES

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Category/
Type

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
10			24			2016			

FEC Identification Number

C

Transaction ID : SB21B.I1590

Amount of Each Disbursement this Period

4238.40

Memo Item

Full Name (Last, First, Middle Initial)

C. ANEDOT

Mailing Address 3RD STREET

City
BATON ROUGE

State
LA

Zip Code
70801

Purpose of Disbursement
JFC CC TRANSACTION FEES

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Category/
Type

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
10			25			2016			

FEC Identification Number

C

Transaction ID : SB21B.I1590

Amount of Each Disbursement this Period

4098.16

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

16832.41

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
Team Ryan

A. ANEDOT

Full Name (Last, First, Middle Initial)

Mailing Address 3RD STREET

City BATON ROUGE State LA Zip Code 70801

Purpose of Disbursement JFC CC TRANSACTION FEES

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 10 / 28 / 2016

FEC Identification Number: C

Transaction ID : SB21B.I1593:

Amount of Each Disbursement this Period: 1218.10

Memo Item

B. ANEDOT

Full Name (Last, First, Middle Initial)

Mailing Address 3RD STREET

City BATON ROUGE State LA Zip Code 70801

Purpose of Disbursement JFC CC TRANSACTION FEES

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 10 / 28 / 2016

FEC Identification Number: C

Transaction ID : SB21B.I15951

Amount of Each Disbursement this Period: 6826.20

Memo Item

C. ANEDOT

Full Name (Last, First, Middle Initial)

Mailing Address 3RD STREET

City BATON ROUGE State LA Zip Code 70801

Purpose of Disbursement JFC CC TRANSACTION FEES

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 10 / 29 / 2016

FEC Identification Number: C

Transaction ID : SB21B.I1595

Amount of Each Disbursement this Period: 195.60

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶ 8239.90

TOTAL This Period (last page this line number only)..... ▶

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

Team Ryan

Full Name (Last, First, Middle Initial)

A. ANEDOT

Mailing Address 3RD STREET

City
BATON ROUGE

State
LA

Zip Code
70801

Purpose of Disbursement
JFC CC TRANSACTION FEES

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
11			01			2016			

FEC Identification Number

C [REDACTED]

Transaction ID : SB21B.I1599!

Amount of Each Disbursement this Period

[REDACTED] 2172.55

Memo Item

Full Name (Last, First, Middle Initial)

B. ANEDOT

Mailing Address 3RD STREET

City
BATON ROUGE

State
LA

Zip Code
70801

Purpose of Disbursement
JFC CC TRANSACTION FEES

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
11			02			2016			

FEC Identification Number

C [REDACTED]

Transaction ID : SB21B.I1599!

Amount of Each Disbursement this Period

[REDACTED] 1089.30

Memo Item

Full Name (Last, First, Middle Initial)

C. ANEDOT

Mailing Address 3RD STREET

City
BATON ROUGE

State
LA

Zip Code
70801

Purpose of Disbursement
JFC CC TRANSACTION FEES

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
11			03			2016			

FEC Identification Number

C [REDACTED]

Transaction ID : SB21B.I1600

Amount of Each Disbursement this Period

[REDACTED] 3820.80

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶

[REDACTED] 7082.65

TOTAL This Period (last page this line number only)..... ▶

[REDACTED]

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

Team Ryan

Full Name (Last, First, Middle Initial)

A. ANEDOT

Mailing Address 3RD STREET

City
BATON ROUGE

State
LA

Zip Code
70801

Purpose of Disbursement
JFC CC TRANSACTION FEES

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
11			07			2016			

FEC Identification Number

C [REDACTED]

Transaction ID : SB21B.I1607!

Amount of Each Disbursement this Period

[REDACTED] 572.64

Memo Item

Full Name (Last, First, Middle Initial)

B. ANEDOT

Mailing Address 3RD STREET

City
BATON ROUGE

State
LA

Zip Code
70801

Purpose of Disbursement
JFC CC TRANSACTION FEES

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
11			08			2016			

FEC Identification Number

C [REDACTED]

Transaction ID : SB21B.I1611f

Amount of Each Disbursement this Period

[REDACTED] 299.85

Memo Item

Full Name (Last, First, Middle Initial)

C. ANEDOT

Mailing Address 3RD STREET

City
BATON ROUGE

State
LA

Zip Code
70801

Purpose of Disbursement
JFC CC TRANSACTION FEES

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
11			10			2016			

FEC Identification Number

C [REDACTED]

Transaction ID : SB21B.I1613

Amount of Each Disbursement this Period

[REDACTED] 38.85

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶

[REDACTED] 911.34

TOTAL This Period (last page this line number only)..... ▶

[REDACTED]

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

Team Ryan

Full Name (Last, First, Middle Initial)

A. ANEDOT

Mailing Address 3RD STREET

City
BATON ROUGE

State
LA

Zip Code
70801

Purpose of Disbursement
JFC CC TRANSACTION FEES

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify) ▼

State: District:

Category/
Type

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
11			11			2016			

FEC Identification Number

C []
Transaction ID : SB21B.I1613
Amount of Each Disbursement this Period
[] 780.60

Memo Item

Full Name (Last, First, Middle Initial)

B. ANEDOT

Mailing Address 3RD STREET

City
BATON ROUGE

State
LA

Zip Code
70801

Purpose of Disbursement
JFC CC TRANSACTION FEES

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify) ▼

State: District:

Category/
Type

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
11			14			2016			

FEC Identification Number

C []
Transaction ID : SB21B.I1613
Amount of Each Disbursement this Period
[] 980.69

Memo Item

Full Name (Last, First, Middle Initial)

C. ANEDOT

Mailing Address 3RD STREET

City
BATON ROUGE

State
LA

Zip Code
70801

Purpose of Disbursement
JFC CC TRANSACTION FEES

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify) ▼

State: District:

Category/
Type

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
11			15			2016			

FEC Identification Number

C []
Transaction ID : SB21B.I1613
Amount of Each Disbursement this Period
[] 1.08

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

[]	[]	[]	[]	[]	[]	[]	[]	[]	[]
						1762.37			

[]	[]	[]	[]	[]	[]	[]	[]	[]	[]
-----	-----	-----	-----	-----	-----	-----	-----	-----	-----

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
Team Ryan

A. ANEDOT

Full Name (Last, First, Middle Initial)

Mailing Address 3RD STREET

City BATON ROUGE State LA Zip Code 70801

Purpose of Disbursement JFC CC TRANSACTION FEES

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 11 / 16 / 2016

FEC Identification Number: C

Transaction ID : SB21B.I1613i

Amount of Each Disbursement this Period: 3.22

Memo Item

B. ANEDOT

Full Name (Last, First, Middle Initial)

Mailing Address 3RD STREET

City BATON ROUGE State LA Zip Code 70801

Purpose of Disbursement JFC CC TRANSACTION FEES

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 11 / 17 / 2016

FEC Identification Number: C

Transaction ID : SB21B.I1613i

Amount of Each Disbursement this Period: 242.53

Memo Item

C. ANEDOT

Full Name (Last, First, Middle Initial)

Mailing Address 3RD STREET

City BATON ROUGE State LA Zip Code 70801

Purpose of Disbursement JFC CC TRANSACTION FEES

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 11 / 17 / 2016

FEC Identification Number: C

Transaction ID : SB21B.I1615

Amount of Each Disbursement this Period: 390.30

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶ 636.05

TOTAL This Period (last page this line number only)..... ▶

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

Team Ryan

Full Name (Last, First, Middle Initial)

A. ANEDOT

Mailing Address 3RD STREET

City
BATON ROUGE

State
LA

Zip Code
70801

Purpose of Disbursement
JFC CC TRANSACTION FEES

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
11			21			2016			

FEC Identification Number

C [REDACTED]

Transaction ID : SB21B.I1616'

Amount of Each Disbursement this Period

870.44

Memo Item

Full Name (Last, First, Middle Initial)

B. ANEDOT

Mailing Address 3RD STREET

City
BATON ROUGE

State
LA

Zip Code
70801

Purpose of Disbursement
JFC CC TRANSACTION FEES

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
11			22			2016			

FEC Identification Number

C [REDACTED]

Transaction ID : SB21B.I1616'

Amount of Each Disbursement this Period

97.80

Memo Item

Full Name (Last, First, Middle Initial)

C. ANEDOT

Mailing Address 3RD STREET

City
BATON ROUGE

State
LA

Zip Code
70801

Purpose of Disbursement
JFC CC TRANSACTION FEES

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
11			25			2016			

FEC Identification Number

C [REDACTED]

Transaction ID : SB21B.I1617

Amount of Each Disbursement this Period

15.00

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶

983.24

TOTAL This Period (last page this line number only)..... ▶

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**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

Team Ryan

Full Name (Last, First, Middle Initial)

A. ANEDOT

Mailing Address 3RD STREET

City
BATON ROUGE

State
LA

Zip Code
70801

Purpose of Disbursement
JFC CC TRANSACTION FEES

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Category/
Type

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
1	1	1		2	4			2	0	1	6		

FEC Identification Number

C

Transaction ID : SB21B.I1618'

Amount of Each Disbursement this Period

293.40

Memo Item

Full Name (Last, First, Middle Initial)

B. ANEDOT

Mailing Address 3RD STREET

City
BATON ROUGE

State
LA

Zip Code
70801

Purpose of Disbursement
JFC CC TRANSACTION FEES

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify)

State: District:

Category/
Type

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
1	1	1		2	8			2	0	1	6		

FEC Identification Number

C

Transaction ID : SB21B.I16182

Amount of Each Disbursement this Period

53.33

Memo Item

Full Name (Last, First, Middle Initial)

C. ASPECT CONSULTING

Mailing Address 8401 EXCELSIOR DR STE 103

City
MADISON

State
WI

Zip Code
53717

Purpose of Disbursement
JFC DIRECT MAIL CAGING

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Category/
Type

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
1	1	1		0	4			2	0	1	6		

FEC Identification Number

C

Transaction ID : SB21B.I1601

Amount of Each Disbursement this Period

6289.09

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

6635.82

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

Team Ryan

Full Name (Last, First, Middle Initial)

A. CAMPAIGN CAPITAL GROUP, LLC

Mailing Address 138 CONANT ST 2ND FL

City
BEVERLY

State
MA

Zip Code
01915

Purpose of Disbursement
JFC FUNDRAISING CONSULTING

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify) ▼

State: District:

Category/
Type

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
11			22			2016			

FEC Identification Number

C []
Transaction ID : SB21B.I1616
 Amount of Each Disbursement this Period
 [] 7500.00

Memo Item

Full Name (Last, First, Middle Initial)

B. CAPITAL GIFTS & AWARDS INC.

Mailing Address 2012 RENARD CT UNIT K

City
ANNAPOLIS

State
MD

Zip Code
21401

Purpose of Disbursement
JFC BRANDED MERCHANDISE

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify) ▼

State: District:

Category/
Type

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
11			08			2016			

FEC Identification Number

C []
Transaction ID : SB21B.I1607
 Amount of Each Disbursement this Period
 [] 1778.66

Memo Item

Full Name (Last, First, Middle Initial)

C. CMDI

Mailing Address 7704 LEESBURG PIKE

City
FALLS CHURCH

State
VA

Zip Code
22043

Purpose of Disbursement
JFC SOFTWARE

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify) ▼

State: District:

Category/
Type

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
11			07			2016			

FEC Identification Number

C []
Transaction ID : SB21B.I1603
 Amount of Each Disbursement this Period
 [] 1717.87

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

[]	[]	[]	[]	[]	[]	[]	[]	[]	[]
						78496.53			

[]	[]	[]	[]	[]	[]	[]	[]	[]	[]
-----	-----	-----	-----	-----	-----	-----	-----	-----	-----

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

Team Ryan

Full Name (Last, First, Middle Initial)

A. CONSERVATIVE CONNECTOR

Mailing Address PO BOX 952

City
GRANDVILLE

State
MI

Zip Code
49468

Purpose of Disbursement
JFC LIST ACQUISITION

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify) ▼

State: District:

Category/
Type

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
10			26			2016			

FEC Identification Number

C [REDACTED]

Transaction ID : SB21B.I1591'
Amount of Each Disbursement this Period

[REDACTED] 258360.00

Memo Item

Full Name (Last, First, Middle Initial)

B. CONSERVATIVE CONNECTOR

Mailing Address PO BOX 952

City
GRANDVILLE

State
MI

Zip Code
49468

Purpose of Disbursement
JFC LIST ACQUISITION

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify) ▼

State: District:

Category/
Type

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
11			07			2016			

FEC Identification Number

C [REDACTED]

Transaction ID : SB21B.I16034
Amount of Each Disbursement this Period

[REDACTED] 235105.00

Memo Item

Full Name (Last, First, Middle Initial)

C. CONSERVATIVE CONNECTOR

Mailing Address PO BOX 952

City
GRANDVILLE

State
MI

Zip Code
49468

Purpose of Disbursement
JFC LIST RENTAL

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify) ▼

State: District:

Category/
Type

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
11			22			2016			

FEC Identification Number

C [REDACTED]

Transaction ID : SB21B.I1616
Amount of Each Disbursement this Period

[REDACTED] 20800.00

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

[REDACTED] 514265.00

[REDACTED]

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

Team Ryan

Full Name (Last, First, Middle Initial)

A. DURABLE SAFETY PRODUCTS

Mailing Address 455 SPECIALITY PT

City
SANFORD

State
FL

Zip Code
32771

Purpose of Disbursement
JFC BRANDED APPAREL

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify) ▼

State: District:

Category/
Type

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
10			31			2016			

FEC Identification Number

C

Transaction ID : SB21B.I1598

Amount of Each Disbursement this Period

6076.80

Memo Item

Full Name (Last, First, Middle Initial)

B. DURABLE SAFETY PRODUCTS

Mailing Address 455 SPECIALITY PT

City
SANFORD

State
FL

Zip Code
32771

Purpose of Disbursement
JFC BRANDED APPAREL

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify)

State: District:

Category/
Type

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
11			21			2016			

FEC Identification Number

C

Transaction ID : SB21B.I1615

Amount of Each Disbursement this Period

585.02

Memo Item

Full Name (Last, First, Middle Initial)

C. HACHETTE BOOK GROUP

Mailing Address PO BOX 8828

City
BOSTON

State
MA

Zip Code
02114

Purpose of Disbursement
JFC DONOR GIFTS (ROYALTY EXCLUDED BOOKS)

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify) ▼

State: District:

Category/
Type

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
10			26			2016			

FEC Identification Number

C

Transaction ID : SB21B.I1592

Amount of Each Disbursement this Period

6295.02

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

12956.84

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

Team Ryan

Full Name (Last, First, Middle Initial)

A. HOLTZMAN VOGEL JOSEFIK PLLC

Mailing Address 45 NORTH HILL DRIVE
STE. 100

City
WARRENTON

State
VA

Zip Code
20186

Purpose of Disbursement
JFC LEGAL SERVICES

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
10			26			2016			

FEC Identification Number

C [REDACTED]

Transaction ID : SB21B.I1591I

Amount of Each Disbursement this Period

[REDACTED] 5000.00

Memo Item

Full Name (Last, First, Middle Initial)

B. HOLTZMAN VOGEL JOSEFIK PLLC

Mailing Address 45 NORTH HILL DRIVE
STE. 100

City
WARRENTON

State
VA

Zip Code
20186

Purpose of Disbursement
JFC LEGAL SERVICES

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
11			04			2016			

FEC Identification Number

C [REDACTED]

Transaction ID : SB21B.I1603I

Amount of Each Disbursement this Period

[REDACTED] 5000.00

Memo Item

Full Name (Last, First, Middle Initial)

C. ISTREAM FINANCIAL SERVICES

Mailing Address 13555 BISHOPS CT

City
BROOKFIELD

State
WI

Zip Code
53005

Purpose of Disbursement
JFC SOFTWARE

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
11			04			2016			

FEC Identification Number

C [REDACTED]

Transaction ID : SB21B.I1600

Amount of Each Disbursement this Period

[REDACTED] 606.17

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

[REDACTED] 10606.17

[REDACTED]

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

Team Ryan

Full Name (Last, First, Middle Initial)

A. KWIK TRIP

Mailing Address PO BOX 718

City
MILWAUKEE

State
WI

Zip Code
53201-0718

Purpose of Disbursement
JFC PRINTING

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
1	1		0	3		2	0	1	6

FEC Identification Number

C [REDACTED]

Transaction ID : SB21B.I1600:
Amount of Each Disbursement this Period

[REDACTED] 63.36

Memo Item

Full Name (Last, First, Middle Initial)

B. MUSTARD SEED INTERACTIVE LLC

Mailing Address 435 E MAIN ST STE 250

City
GREENWOOD

State
IN

Zip Code
46143

Purpose of Disbursement
JFC LIST ACQUISITION

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
1	0		2	6		2	0	1	6

FEC Identification Number

C [REDACTED]

Transaction ID : SB21B.I15915:
Amount of Each Disbursement this Period

[REDACTED] 4000.00

Memo Item

Full Name (Last, First, Middle Initial)

C. MUSTARD SEED INTERACTIVE LLC

Mailing Address 435 E MAIN ST STE 250

City
GREENWOOD

State
IN

Zip Code
46143

Purpose of Disbursement
JFC LIST ACQUISITION

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
1	0		2	7		2	0	1	6

FEC Identification Number

C [REDACTED]

Transaction ID : SB21B.I1592:
Amount of Each Disbursement this Period

[REDACTED] 209500.00

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

2	1	3	5	6	3	6	3	6
---	---	---	---	---	---	---	---	---

2	1	3	5	6	3	6	3	6
---	---	---	---	---	---	---	---	---

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
Team Ryan

Full Name (Last, First, Middle Initial)
A. PERFECT IMAGE PRINTING

Mailing Address 5616 COLUMBIA PIKE

City FALLS CHURCH State VA Zip Code 22041

Purpose of Disbursement JFC PRINTING

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement: 10 / 26 / 2016

FEC Identification Number: C

Transaction ID : SB21B.I15911

Amount of Each Disbursement this Period: 816.20

Memo Item

Full Name (Last, First, Middle Initial)
B. PROFESSIONAL DATA SERVICES

Mailing Address 824 S MILLEDGE AVE STE. 101

City ATHENS State GA Zip Code 30605

Purpose of Disbursement JFC COMPLIANCE SERVICES

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement: 10 / 26 / 2016

FEC Identification Number: C

Transaction ID : SB21B.I15917

Amount of Each Disbursement this Period: 4099.74

Memo Item

Full Name (Last, First, Middle Initial)
C. PUBLIC OPINION STRATEGIES

Mailing Address 214 N FAYETTE STREET

City ALEXANDRIA State VA Zip Code 22314-2433

Purpose of Disbursement JFC POLLING

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement: 11 / 22 / 2016

FEC Identification Number: C

Transaction ID : SB21B.I1616

Amount of Each Disbursement this Period: 36000.00

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶ 40915.94

TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

Team Ryan

Full Name (Last, First, Middle Initial)

A. RD MARKETING LLC

Mailing Address PO BOX 111012

City
MEMPHIS

State
TN

Zip Code
38111

Purpose of Disbursement
JFC LIST ACQUISITION

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Category/
Type

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
1	0			2	6			2	0	1	6		

FEC Identification Number

C [REDACTED]

Transaction ID : SB21B.I1591i

Amount of Each Disbursement this Period

[REDACTED] 34943.00

Memo Item

Full Name (Last, First, Middle Initial)

B. RD MARKETING LLC

Mailing Address PO BOX 111012

City
MEMPHIS

State
TN

Zip Code
38111

Purpose of Disbursement
JFC LIST ACQUISITION

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Category/
Type

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
1	0			2	7			2	0	1	6		

FEC Identification Number

C [REDACTED]

Transaction ID : SB21B.I1592i

Amount of Each Disbursement this Period

[REDACTED] 3700.00

Memo Item

Full Name (Last, First, Middle Initial)

C. RED CURVE SOLUTIONS

Mailing Address 138 CONANT ST 2ND FL

City
BEVERLY

State
MA

Zip Code
01915

Purpose of Disbursement
JFC FUNDRAISING CONSULTING

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Category/
Type

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
1	1			0	1			2	0	1	6		

FEC Identification Number

C [REDACTED]

Transaction ID : SB21B.I1599

Amount of Each Disbursement this Period

[REDACTED] 19750.00

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

[REDACTED] 58393.00

[REDACTED]

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
Team Ryan

A. RIGHT COUNTRY LISTS

Full Name (Last, First, Middle Initial)
Mailing Address 117 N ST ASAPH ST

City ALEXANDRIA State VA Zip Code 22314

Purpose of Disbursement JFC LIST ACQUISITION

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement: 10 / 27 / 2016

FEC Identification Number: C
Transaction ID : SB21B.I1592
Amount of Each Disbursement this Period: 208250.00

Memo Item

B. RIGHT COUNTRY LISTS

Full Name (Last, First, Middle Initial)
Mailing Address 117 N ST ASAPH ST

City ALEXANDRIA State VA Zip Code 22314

Purpose of Disbursement JFC LIST ACQUISITION

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement: 11 / 07 / 2016

FEC Identification Number: C
Transaction ID : SB21B.I16035
Amount of Each Disbursement this Period: 49128.00

Memo Item

C. RIGHT COUNTRY LISTS

Full Name (Last, First, Middle Initial)
Mailing Address 117 N ST ASAPH ST

City ALEXANDRIA State VA Zip Code 22314

Purpose of Disbursement JFC LIST ACQUISITION

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement: 11 / 22 / 2016

FEC Identification Number: C
Transaction ID : SB21B.I1616
Amount of Each Disbursement this Period: 116010.00

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶ 373388.00

TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
Team Ryan

Full Name (Last, First, Middle Initial)

A. SCM ASSOCIATES

Mailing Address 1283 MAIN ST

City DUBLIN State NH Zip Code 34448

Purpose of Disbursement
JFC DIRECT MARKETING

Candidate Name

Office Sought: House Senate President
Disbursement For: Primary General Other (specify) ▼
State: District:

Date of Disbursement

MM / DD / YYYY
11 / 01 / 2016

FEC Identification Number

C
Transaction ID : SB21B.I1599
Amount of Each Disbursement this Period
19838.99

Memo Item

Full Name (Last, First, Middle Initial)

B. STRATEGIC ADVANCE SERVICES

Mailing Address 611 PENNSYLVANIA AVE SE #267

City WASHINGTON State DC Zip Code 20003

Purpose of Disbursement
JFC ADVANCE, EVENT & TRAVEL SERVICES

Candidate Name

Office Sought: House Senate President
Disbursement For: Primary General Other (specify) ▼
State: District:

Date of Disbursement

MM / DD / YYYY
11 / 02 / 2016

FEC Identification Number

C
Transaction ID : SB21B.I1599
Amount of Each Disbursement this Period
41373.68

Memo Item

Full Name (Last, First, Middle Initial)

C. STRATEGIC ADVANCE SERVICES

Mailing Address 611 PENNSYLVANIA AVE SE #267

City WASHINGTON State DC Zip Code 20003

Purpose of Disbursement
JFC TRAVEL & EVENT SERVICES

Candidate Name

Office Sought: House Senate President
Disbursement For: Primary General Other (specify) ▼
State: District:

Date of Disbursement

MM / DD / YYYY
11 / 17 / 2016

FEC Identification Number

C
Transaction ID : SB21B.I1612
Amount of Each Disbursement this Period
258862.28

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

320074.95

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

Team Ryan

Full Name (Last, First, Middle Initial)

A. STUART & ASSOCIATES

Mailing Address 15919 INDUSTRIAL PARKWAY

City
CLEVELAND

State
OH

Zip Code
44135

Purpose of Disbursement
JFC BRANDED MERCHANDISE

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify) ▼

State: District:

Category/
Type

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
10		27		2016

FEC Identification Number

C [REDACTED]

Transaction ID : SB21B.I1592!

Amount of Each Disbursement this Period

[REDACTED] 877.50

Memo Item

Full Name (Last, First, Middle Initial)

B. STUART & ASSOCIATES

Mailing Address 15919 INDUSTRIAL PARKWAY

City
CLEVELAND

State
OH

Zip Code
44135

Purpose of Disbursement
JFC BRANDED MERCHANDISE

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify)

State: District:

Category/
Type

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
11		22		2016

FEC Identification Number

C [REDACTED]

Transaction ID : SB21B.I1616c

Amount of Each Disbursement this Period

[REDACTED] 149.88

Memo Item

Full Name (Last, First, Middle Initial)

C. SUNTRUST BANK

Mailing Address P.O. BOX 4418

City
ATLANTA

State
GA

Zip Code
30302

Purpose of Disbursement
JFC CC TRANSACTION FEES

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify) ▼

State: District:

Category/
Type

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
10		21		2016

FEC Identification Number

C [REDACTED]

Transaction ID : SB21B.I1590

Amount of Each Disbursement this Period

[REDACTED] 285.30

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

[REDACTED] 1312.68

[REDACTED]

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

Team Ryan

Full Name (Last, First, Middle Initial)

A. SUNTRUST BANK

Mailing Address P.O. BOX 4418

City
ATLANTA

State
GA

Zip Code
30302

Purpose of Disbursement
JFC BANK FEE

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
10			28			2016			

FEC Identification Number

C [REDACTED]

Transaction ID : SB21B.I1593f

Amount of Each Disbursement this Period

[REDACTED] 12.50

Memo Item

Full Name (Last, First, Middle Initial)

B. SUNTRUST BANK

Mailing Address P.O. BOX 4418

City
ATLANTA

State
GA

Zip Code
30302

Purpose of Disbursement
JFC BANK FEE

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
10			31			2016			

FEC Identification Number

C [REDACTED]

Transaction ID : SB21B.I1598f

Amount of Each Disbursement this Period

[REDACTED] 185.00

Memo Item

Full Name (Last, First, Middle Initial)

C. SUNTRUST BANK

Mailing Address P.O. BOX 4418

City
ATLANTA

State
GA

Zip Code
30302

Purpose of Disbursement
SEE MEMO ENTRIES BELOW

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
11			11			2016			

FEC Identification Number

C [REDACTED]

Transaction ID : SB21B.I1611

Amount of Each Disbursement this Period

[REDACTED] 12116.54

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

[REDACTED] 12314.04

[REDACTED]

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

Team Ryan

Full Name (Last, First, Middle Initial)

A. 50-50 FACTORY OUTLET

Mailing Address 3010 WOODLANE DRIVE

City
JANESVILLE

State
WI

Zip Code
53545-0214

Purpose of Disbursement
JFC EVENT SUPPLIES

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify) ▼

State: District:

Category/
Type

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
11			11			2016			

FEC Identification Number

C [REDACTED]

Transaction ID : SB21B.I1611i

Amount of Each Disbursement this Period

[REDACTED] 265.66

Memo Item

Full Name (Last, First, Middle Initial)

B. BLOOMNATION

Mailing Address 1316 3RD ST STE 301

City
SANTA MONICA

State
CA

Zip Code
90401

Purpose of Disbursement
JFC EVENT SUPPLIES

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify) ▼

State: District:

Category/
Type

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
11			11			2016			

FEC Identification Number

C [REDACTED]

Transaction ID : SB21B.I1611i

Amount of Each Disbursement this Period

[REDACTED] 284.64

Memo Item

Full Name (Last, First, Middle Initial)

C. FEDEX

Mailing Address 3640 HACKS CROSS RD

City
MEMPHIS

State
TN

Zip Code
38125

Purpose of Disbursement
JFC PRINTING & SHIPPING

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify) ▼

State: District:

Category/
Type

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
11			11			2016			

FEC Identification Number

C [REDACTED]

Transaction ID : SB21B.I1612

Amount of Each Disbursement this Period

[REDACTED] 9024.91

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

[REDACTED] 0.00

[REDACTED]

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

Team Ryan

Full Name (Last, First, Middle Initial)

A. FLOWERMAID

Mailing Address 4201 MCCONNELL BLVD

City
LOS ANGELES

State
CA

Zip Code
90066

Purpose of Disbursement
JFC EVENT SUPPLIES

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify) ▼

State: District:

Category/
Type

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
11			11			2016			

FEC Identification Number

C

Transaction ID : SB21B.I1612'

Amount of Each Disbursement this Period

347.12

Memo Item

Full Name (Last, First, Middle Initial)

B. MAIDS IN BLACK

Mailing Address 2607 DOUGLASS ROAD SE APT 202

City
WASHINGTON

State
DC

Zip Code
20020

Purpose of Disbursement
JFC OFFICE CLEANING

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify)

State: District:

Category/
Type

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
11			11			2016			

FEC Identification Number

C

Transaction ID : SB21B.I16122

Amount of Each Disbursement this Period

119.00

Memo Item

Full Name (Last, First, Middle Initial)

C. MICHAELS

Mailing Address 2900 DEERFIELD DRIVE
SUITE 4

City
JANESVILLE

State
WI

Zip Code
53546-3453

Purpose of Disbursement
JFC EVENT SUPPLIES

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify) ▼

State: District:

Category/
Type

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
11			11			2016			

FEC Identification Number

C

Transaction ID : SB21B.I1612

Amount of Each Disbursement this Period

401.11

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

0.00

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

Team Ryan

Full Name (Last, First, Middle Initial)

A. STAPLES

Mailing Address 500 STAPLES DR

City
FRAMINGHAM

State
MA

Zip Code
17024

Purpose of Disbursement
JFC OFFICE SUPPLIES

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
11			11			2016			

FEC Identification Number

C [REDACTED]

Transaction ID : SB21B.I1612!

Amount of Each Disbursement this Period

[REDACTED] 323.37

Memo Item

Full Name (Last, First, Middle Initial)

B. TORTILLA COAST

Mailing Address 400 FIRST STREET NE

City
WASHINGTON

State
DC

Zip Code
20003

Purpose of Disbursement
JFC MEETING EXPENSE

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
11			11			2016			

FEC Identification Number

C [REDACTED]

Transaction ID : SB21B.I1612!

Amount of Each Disbursement this Period

[REDACTED] 84.68

Memo Item

Full Name (Last, First, Middle Initial)

C. USPS

Mailing Address 441 2ND ST SW

City
WASHINGTON

State
DC

Zip Code
20515

Purpose of Disbursement
JFC POSTAGE

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
11			11			2016			

FEC Identification Number

C [REDACTED]

Transaction ID : SB21B.I1612!

Amount of Each Disbursement this Period

[REDACTED] 407.19

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶

[REDACTED] 0.00

TOTAL This Period (last page this line number only)..... ▶

[REDACTED]

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

Team Ryan

Full Name (Last, First, Middle Initial)

A. SUNTRUST BANK

Mailing Address P.O. BOX 4418

City
ATLANTA

State
GA

Zip Code
30302

Purpose of Disbursement
JFC BANK FEE

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M M / D D / Y Y Y Y Y
11 / 17 / 2016

FEC Identification Number

C
Transaction ID : SB21B.I1615!
Amount of Each Disbursement this Period
12.50

Memo Item

Full Name (Last, First, Middle Initial)

B. SUNTRUST BANK

Mailing Address P.O. BOX 4418

City
ATLANTA

State
GA

Zip Code
30302

Purpose of Disbursement
JFC BANK FEE

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M M / D D / Y Y Y Y Y
11 / 21 / 2016

FEC Identification Number

C
Transaction ID : SB21B.I1616C
Amount of Each Disbursement this Period
407.15

Memo Item

Full Name (Last, First, Middle Initial)

C. TARGETED VICTORY

Mailing Address 1033 NORTH FAIRFAX ST. STE. 400

City
ALEXANDRIA

State
VA

Zip Code
22314

Purpose of Disbursement
JFC CC TRANSACTION FEES

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M M / D D / Y Y Y Y Y
10 / 20 / 2016

FEC Identification Number

C
Transaction ID : SB21B.I1589
Amount of Each Disbursement this Period
4042.74

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶

4462.39

TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

Team Ryan

Full Name (Last, First, Middle Initial)

A. TARGETED VICTORY

Mailing Address 1033 NORTH FAIRFAX ST. STE. 400

City
ALEXANDRIA

State
VA

Zip Code
22314

Purpose of Disbursement
JFC CC TRANSACTION FEES

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify) ▼

State: District:

Category/
Type

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
10			21			2016			

FEC Identification Number

C [REDACTED]

Transaction ID : SB21B.I1589
Amount of Each Disbursement this Period

[REDACTED] 5099.04

Memo Item

Full Name (Last, First, Middle Initial)

B. TARGETED VICTORY

Mailing Address 1033 NORTH FAIRFAX ST. STE. 400

City
ALEXANDRIA

State
VA

Zip Code
22314

Purpose of Disbursement
JFC CC TRANSACTION FEES

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify) ▼

State: District:

Category/
Type

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
10			22			2016			

FEC Identification Number

C [REDACTED]

Transaction ID : SB21B.I1589
Amount of Each Disbursement this Period

[REDACTED] 4166.63

Memo Item

Full Name (Last, First, Middle Initial)

C. TARGETED VICTORY

Mailing Address 1033 NORTH FAIRFAX ST. STE. 400

City
ALEXANDRIA

State
VA

Zip Code
22314

Purpose of Disbursement
JFC CC TRANSACTION FEES

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify) ▼

State: District:

Category/
Type

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
10			25			2016			

FEC Identification Number

C [REDACTED]

Transaction ID : SB21B.I1590
Amount of Each Disbursement this Period

[REDACTED] 2768.01

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

[REDACTED] 12033.68

[REDACTED]

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

Team Ryan

Full Name (Last, First, Middle Initial)

A. TARGETED VICTORY

Mailing Address 1033 NORTH FAIRFAX ST. STE. 400

City ALEXANDRIA State VA Zip Code 22314

Purpose of Disbursement JFC WEB ADVERTISING & LIST ACQUISTION

Candidate Name

Office Sought: House Senate President
 Disbursement For: Primary General Other (specify) ▼
 State: District:

Date of Disbursement

MM / DD / YYYY
10 / 26 / 2016

FEC Identification Number

C
Transaction ID : SB21B.I1591!
 Amount of Each Disbursement this Period
 82748.87

Memo Item

Full Name (Last, First, Middle Initial)

B. TARGETED VICTORY

Mailing Address 1033 NORTH FAIRFAX ST. STE. 400

City ALEXANDRIA State VA Zip Code 22314

Purpose of Disbursement JFC DIGITAL CONSULTING

Candidate Name

Office Sought: House Senate President
 Disbursement For: Primary General Other (specify) ▼
 State: District:

Date of Disbursement

MM / DD / YYYY
10 / 27 / 2016

FEC Identification Number

C
Transaction ID : SB21B.I1592!
 Amount of Each Disbursement this Period
 7945.00

Memo Item

Full Name (Last, First, Middle Initial)

C. TARGETED VICTORY

Mailing Address 1033 NORTH FAIRFAX ST. STE. 400

City ALEXANDRIA State VA Zip Code 22314

Purpose of Disbursement JFC CC TRANSACTION FEES

Candidate Name

Office Sought: House Senate President
 Disbursement For: Primary General Other (specify) ▼
 State: District:

Date of Disbursement

MM / DD / YYYY
10 / 28 / 2016

FEC Identification Number

C
Transaction ID : SB21B.I1593
 Amount of Each Disbursement this Period
 5541.29

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

96235.16

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

Team Ryan

Full Name (Last, First, Middle Initial)

A. TARGETED VICTORY

Mailing Address 1033 NORTH FAIRFAX ST. STE. 400

City
ALEXANDRIA

State
VA

Zip Code
22314

Purpose of Disbursement
JFC CC TRANSACTION FEES

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify) ▼

State: District:

Category/
Type

Date of Disbursement

/ /

FEC Identification Number

Transaction ID : SB21B.I1593
Amount of Each Disbursement this Period

Memo Item

Full Name (Last, First, Middle Initial)

B. TARGETED VICTORY

Mailing Address 1033 NORTH FAIRFAX ST. STE. 400

City
ALEXANDRIA

State
VA

Zip Code
22314

Purpose of Disbursement
JFC CC TRANSACTION FEES

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify) ▼

State: District:

Category/
Type

Date of Disbursement

/ /

FEC Identification Number

Transaction ID : SB21B.I1593
Amount of Each Disbursement this Period

Memo Item

Full Name (Last, First, Middle Initial)

C. TARGETED VICTORY

Mailing Address 1033 NORTH FAIRFAX ST. STE. 400

City
ALEXANDRIA

State
VA

Zip Code
22314

Purpose of Disbursement
JFC CC TRANSACTION FEES

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify) ▼

State: District:

Category/
Type

Date of Disbursement

/ /

FEC Identification Number

Transaction ID : SB21B.I1595
Amount of Each Disbursement this Period

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
Team Ryan

A. TARGETED VICTORY

Full Name (Last, First, Middle Initial)
Mailing Address 1033 NORTH FAIRFAX ST. STE. 400

City ALEXANDRIA State VA Zip Code 22314

Purpose of Disbursement JFC CC TRANSACTION FEES

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement: 11 / 01 / 2016

FEC Identification Number: C
Transaction ID : SB21B.I15994
Amount of Each Disbursement this Period: 6012.60

Memo Item

B. TARGETED VICTORY

Full Name (Last, First, Middle Initial)
Mailing Address 1033 NORTH FAIRFAX ST. STE. 400

City ALEXANDRIA State VA Zip Code 22314

Purpose of Disbursement JFC CC TRANSACTION FEES

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement: 11 / 02 / 2016

FEC Identification Number: C
Transaction ID : SB21B.I15994
Amount of Each Disbursement this Period: 12006.06

Memo Item

C. TARGETED VICTORY

Full Name (Last, First, Middle Initial)
Mailing Address 1033 NORTH FAIRFAX ST. STE. 400

City ALEXANDRIA State VA Zip Code 22314

Purpose of Disbursement JFC CC TRANSACTION FEES

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement: 11 / 03 / 2016

FEC Identification Number: C
Transaction ID : SB21B.I15994
Amount of Each Disbursement this Period: 6847.98

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶ 24866.64

TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

Team Ryan

Full Name (Last, First, Middle Initial)

A. TARGETED VICTORY

Mailing Address 1033 NORTH FAIRFAX ST. STE. 400

City
ALEXANDRIA

State
VA

Zip Code
22314

Purpose of Disbursement
JFC LIST ACQUISITION & DIGITAL CONSULTING

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
1	1			0	7			2	0	1	6		

FEC Identification Number

C []
Transaction ID : SB21B.I1603I
 Amount of Each Disbursement this Period
 [] 314499.33

Memo Item

Full Name (Last, First, Middle Initial)

B. TARGETED VICTORY

Mailing Address 1033 N FAIRFAX STREET
SUITE 400

City
ALEXANDRIA

State
VA

Zip Code
22314-1540

Purpose of Disbursement
JFC CC TRANSACTION FEES

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
1	1			0	8			2	0	1	6		

FEC Identification Number

C []
Transaction ID : SB21B.I1607I
 Amount of Each Disbursement this Period
 [] 4386.05

Memo Item

Full Name (Last, First, Middle Initial)

C. TARGETED VICTORY

Mailing Address 1033 N FAIRFAX STREET
SUITE 400

City
ALEXANDRIA

State
VA

Zip Code
22314-1540

Purpose of Disbursement
JFC CC TRANSACTION FEES

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
1	1			0	7			2	0	1	6		

FEC Identification Number

C []
Transaction ID : SB21B.I1613I
 Amount of Each Disbursement this Period
 [] 4366.08

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶

[] 323251.46

TOTAL This Period (last page this line number only)..... ▶

[]

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

Team Ryan

Full Name (Last, First, Middle Initial)

A. TARGETED VICTORY

Mailing Address 1033 N FAIRFAX STREET
SUITE 400

City
ALEXANDRIA

State
VA

Zip Code
22314-1540

Purpose of Disbursement
JFC CC TRANSACTION FEES

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
11			08			2016			

FEC Identification Number

C
Transaction ID : SB21B.I16141
Amount of Each Disbursement this Period

11422.66

Memo Item

Full Name (Last, First, Middle Initial)

B. TARGETED VICTORY

Mailing Address 1033 N FAIRFAX STREET
SUITE 400

City
ALEXANDRIA

State
VA

Zip Code
22314-1540

Purpose of Disbursement
JFC CC TRANSACTION FEES

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
11			09			2016			

FEC Identification Number

C
Transaction ID : SB21B.I16141
Amount of Each Disbursement this Period

9705.41

Memo Item

Full Name (Last, First, Middle Initial)

C. TARGETED VICTORY

Mailing Address 1033 N FAIRFAX STREET
SUITE 400

City
ALEXANDRIA

State
VA

Zip Code
22314-1540

Purpose of Disbursement
JFC CC TRANSACTION FEES

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
11			10			2016			

FEC Identification Number

C
Transaction ID : SB21B.I16141
Amount of Each Disbursement this Period

2242.26

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

23370.33

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

Team Ryan

Full Name (Last, First, Middle Initial)

A. TARGETED VICTORY

Mailing Address 1033 N FAIRFAX STREET
SUITE 400

City
ALEXANDRIA

State
VA

Zip Code
22314-1540

Purpose of Disbursement
JFC CC TRANSACTION FEES

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
1	1			1	8			2	0	1	6		

FEC Identification Number

C

Transaction ID : SB21B.I1615I

Amount of Each Disbursement this Period

25.30

Memo Item

Full Name (Last, First, Middle Initial)

B. TARGETED VICTORY

Mailing Address 1033 N FAIRFAX STREET
SUITE 400

City
ALEXANDRIA

State
VA

Zip Code
22314-1540

Purpose of Disbursement
JFC CC TRANSACTION FEES

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
1	1			2	1			2	0	1	6		

FEC Identification Number

C

Transaction ID : SB21B.I1615I

Amount of Each Disbursement this Period

0.95

Memo Item

Full Name (Last, First, Middle Initial)

C. TARGETED VICTORY

Mailing Address 1033 N FAIRFAX STREET
SUITE 400

City
ALEXANDRIA

State
VA

Zip Code
22314-1540

Purpose of Disbursement
JFC DIGITAL CONSULTING & LIST RENTAL

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
1	1			2	2			2	0	1	6		

FEC Identification Number

C

Transaction ID : SB21B.I1616I

Amount of Each Disbursement this Period

75781.56

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

75807.81

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input checked="" type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

Team Ryan

Full Name (Last, First, Middle Initial)

A. RYAN FOR CONGRESS

Mailing Address PO BOX 1488

City
JANESVILLE

State
WI

Zip Code
53547

Purpose of Disbursement
TRANSFER OF NET JFC FUNDS

Candidate Name

RYAN, PAUL, D, ,

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: WI District: 01

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
11			07			2016			

FEC Identification Number

C C00330894

Transaction ID : SB22.I16037

Amount of Each Disbursement this Period

221787.14

Memo Item

Full Name (Last, First, Middle Initial)

B. RYAN FOR CONGRESS

Mailing Address PO BOX 1488

City
JANESVILLE

State
WI

Zip Code
53547

Purpose of Disbursement
TRANSFER OF NET JFC FUNDS

Candidate Name

RYAN, PAUL, D, ,

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: WI District: 01

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
11			08			2016			

FEC Identification Number

C C00330894

Transaction ID : SB22.I16062

Amount of Each Disbursement this Period

306455.85

Memo Item

Full Name (Last, First, Middle Initial)

C. RYAN FOR CONGRESS

Mailing Address PO BOX 1488

City
JANESVILLE

State
WI

Zip Code
53547

Purpose of Disbursement
TRANSFER OF NET JFC FUNDS

Candidate Name

RYAN, PAUL, D, ,

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: WI District: 01

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
11			28			2016			

FEC Identification Number

C C00330894

Transaction ID : SB22.I16243

Amount of Each Disbursement this Period

48833.03

Memo Item

SUBTOTAL of Disbursements This Page (optional).....▶

TOTAL This Period (last page this line number only).....▶

577076.02

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input checked="" type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
Team Ryan

A. NRCC

Full Name (Last, First, Middle Initial)

Mailing Address 320 FIRST STREET SE

City WASHINGTON State DC Zip Code 20003

Purpose of Disbursement TRANSFER OF NET JFC FUNDS

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 10 / 27 / 2016

FEC Identification Number: C00002931

Transaction ID : SB22.I15929

Amount of Each Disbursement this Period: 1575285.75

Memo Item

B. NRCC

Full Name (Last, First, Middle Initial)

Mailing Address 320 FIRST STREET SE

City WASHINGTON State DC Zip Code 20003

Purpose of Disbursement TRANSFER OF NET JFC FUNDS (LEGAL PROCEEDINGS FUND)

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 10 / 27 / 2016

FEC Identification Number: C00002931

Transaction ID : SB22.I15930

Amount of Each Disbursement this Period: 249636.15

Memo Item

C. NRCC

Full Name (Last, First, Middle Initial)

Mailing Address 320 FIRST STREET SE

City WASHINGTON State DC Zip Code 20003

Purpose of Disbursement TRANSFER OF NET JFC FUNDS

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 11 / 08 / 2016

FEC Identification Number: C00002931

Transaction ID : SB22.I16064

Amount of Each Disbursement this Period: 1459898.21

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶ 3284820.11

TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input checked="" type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
Team Ryan

A. NRCC

Full Name (Last, First, Middle Initial)

Mailing Address 320 FIRST STREET SE

City WASHINGTON State DC Zip Code 20003

Purpose of Disbursement TRANSFER OF NET JFC FUNDS (LEGAL PROCEEDINGS FUND)

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 11 / 08 / 2016

FEC Identification Number: C00002931

Transaction ID : SB22.I16065

Amount of Each Disbursement this Period: 168511.47

Memo Item

B. PROSPERITY ACTION, INC.

Full Name (Last, First, Middle Initial)

Mailing Address 320 FIRST ST SE

City WASHINGTON State DC Zip Code 20003

Purpose of Disbursement TRANSFER OF NET JFC FUNDS

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 10 / 27 / 2016

FEC Identification Number: C00377689

Transaction ID : SB22.I15928

Amount of Each Disbursement this Period: 121535.38

Memo Item

C. PROSPERITY ACTION, INC.

Full Name (Last, First, Middle Initial)

Mailing Address 320 FIRST ST SE

City WASHINGTON State DC Zip Code 20003

Purpose of Disbursement TRANSFER OF NET JFC FUNDS

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 11 / 08 / 2016

FEC Identification Number: C00377689

Transaction ID : SB22.I16063

Amount of Each Disbursement this Period: 57706.15

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶ 347753.00

TOTAL This Period (last page this line number only)..... ▶ 4209649.13

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
Team Ryan

A. HODGSON RUSS LLP

Full Name (Last, First, Middle Initial)

Mailing Address 140 PEARL ST #100

City **BUFFALO** State **NY** Zip Code **14202**

Purpose of Disbursement **REFUND**

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement: **10 / 20 / 2016**

FEC Identification Number: **C**

Transaction ID : SB28A.I1588

Amount of Each Disbursement this Period: **1000.00**

Memo Item

B.

Full Name (Last, First, Middle Initial)

Mailing Address

City State Zip Code

Purpose of Disbursement

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement

FEC Identification Number: **C**

Amount of Each Disbursement this Period

Memo Item

C.

Full Name (Last, First, Middle Initial)

Mailing Address

City State Zip Code

Purpose of Disbursement

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement

FEC Identification Number: **C**

Amount of Each Disbursement this Period

Memo Item

SUBTOTAL of Disbursements This Page (optional).....▶	1000.00
TOTAL This Period (last page this line number only).....▶	1000.00